



PATIENT

Maya Sanchez

SPECIES

Feline

BREED

DSH

SEX

Female/Spayed

AGE

10

WEIGHT

11.5

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Dr. Sharkaway

HOSPITAL NAME

Kew Gardens AH

REFERRING VET

Dr. Sharkaway

INVOICE

13997

DATE

6/2/22

PRESENTING CLINICAL SIGNS

MILD TACHYPNEA DISTENDED ABDOMEN NAUSEATED ANOREXIA LETHARGY PU
Abnormal PE/Chem/CBC/UA Results: BA- ELEVATED ALT, ALPK URINE SPGR 1.020

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild, nondependent, particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

The area of the aortic trifurcation was free of pathology.

Normal renal size with asymmetrical margination were present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. A nonobstructive area of medullary mineral to small renoliths were present. The renal medullary volume was subjectively reduced. The left kidney measured 3.9 cm in length. The right kidney measured 4.4 cm in length.

Adrenal Glands

The bilateral adrenal glands were indistinctly visualized yet without overt pathology. The left adrenal gland subjectively measured 0.43 cm width. The right adrenal gland subjectively measured 0.51 cm width.

Spleen

The spleen exhibited mild enlargement with a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 1.2 cm width at the level of the hilus.

Liver/ Gallbladder

The liver presented subjective mild enlargement. The liver exhibited mild generalized uniform increased parenchyma echogenicity compared to the spleen and falciform fat. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic content with mild sediment. Minor torturous to dilated proximal common bile duct, which did not appear to overtly extend to the level of the duodenal papilla, was present. The common bile duct measured 0.2 cm in diameter, not consistent with post hepatic obstruction.



PATIENT	<i>Gastrointestinal</i>
Maya Sanchez	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.28 cm.
SPECIES	
Feline	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The jejunum wall width measured 0.26 cm.
BREED	
DSH	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
Female/Spayed	The right pancreatic limb presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.
AGE	<i>Free Abdomen</i>
10	No omental masses, lymphadenopathy, or distinct / significant peritoneal free fluid were present.
WEIGHT	ULTRASONOGRAPHIC FINDINGS
11.5	<ul style="list-style-type: none"> • Cholangitis / cholangiohepatitis pattern • Suspect low-grade pancreatitis • Overtly normal gastrointestinal tract • Nonspecific mild splenomegaly • Bilateral chronic renal changes with nonobstructive medullary mineral / small renoliths
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The mild splenomegaly is nonspecific with several etiologies including patient / age-related variant splenomegaly owing to sedation if clinically applicable, hyperplasia, hematopoiesis, incidental splenitis, while the possibility of emerging splenic neoplasia cannot be definitively excluded. Likewise, potential for round cell hepatic neoplasia may present in a similar sonographic manner.
IMAGING PERFORMED BY	
Dr. Sharkaway	Assuming normal clotting status, ultrasound-guided hepatosplenic FNA using a 25-gauge needle is warranted for screening cytology. Potential for triad disease may be considered in this patient pending hepatosplenic FNA and if additional gastrointestinal signs, i.e., weight loss, and diarrhea, are noted. Further assessment may include a GI panel to include PLI/TLI/Cobalamin/Folate. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.
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DATE	Empirical therapy for cholangitis / cholangiohepatitis and suspected pancreatitis with as-needed gastrointestinal support would be reasonable with an assessment of clinical response.
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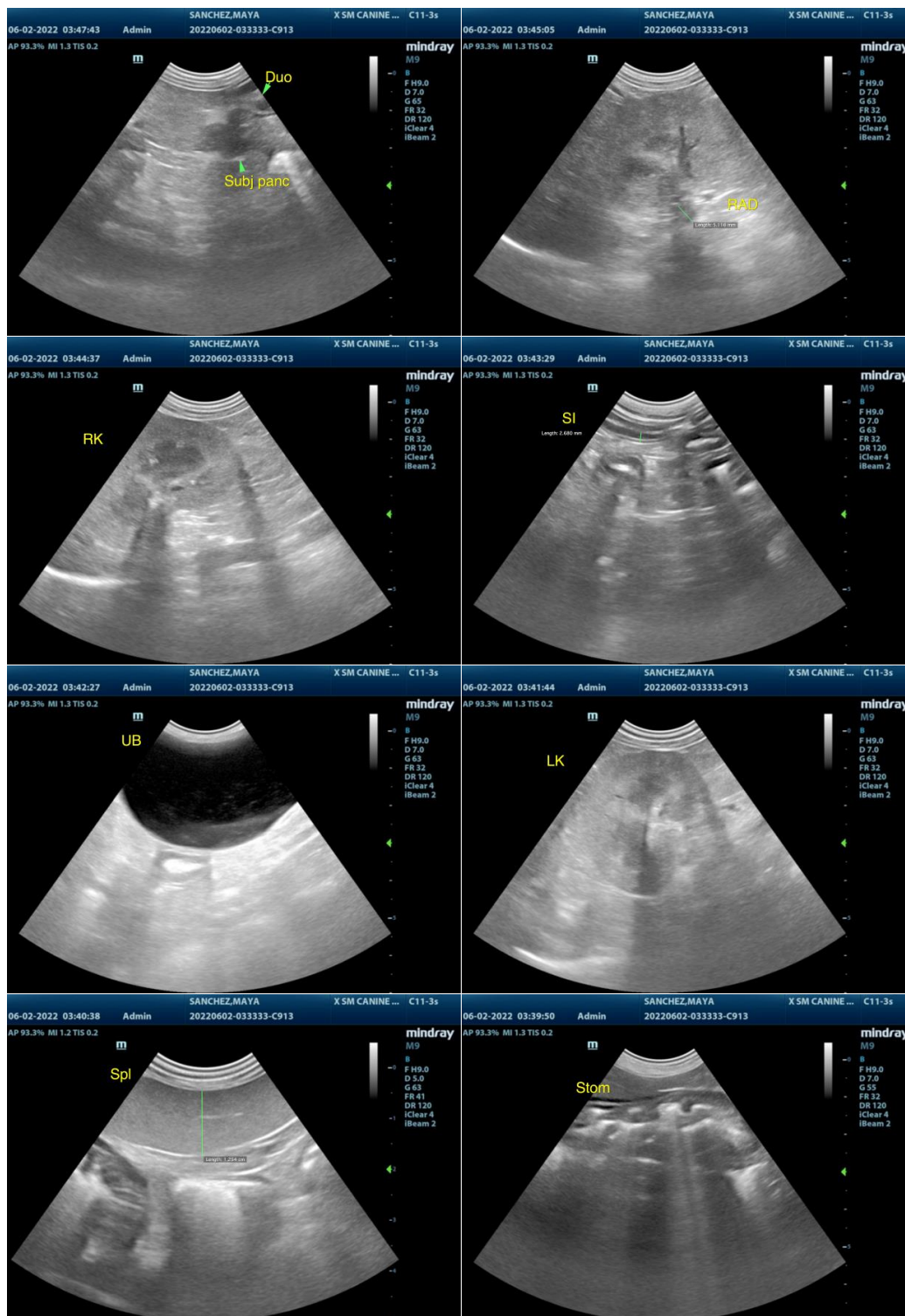
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com