

**PATIENT**

Willow Lovett

**SPECIES**

Feline

**BREED**

DMH

**SEX**

FS

**AGE**

10 years

**WEIGHT**

10 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Joe Westerhoff

**INVOICE**

14340

**DATE**

7/21/22

**PRESENTING CLINICAL SIGNS**

Lethargic, not eating  
Abnormal PE/Chem/CBC/UA Results: Hepatic lipidosis, jaundice

**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.

The area of the aortic trifurcation was free of pathology.

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 minor loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.8 cm in length. The right kidney measured 4.0 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.27 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.24 cm width.

**Spleen**

The spleen was borderline to mildly enlarged measuring 1.0-1.1 cm width. The spleen maintained symmetrical capsule contour and a finely textured homogeneous splenic parenchyma. No masses or nodules were noted. Normal splenic vascularity was noted.

**Liver/ Gallbladder**

The liver exhibited generalized enlargement with symmetrical to rounded hepatic contour. Uniform mild generalized hypoechoic hepatic parenchyma with subtle increased prominence of the portal vascular borders was present. No hepatic masses or nodules were noted. The gallbladder was non-distended in size containing anechoic content. The gallbladder walls were sonographically normal without evidence of gallbladder or peripheral gallbladder inflammatory criteria. The proximal common bile duct was mildly dilated and tortuous without overt post hepatic obstruction. The common bile duct dilation did not overtly extend to the level of the duodenal papilla. The common bile duct dilation measured 0.26 cm diameter.

**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 gastric body wall width measured 0.26 cm.

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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 duodenum wall width measured 0.23 cm. The jejunum wall width measured 0.21 cm. The ileocolic wall width measured 0.29 cm.

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

***Pancreas*****BREED**

DMH

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.

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***Free Abdomen***

Subtle perihepatic hyperechoic mesentery was present. Intermittent scant pockets of perihepatic free fluid were noted. Intermittent to several mesenteric lymph nodes were present. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). Regional perilymphatic hyperechoic mesentery was present. An example of a larger to swollen mesenteric lymph node exhibiting uniform hypoechoic parenchyma measured 2.0 cm x 1.4 cm. No omental masses were present.

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**ULTRASONOGRAPHIC FINDINGS**

- Hepatomegaly exhibiting generalized mild uniform parenchyma hypoechogenicity
- Sonographically unremarkable gallbladder, minor nonobstructive proximal common bile duct dilation
- Variably sized hypoechoic to swollen Intermittent mesenteric lymphadenopathy with perilymphatic hyperechoic mesentery
- Borderline to mild splenomegaly
- Sonographically unremarkable gastrointestinal tract

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although sampling is required for further assessment, primary considerations for the liver may include acute hepatic inflammation i.e., acute hepatitis (Infectious, toxin, etc.) with warranted concern for infiltrative hepatic neoplasia with round cells, i.e., lymphoma or other. Likewise, the hypoechoic to swollen mesenteric lymph nodes may indicate significant lymphoid hyperplasia, or reactive lymphadenitis, with primary concern for lymphatic neoplastic criteria. Assuming normal clotting status, hepatic and lymphatic FNA for screening cytology is recommended for further assessment.

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The overall appearance of the liver was not sonographically consistent with hepatic lipidosis appearance. No overt evidence of post hepatic obstruction, likely indicating hepatic cholestasis and secondary jaundice.

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Pending sampling, aggressive therapy for acute hepatitis with as-needed gastrointestinal support would be reasonable. A guarded prognosis pending hepatic and lymphatic sampling.

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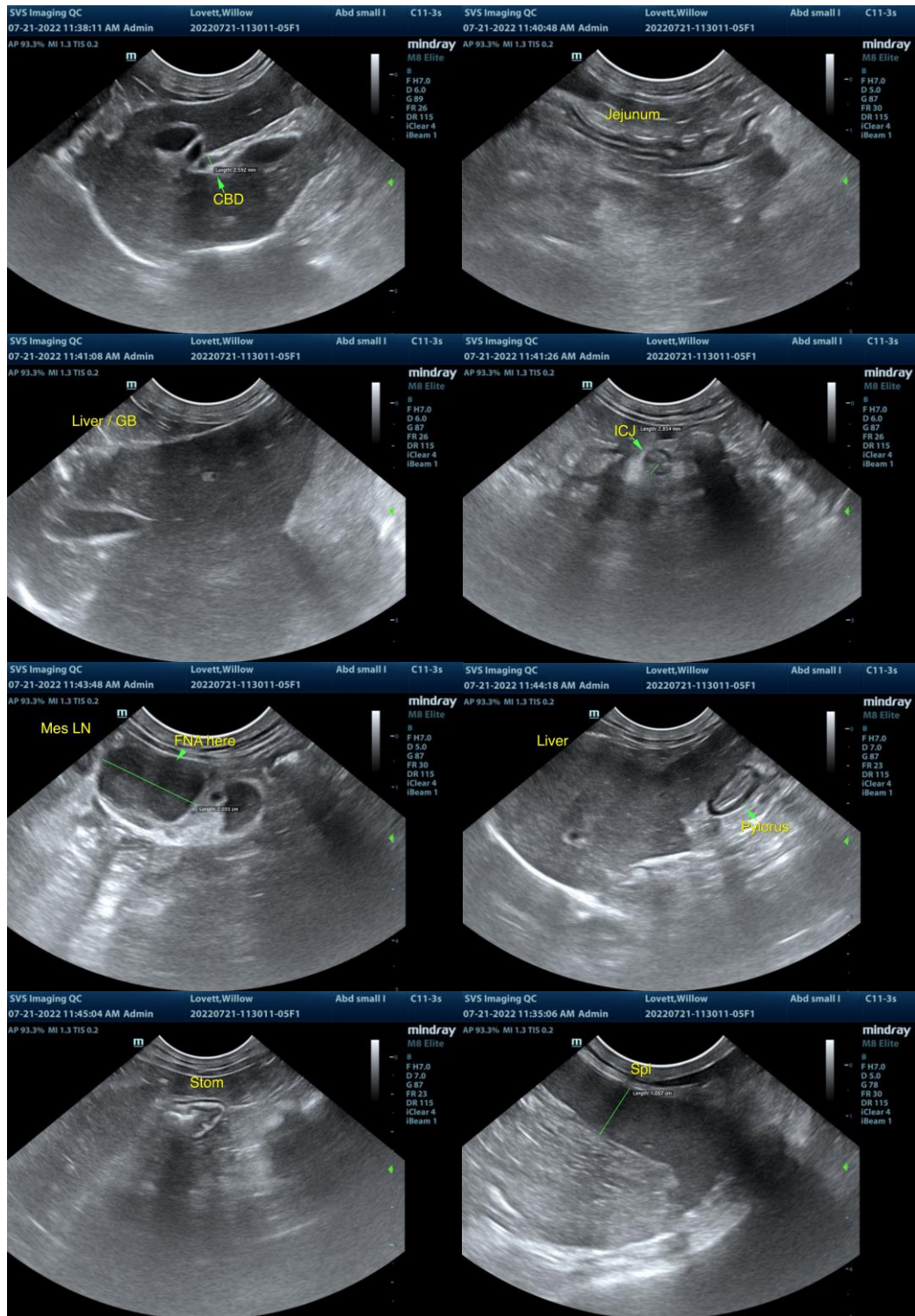
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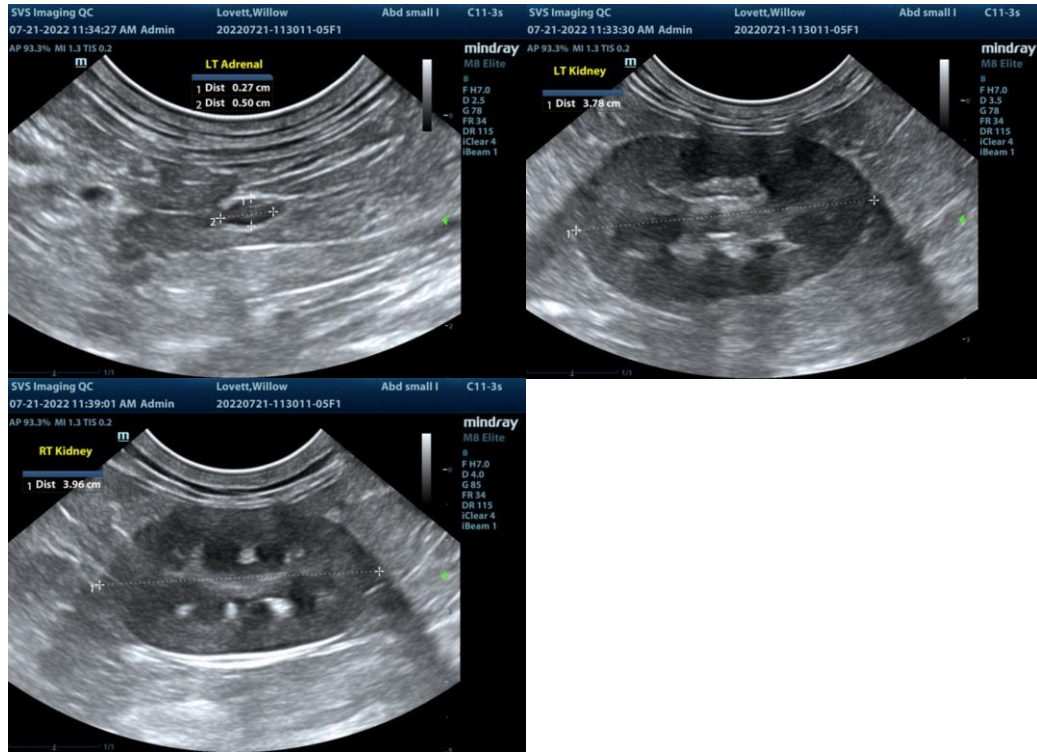
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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