



**PATIENT PRESENTING CLINICAL SIGNS**

Ross Selecky Abdominal mass palpated, open sores on paw pads.  
 Medication: Convenia, Methimazole

**SPECIES**  
 ALT 625, AST 196, WBC 26.7

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED *Urinary System***

DSH The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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.

**SEX**

MN The area of the aortic trifurcation was free of pathology.

**AGE**

2009 Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The kidneys exhibited mild nonuniform cortex echogenicity with indistinct corticomedullary border demarcation. No evidence of pelvic dilation was present. Subtle, hyperechoic corticomedullary striations were present in both kidneys. The left kidney measured 3.8 cm in length. The right kidney measured 3.1 cm in length.

**WEIGHT**

12.8

***Adrenal Glands***

The area of the left and right adrenal glands was free of overt pathology.

**INTERPRETED BY**

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

***Spleen***

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease. The spleen measured 1.0 cm width at the level of the mid-spleen.

**IMAGING**

**PERFORMED BY**  
 Rebekah Jakum, CVT  
 ARDMS/RVT

**HOSPITAL NAME**

White Haven VH

***Liver/ Gallbladder***

Generalized hepatomegaly was present primarily owing to a large, irregular, cystic mass occupying the majority of the hepatic parenchyma, measuring ~8.0 cm in diameter. Visualized intact hepatic parenchyma exhibited normal echogenicity with mild to moderate coarse echotexture.

**REFERRING VET**

Dr. Wentz

The gallbladder was normal in size and appearance yet appeared to be displaced owing to the cystic hepatic mass. No evidence of posthepatic obstructive criteria was noted. The cystic and common bile ducts were normal.

**INVOICE**

17206

**DATE**

6/29/23



**PATIENT** *Gastrointestinal*

Ross Selecky The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate echogenic, nonshadowing ingesta, sonographically suggestive of food without signs of obstruction or foreign material.

**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.

**BREED**

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

**DSH**

**Pancreas**

**SEX**

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

**MN**

**Free Abdomen**

**AGE**

No evidence of overt lymphadenopathy, omental masses, or peritoneal effusion was present.

**2009**

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

**Primary Findings**

12.8

- Nonspecific chronic renal changes
- Hepatomegaly with large cystic mass

**INTERPRETED BY**

**Secondary Findings**

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

- Gastric ingesta - sonographically consistent with food

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**IMAGING PERFORMED BY**  
Rebekah Jakum, CVT  
ARDMS/RVT

The cystic mass was nonspecific with considerations including large biliary cyst adenoma, biliary cyst adenocarcinoma, or other. Correlation with pending cytology +/- mass fluid analysis and C/S, if clinically indicated, could be considered. A large, biliary cyst adenoma is suspected.

**HOSPITAL NAME**

White Haven VH

**REFERRING VET**

Dr. Wentz

**INVOICE**

17206

**DATE**

6/29/23





**PATIENT**

Ross Selecky

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

2009

**WEIGHT**

12.8

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

White Haven VH

**REFERRING VET**

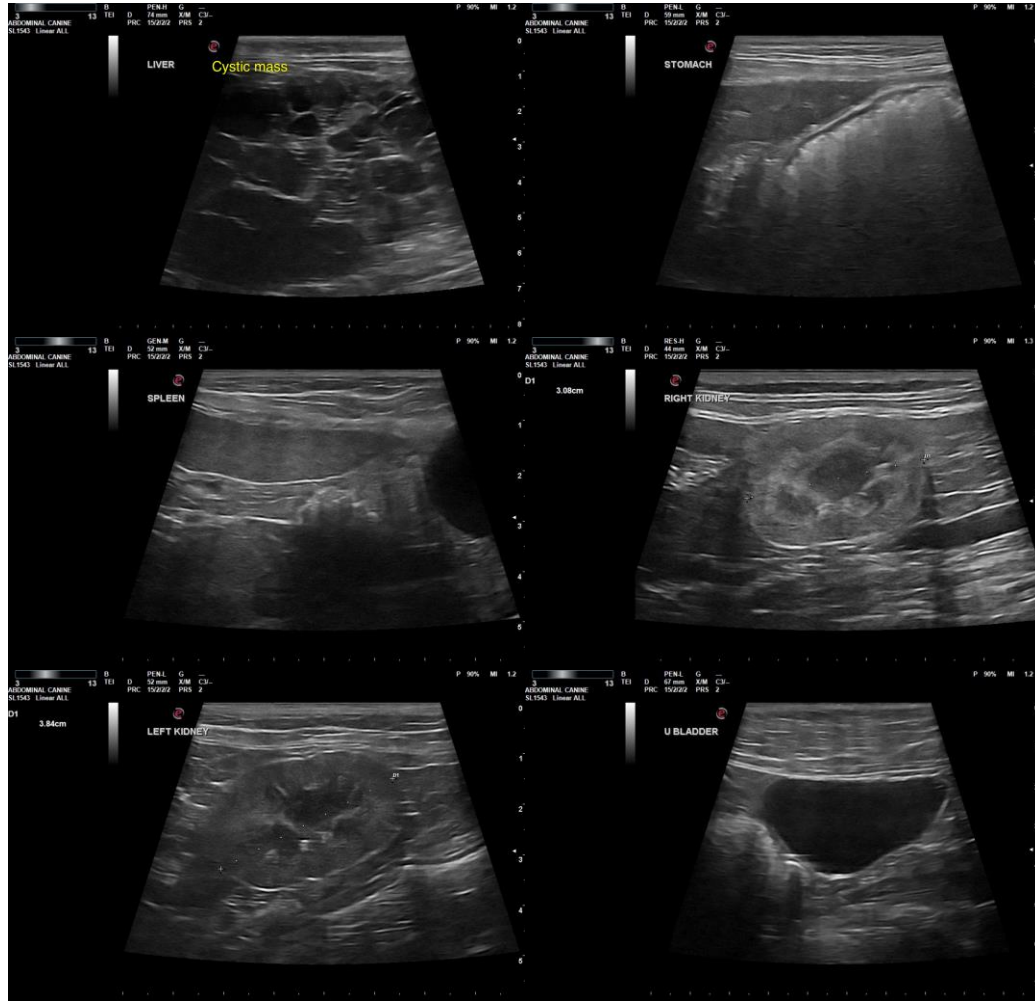
Dr. Wentz

**INVOICE**

17206

**DATE**

6/29/23



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](mailto:info@sonopath.com)