



PATIENT PRESENTING CLINICAL SIGNS

Pookie Edwish
 PU/PD, weight loss, daily vomiting, eating 3-4x daily.
 Medication: IVF, ampicillin

SPECIES
 Feline
 WBC 31.0, ALT 714, ALP 341, TBIL 10.2, T4 1.7

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

DSH
 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.

SEX
 FS
 The area of the aortic trifurcation was free of pathology.

AGE
 2011
 Normal renal size with asymmetrical margination were present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The left kidney measured 4.1 cm in length. The right kidney measured 3.9 cm in length.

WEIGHT
 7
Adrenal Glands

The bilateral adrenal glands were normal in size and contour. Pinpoint areas of mineralization were present without capsular distortion or overt tumors. This is an age-related finding and not pathological. The left adrenal gland measured 0.49 width and the right adrenal gland measured 0.53 width.

INTERPRETED BY

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

Spleen

The spleen exhibited borderline to mild enlargement with 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 1.1 cm width at the level of the mid spleen. There were no splenic masses or nodules visualized.

IMAGING PERFORMED BY
 Rebekah Jakum, CVT
 ARDMS/RVT

HOSPITAL NAME

Blue Ridge VC

Liver/ Gallbladder

The liver exhibited mild to possible moderate enlargement with areas of capsule asymmetry and mildly nonhomogeneous increased hepatic parenchyma echogenicity with marked lobar biliary tree dilation. The gallbladder was distended in size with mildly thickened gallbladder wall and mild increased echogenicity. Anechoic content was present in the gallbladder with mild nonorganized lumen sediment. Marked torturous common bile duct dilation was present extending caudally from the gallbladder and cystic biliary duct to the approximate level of a spherical, nonhomogeneous, centrally cystic mass lesion in the area of the mid-common bile duct measuring ~2.1 cm diameter. Concurrent decreased common bile duct dilation was noted subjectively to the level of the duodenal papilla. The duodenal papilla appeared thickened measuring 0.9 cm in diameter.

REFERRING VET

Dr. Filchner

INVOICE

14854

DATE

8/17/23



PATIENT *Gastrointestinal*

Patient: Pookie Edwish
Description: The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no evidence of retained gastric ingesta, fluid, or foreign material.

Species: Feline
Description: The small intestine presented intact mildly prominent to thickened wall layering without evidence of obstructive pattern. The small intestinal wall width measured up to 0.27 cm.

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

BREED *Pancreas*

Breed: DSH
Description: 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.

SEX *Free Abdomen*

Sex: FS
Description: No overtly visualized significant omental lymphadenopathy was present. Small pockets of scant peritoneal free fluid were noted.

AGE **ULTRASONOGRAPHIC FINDINGS**

2011

WEIGHT *Primary Findings*

7

- Hepatopathy exhibiting significant lobar biliary tree dilation
- Distended gallbladder with moderate lumen sediment
- Marked tortuous common bile duct dilation with spherical homogeneous centrally cystic mass lesion in area of mid-common bile duct
- Subjective thickened duodenal papilla
- Intact mildly thickened small bowel wall
- Scant peritoneal effusion

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Secondary Findings

- Benign / mild splenomegaly - nonspecific
- Bilateral chronic renal changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hepatobiliary presentation is suggestive of chronic inflammatory hepatobiliary criteria, i.e., chronic cholangitis / cholangiohepatitis, with strong concern for chronic post hepatic obstruction, given the presence of significant lobar biliary tree dilation and degree of common bile duct dilation. This may potentially be owing to mass lesion in the area of the mid-common bile duct, although superimposing hepatic nodular lesion i.e., biliary adenoma or similar, is possible. Likewise, potential for obstructive criteria at the level of the duodenal papilla is possible.

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PATIENT

Pookie Edwish

Potential for chronic inflammatory enteropathy i.e., IBD or Triad Disease, is a possibility in this patient. Referral for further assessment, surgical consult, and/or advanced imaging such as CT for further clarification and potential surgical planning is recommended.

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

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REFERRING VET

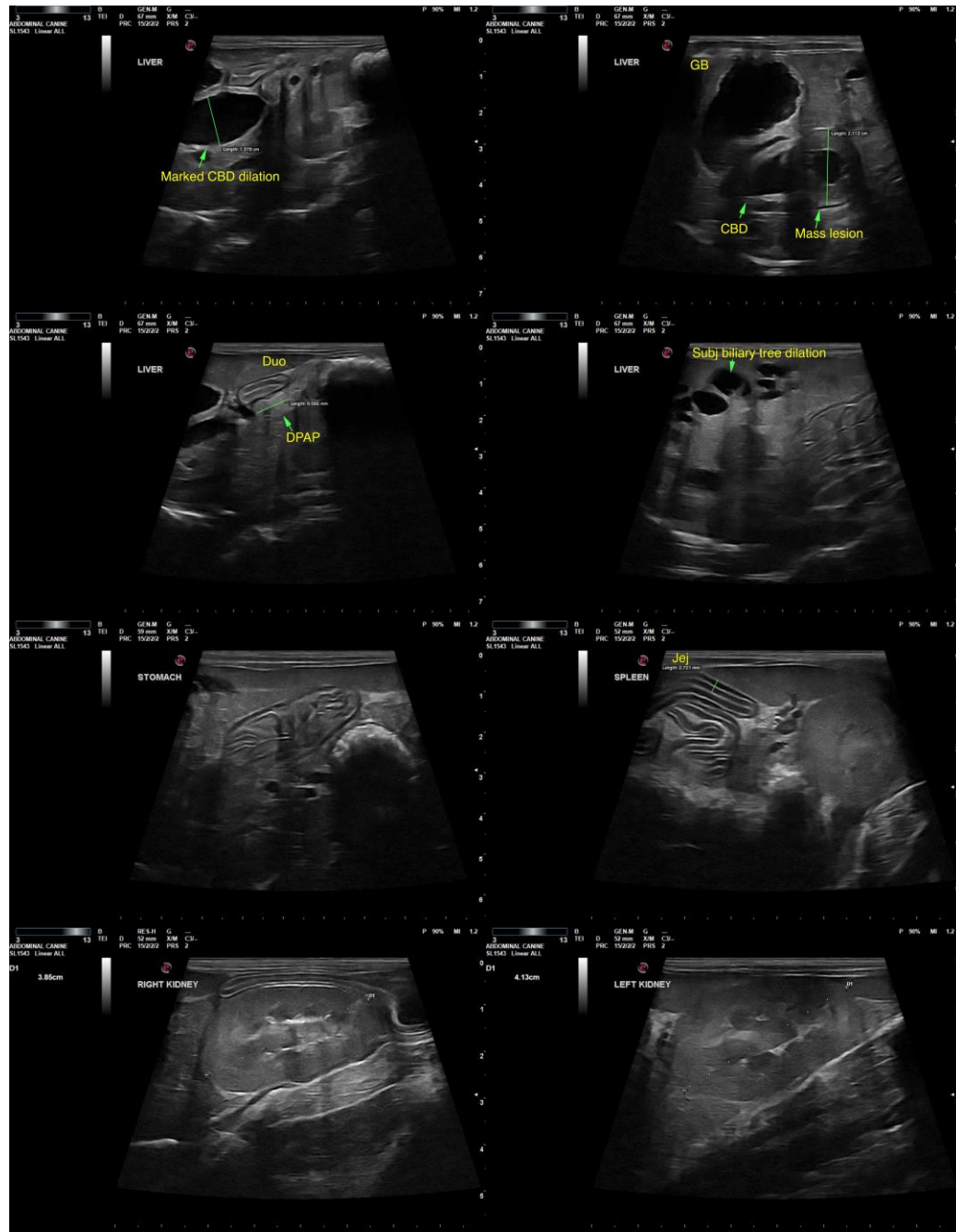
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PATIENT

Pookie Edwish

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.

SPECIES

Feline

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.

BREED

DSH

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SEX

FS

AGE

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