



PATIENT	PRESENTING CLINICAL SIGNS
Vinnie Gillen	History: depressed, jaundiced Current Medications Clavamox, Cerani , Mirtazipine Primary Question/Differential to Be Answered in This Exam define etiology of cholestasis
SPECIES	Abnormal PE/Chem/CBC/UA Results: elevated bilirubin noted Saturday (5.4) Recheck BW today- NA- decreased 145 potassium- decreased 2.5 calcium Decreased 7.2 ALB- decreased 2.2 Chloride decreased 104 AST increased 59
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
DSH	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with moderate nondependent primarily particulate to pinpoint hyperechoic sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
MN	
AGE	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. Minor pyelectasia was present in the right kidney. The left kidney measured 4.7 cm in length. The right kidney measured 4.6 cm in length.
9yr	
WEIGHT	The area of the aortic trifurcation was free of pathology.
11.8lb	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The bilateral adrenal glands were mildly prominent in size yet not consistent with neoplastic criteria. Suspect bilateral benign or stress hyperplasia. The left adrenal gland measured 0.59 cm width. The right adrenal gland measured 0.56 cm width.
IMAGING PERFORMED BY	Spleen
Jenna Walsh CVT	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule exhibited minor asymmetrical contour. 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 0.78 cm in width at the level of the hilus.
HOSPITAL NAME	Liver
The Veterinary Hospital	The liver presented 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.
REFERRING VET	
Dr. Johnson	
INVOICE	The gallbladder exhibited mildly distended size with mild nondependent mildly hyperechoic luminal debris. The proximal common bile duct was dilated and tortuous without overt post hepatic obstruction. The common bile duct measured 0.22 cm width. No evidence of post hepatic obstructive criteria.
11170ag	
DATE	Gastrointestinal
07/25/2022	



PATIENT The stomach presented intact yet mildly prominent wall layering with a normal wall layer ratio. The lumen of the stomach contained minor retained chyme with no signs of ileus, obstruction or foreign material. The ventral gastric body wall measured 0.35 cm in width.
Vinnie Gillen

SPECIES The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor areas of segmental small intestinal ileus were present. The lumen of the small intestine was empty with no signs of obstruction or foreign material. The duodenum measured 0.24 cm in width. The jejunum wall measured 0.24 cm in width.
Feline

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

SEX *Pancreas*

The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat (more prominent in the left pancreatic limb). Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.
MN

AGE *Free Abdomen*
9yr

No effusion was present.

WEIGHT Focally enlarged intermittent colic lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 0.56 cm width.
11.8lb

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

- Moderate urinary bladder sediment
- Nonspecific age-related renal changes with minor right kidney pyelectasia
- Mild hepatomegaly
- Mildly distended gallbladder with minor luminal debris, concurrent nonobstructive proximal common bile duct dilation-suspect cholangitis
- Pancreatitis with regional peri pancreatic reactive mesentery
- Mild gastroenteritis pattern with potential mild colic lymphadenitis

IMAGING PERFORMED BY

Jenna Walsh CVT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

The Veterinary Hospital

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.

REFERRING VET

Dr. Johnson

No evidence of post hepatic obstruction was noted which may suggest hepatic cholestasis secondary to hepatic inflammatory process i.e. cholangitis/cholangiohepatitis with pancreatitis suspected as a contributing factor. Minor potential for occult round cell hepatic neoplasia yet thought less likely. Assuming normal clotting status and using a 25g needle a screening hepatic FNA could be considered. A spec fPL is recommended.

INVOICE

11170ag

Empirically medical therapy for cholangiohepatitis and pancreatitis with as needed GI support and assessment of clinical response with monitoring of degree of cholestasis and liver enzymes would be reasonable. Monitoring of Ca levels is suggested as hypocalcemia may at times be a negative prognostic indicator in cats with pancreatitis.

DATE

07/25/2022



PATIENT

Vinnie Gillen

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

9yr

WEIGHT

11.8lb

INTERPRETED BY

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(Canine and Feline)

IMAGING PERFORMED BY

Jenna Walsh CVT

HOSPITAL NAME

The Veterinary
Hospital

REFERRING VET

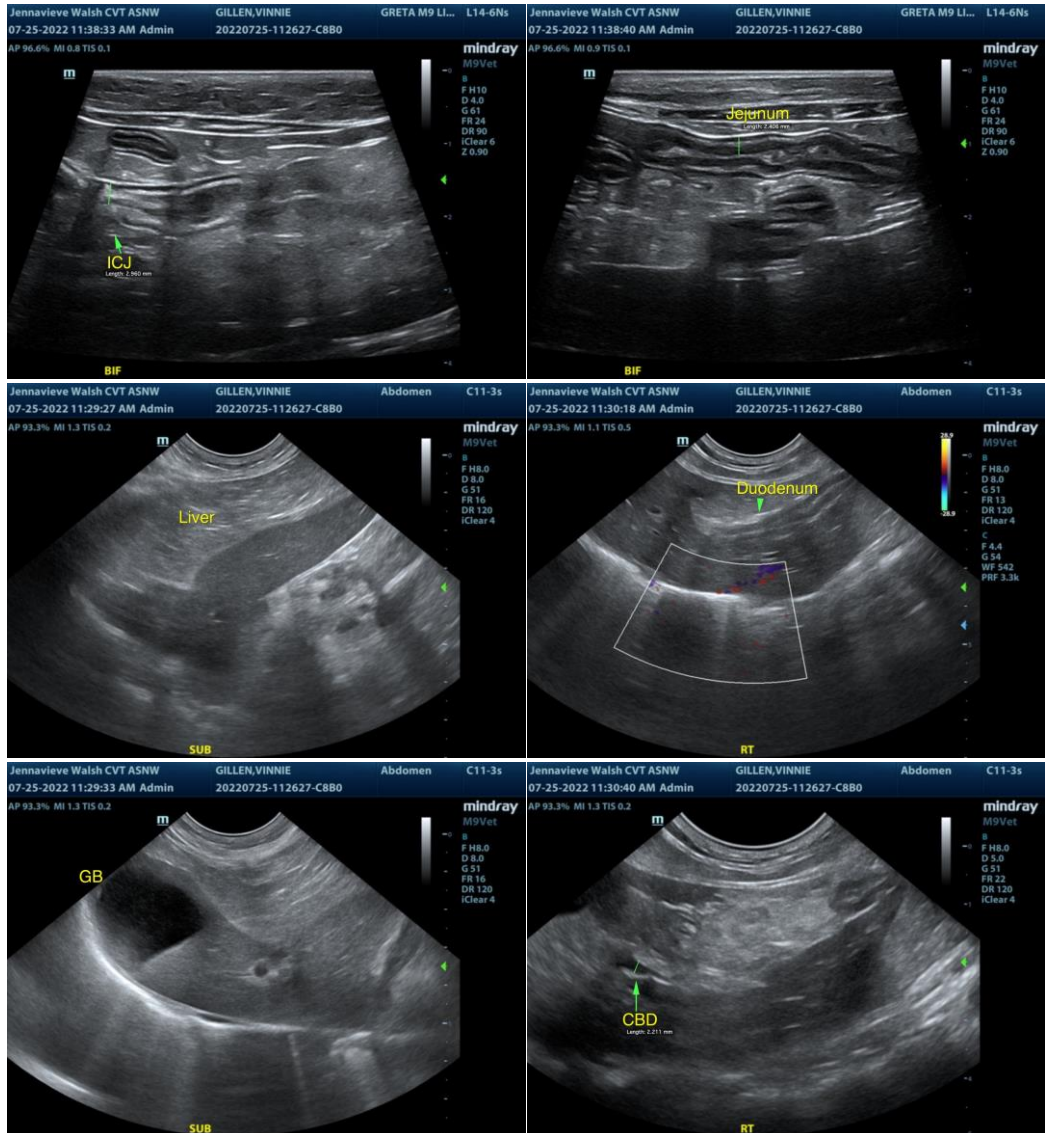
Dr. Johnson

INVOICE

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Vinnie Gillen

SPECIES

Feline

BREED

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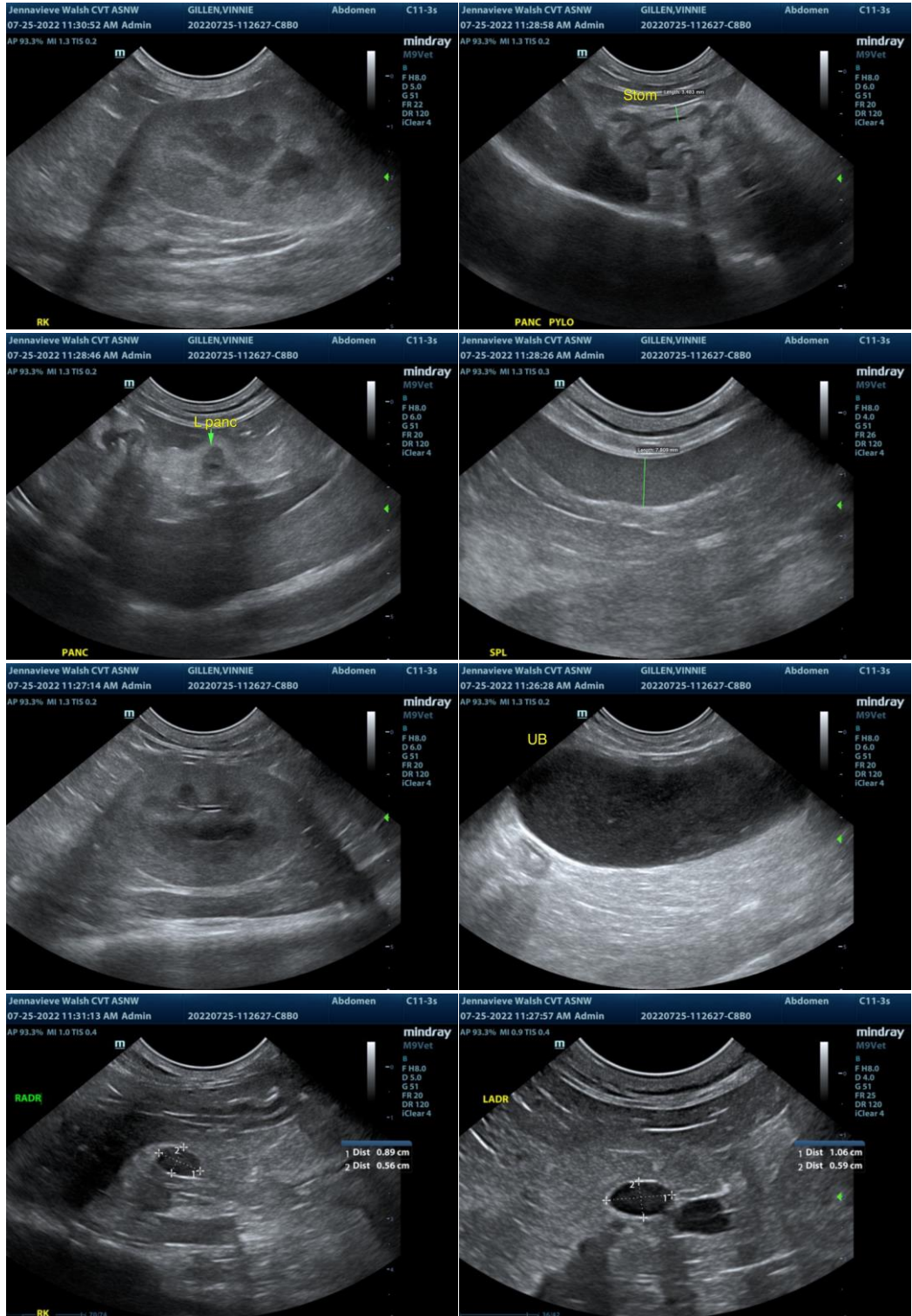
Dr. Johnson

INVOICE

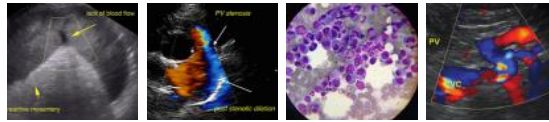
11170ag

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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



PATIENT visible in the image/video clips provided.

Vinnie Gillen 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.

SPECIES R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

Feline info@SonoPath.com

BREED

DSH

SEX

MN

AGE

9yr

WEIGHT

11.8lb

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(Canine and Feline)

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