



PATIENT

Freddie Pena

SPECIES

Feline

BREED

Domestic Shorthair

SEX

M/N

AGE

15 y, 2 m

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

Dr. Wayland

INVOICE

17127

DATE

6/21/23

PRESENTING CLINICAL SIGNS

P has had a loss of appetite over the last week Vomiting bile usually every morning, didn't vomit this morning, no diarrhea or stool changes noted by C. Note: 10# of weight loss over the last 3 years, but unclear on weight loss timeline since we haven't seen P during that timeline. C has been trying to get weight off P, but maybe lost a pound more recently/quickly No currently medications

Abnormal PE/Chem/CBC/UA Results: In house CBC/Chemistry showed Amylase elevation 1328, otherwise unremarkable.

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. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.2 cm in length. The right kidney measured 4.2 cm in length.

Adrenal Glands

No overt pathology was noted in the area of the left or right adrenal glands.

Spleen

The spleen exhibited 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 0.94 cm width at the level of the hilus.

Liver/ Gallbladder

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was distended in size with anechoic luminal content. Generalized moderate cystic and common bile duct dilation to the level of the duodenal papilla was noted. The common bile duct dilation measured up to 0.67 cm in diameter. The common bile duct contained anechoic content with no evidence of mucoduct or calculi. Subjective potential for mildly prominent duodenal papilla was noted.



PATIENT

Freddie Pena

SPECIES

Feline

BREED

Domestic Shorthair

SEX

M/N

AGE

15 y, 2 m

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

Dr. Wayland

INVOICE

17127

DATE

6/21/23

Gastrointestinal

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 small intestine presented generalized intact thickened wall layering owing to propensity for generalized prominent muscularis layer. The duodenum wall measured 0.40 cm width. The jejunum wall measured 0.37 cm width. No obstructive pattern was noted.

Normal visible colon wall layers were present with apparent formed fecal matter in lumen.

Pancreas

The pancreas exhibited generalized variable enlargement with capsule asymmetry and nonhomogeneous to mixed echogenic pancreatic parenchyma with pancreatic duct dilation.

Free Abdomen

Intermittent, mildly prominent, homogeneous mesenteric lymph nodes were present exhibiting a normal width: length ratio (<0.5). Intermittent very scant pockets of peritoneal free fluid were noted. No omental masses were noted. Subtle peripancreatic hyperechoic omentum was noted.

ULTRASONOGRAPHIC FINDINGS

- Mild chronic renal changes
- IBD intestinal pattern
- Chronic to chronic active pancreatitis
- Hepatomegaly
- Distended gallbladder with generalized moderate common bile duct dilation
- Intermittent minor sonographically benign / reactive mesenteric lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Based on the intestinal ultrasonographic presentation, chronic to chronic active pancreatitis pattern, hepatomegaly, and suspect cholangitis, IBD, or other chronic inflammatory enteropathy and Triaditis are considered most probable. Potential for low-grade intestinal neoplasia, i.e., lymphoma or emerging post-hepatic obstruction cannot be definitively excluded. Definitive diagnosis would require intestinal and ideally hepatopancreatic biopsies with potential gross inspection of the common bile duct and area of the duodenal papilla.

Given the short half-life of hepatic enzymes in cats, close monitoring for hepatic enzyme elevations or progressive cholestasis +/- screening hepatic FNA cytology, assuming normal clotting status and using a 25-gauge needle, is recommended with potential for sonographic reassessment. Empirically, as-needed gastrointestinal support and Triad disease protocol would be reasonable. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended.



PATIENT

Freddie Pena

SPECIES

Feline

BREED

Domestic Shorthair

SEX

M/N

AGE

15 y, 2 m

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

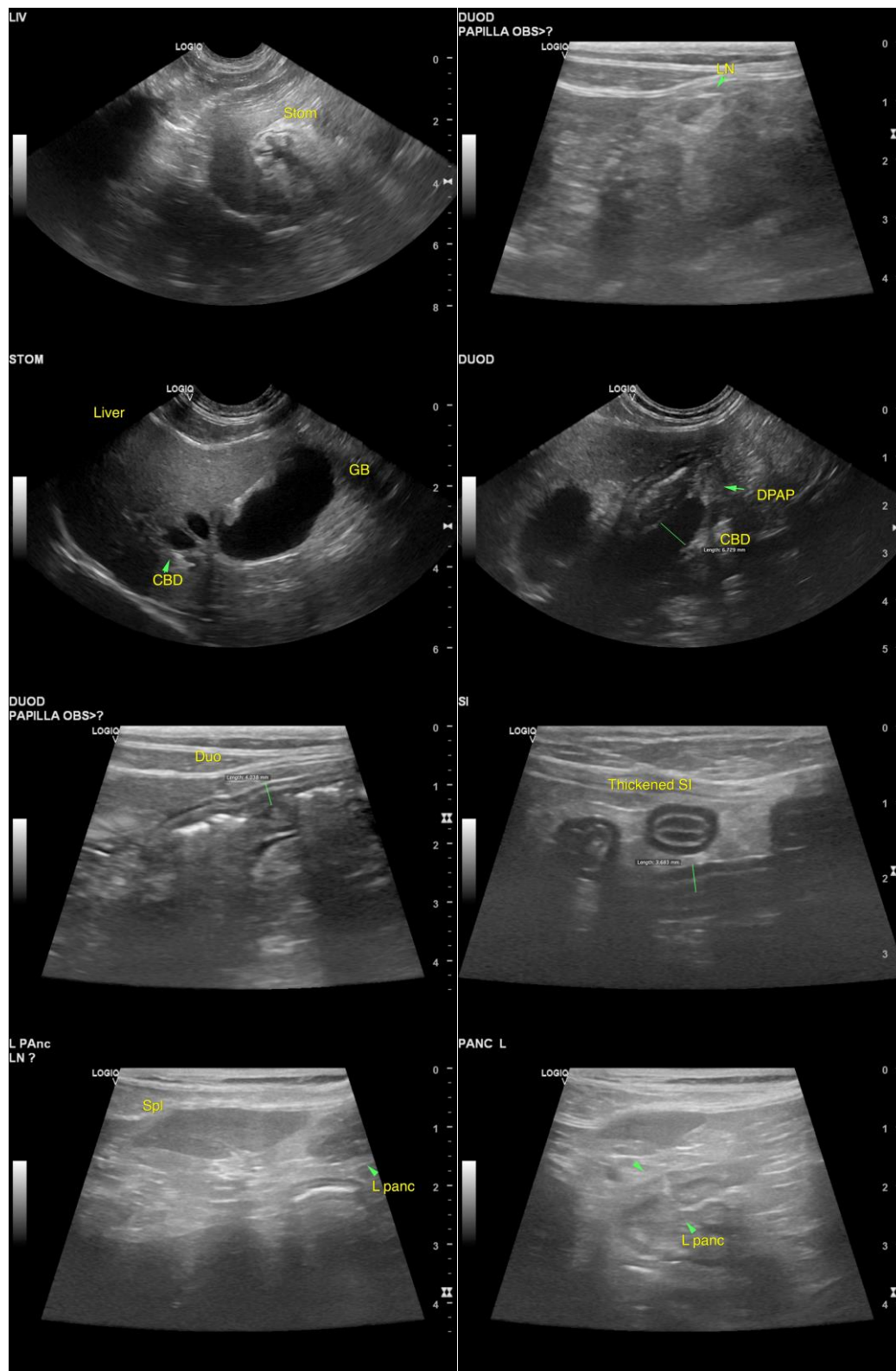
Dr. Wayland

INVOICE

17127

DATE

6/21/23





PATIENT

Freddie Pena

SPECIES

Feline

BREED

Domestic Shorthair

SEX

M/N

AGE

15 y, 2 m

WEIGHT

13.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Carly Pate

HOSPITAL NAME

VCA McKenzie AH

REFERRING VET

Dr. Wayland

INVOICE

17127

DATE

6/21/23



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