

PATIENT PRESENTING CLINICAL SIGNS

PATIENT Romeo Powell
SPECIES Patient is a diabetic on Lantus. History intermittent pancreatitis. Mild HCM previously diagnosed on echocardiogram - no medications. Recent history weight loss with normal labwork. Romeo has become anorexic and QAR in the last few days. Also on cerenia. Plan to do FreeStyle Libre
 Feline Abnormal PE/Chem/CBC/UA Results: Gluc 529; fPL abnormal; USG 1.062; pH 7.0; pro 30; gluc 1000; fructosamine 374

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

DMH 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 were noted.

SEX

Neutered Male The area of the aortic trifurcation was free of pathology.

AGE

12 Years Normal size and margination was 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. Minor pyelectasia noted in both kidneys. Pinpoint medullary mineralization present in both kidneys. The left kidney measured 4.4 cm.

WEIGHT

12.8 Pounds

Adrenal Glands

The adrenal glands exhibited mild subjective prominent size, yet normal overall contour and parenchyma echogenicity. The left adrenal gland measured 0.51 cm. The right adrenal gland measured 0.44 cm.

INTERPRETED BY

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

Spleen

The spleen exhibited 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 0.78 cm in width.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Liver

HOSPITAL NAME

Anchor AH

The liver was mildly enlarged. Subtle generalized yet uniform mild increased parenchyma echogenicity was noted. The echotexture of the liver parenchyma was uniform with a mild 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 gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Dr. Katherine Pietsch

Gastrointestinal

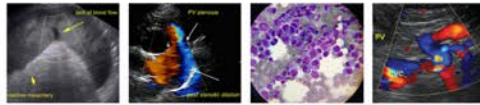
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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained echogenic, nonshadowing ingesta most consistent with post prandial presentation without signs of ileus, obstruction or foreign material. Pylorus wall measured 0.22 cm. No evidence of mechanical pyloric outflow obstruction or gastric mural pathology.

DATE

The small intestine presented intact wall layering with subjective propensity for mildly prominent mucosal layer. Segmental jejunal digesta/chyme was present. Duodenum wall measured 0.28 cm. Jejunum wall measured 0.30 cm.



PATIENT

Romeo Powell

Ileocolic wall measured 0.36 cm. Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

SPECIES

Feline

The pancreas was normal in size with mild asymmetrical contour and heterogeneous to mixed echogenic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

BREED

DMH

Intermittent, mildly prominent to enlarged jejunocolic lymph nodes were present. Example measured 0.84 c in width. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

SEX

Neutered Male

A small pocket of scant free fluid was noted around the caudal liver margins.

ULTRASONOGRAPHIC FINDINGS

AGE

12 Years

- Mild hepatomegaly with subtle increased parenchyma echogenicity
- Mild gallbladder debris
- Mild chronic renal changes with minor pyelectasia
- Mixed echogenic pancreas – suggestive of mixed inflammatory pattern (i.e., chronic active to chronic pancreatitis)
- Gastric ingesta – post-prandial presentation versus some degree of gastric hypomotility if documented NPO.
- Possible inflammatory enteropathy with associated jejunocolic lymphadenopathy

WEIGHT

12.8 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

The overall appearance of the liver, although not definitive, is suggestive of reactive, metabolic or vacuolar (diabetic) hepatopathy. Potential for inflammatory hepatic or hepatobiliary mineralization given the presence of minor gallbladder debris. No overt evidence of neoplasia, which is considered unlikely. GI panel to include PLI, TLI, cobalamin and folate, and urine culture and sensitivity (given the presence of glucosuria) recommended. This patient may be at risk for diabetic ketoacidosis. Hospitalization with stabilization of blood glucose levels pending FreeStyle Libre use. 3-view chest radiographs suggested if not done to rule out occult thoracic pathology.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Anchor AH

For an additional charge, internal medicine consult can be utilized through Sonopath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

REFERRING VET

Dr. Katherine Pietsch

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath.

<https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

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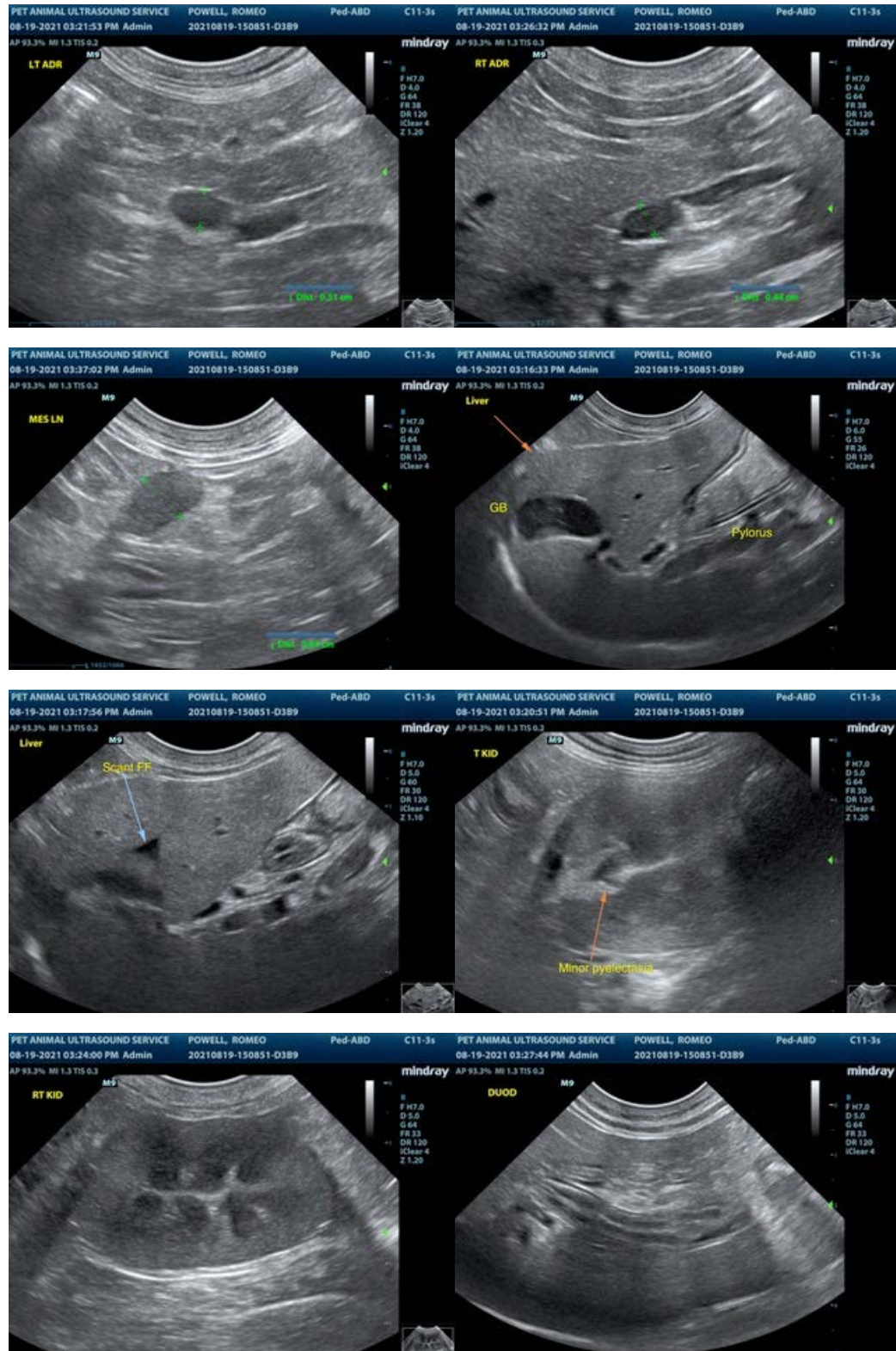
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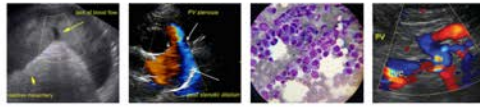
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

DMH

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

Neutered Male

AGE

12 Years

WEIGHT

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