



PATIENT	PRESENTING CLINICAL SIGNS
Dawn Guetensperger	History: Lethargy, inappetence, elevated liver values Medication: Cerenia, Denamarin, Mirtazapine, Metronidazole, Clavamox
SPECIES	ALP 317, ALT 147, Bili 6.3.
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Domestic Shorthair	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 were noted.
SEX	The area of the aortic trifurcation was free of pathology.
FS	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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The right kidney measured 3.2 cm. The left kidney measured 3.4 cm. Small focal cortical infarcts noted in both kidneys.
AGE	
12 years	
WEIGHT	Adrenal Glands
7 Pounds	The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.46 cm in width. The left adrenal gland measured 0.27 cm in width.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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 measures 0.71 cm in width.
IMAGING PERFORMED BY	Liver
Rebekah Jakum, CVT ARDMS/RVT	The liver presented subjective mild enlargement. The parenchyma of the liver exhibited mild uniform increased parenchyma echogenicity with uniform to mildly 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 proximal common bile duct was mildly dilated (0.43 cm diameter) and tortuous without overt post hepatic obstruction. This finding may suggest age related changes or secondary to underlying cholangitis / cholangiohepatitis especially if previous or current liver enzymes elevations have been noted.
HOSPITAL NAME	
Maple Hills VH	
REFERRING VET	
Dr. Eckman	
INVOICE	Gastrointestinal
24762	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. Gastric body wall measured 0.25 cm.
DATE	
8.17.2021	



PATIENT Dawn Guetensperger
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. Duodenum wall measured 0.26 cm. Jejunum wall measured 0.20 cm.

SPECIES Feline
Ileocolic wall measured 0.26 cm. Normal visible colon wall layers were present with apparent formed feces in lumen.

BREED Domestic Shorthair
Pancreas

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 was evident.

Free Abdomen

SEX FS
Intermittent enlarged mesenteric lymph nodes were noted, example measured 0.77 cm in diameter. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width:length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. No effusion.

ULTRASONOGRAPHIC FINDINGS

- Mild chronic renal changes with small cortical infarcts
- Hepatopathy with mild increased parenchyma echogenicity
- Mild gallbladder debris with minor non-obstructive proximal common bile duct dilation
- Intermittent mesenteric lymphadenopathy – suspect reactive lymphadenitis, minor potential for emerging neoplastic lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Vacuolar hepatopathy, inflammatory hepatic parenchymal or hepatobiliary process (i.e., cholangiohepatitis) with associated mild gallbladder debris and non-obstructive proximal common bile duct dilation (i.e., mild cholangitis) possible. Minor potential for hepatic neoplasia, yet considered less likely. Assuming normal clotting status, hepatic, and, if accessible lymphatic FNA for screening cytology +/- culture and sensitivity is warranted. The suspected mesenteric lymphadenitis may possibly be owing to inflammatory bowel episode given the patient's inappetence. Potential for triad disease may be considered if persistent gastrointestinal signs or evidence of weight loss are noted. Metronidazole/Zithromax combination with as-needed gastrointestinal support and potential hydrolyzed diet trial over time may prove beneficial.

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

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PATIENT

Dawn Guetensperger

SPECIES

Feline

BREED

Domestic Shorthair

SEX

FS

AGE

12 years

WEIGHT

7 Pounds

INTERPRETED BY

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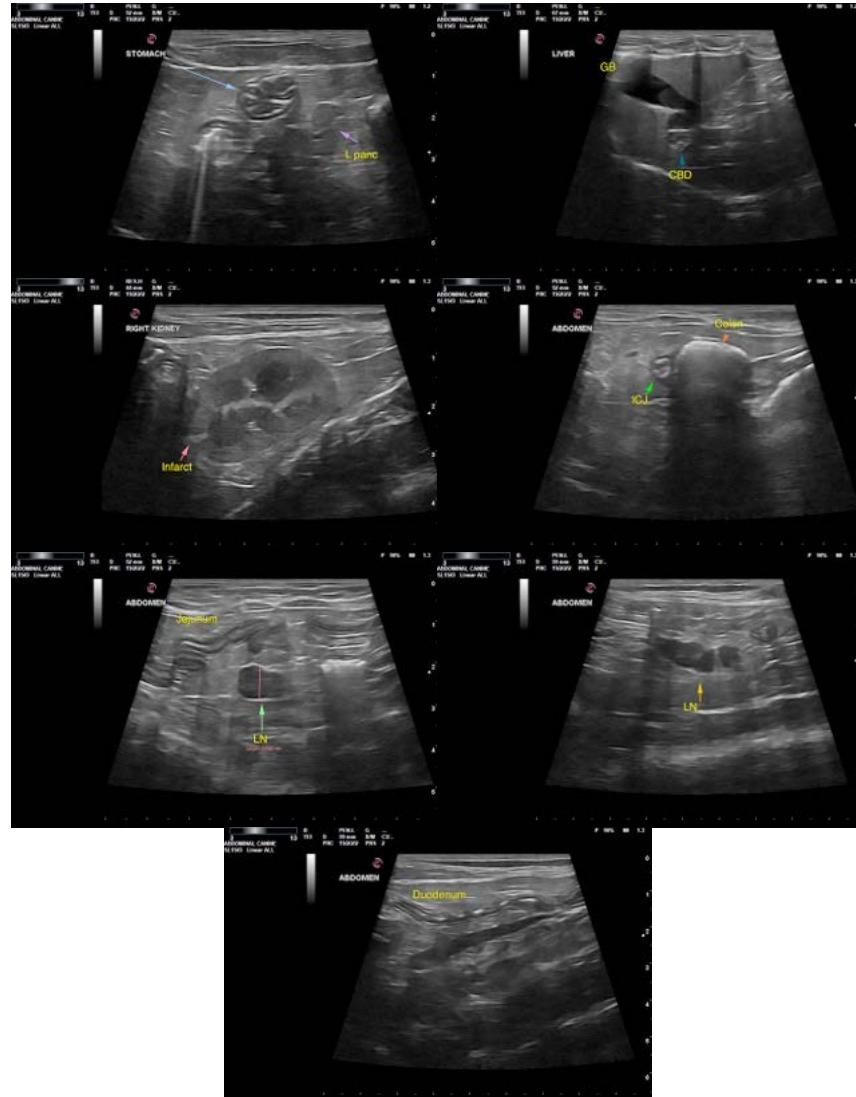
Dr. Eckman

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

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