

PATIENT

Missy Schoenberger

SPECIES

Feline

BREED

DLH

SEX

FS

AGE

10 years

WEIGHT

12 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

VCA Feline Animal
Hospital

REFERRING VET

Dr Vincent Fleming

INVOICE

14482

DATE

8/2/22

PRESENTING CLINICAL SIGNS

-History - Patient relocated back to Reno after moving to Washington, generally well at home but vomiting on occasion, 1-2x daily last two days, no D, indoor only. Diet: PPP Medications: Pred 2.5mg PO q96 Cerenia 4mg PO q24 B12 SQ q monthly Tylosin q48.. Chronic vomiting, Wellness/Preventive care, Suspect IBD - mild, Pyloric gastritis - mild, Elevated folate levels

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction, 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 mild asymmetrical renal 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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Minor areas of medullary mineral were present. The left kidney measured 3.9 cm in length. The right kidney measured 4.2 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 0.37 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.37 cm width at the caudal pole.

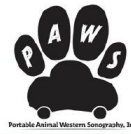
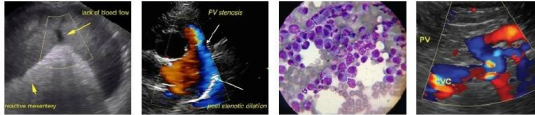
Spleen

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 0.98 cm width at the level of the hilus.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content.

The proximal common bile duct was minorly dilated and tortuous without overt evidence of post hepatic obstructive criteria. The common bile duct dilation measured 0.18 cm diameter.



PATIENT *Gastrointestinal*

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The stomach exhibited Intact and overtly normal wall layering. The pylorus wall width measured 0.29 cm. The stomach contained a mild amount of nonshadowing ingesta / chyme along with a focal area of shadowing ingesta with potential for small nonobstructive hairball density.

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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 measured 0.24 cm width. The jejunum wall measured 0.23 cm width. The ileocolic wall width measured 0.32 cm.

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

SEX

Pancreas

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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

Intermittent, mildly prominent, mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example lymph node measured 0.28 cm diameter. No omental masses or evidence of peritoneal free fluid were noted.

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ULTRASONOGRAPHIC FINDINGS

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DABVP (Canine and Feline)

- Overtly normal stomach with mild retained nonshadowing to focally shadowing ingesta, possible small nonobstructive hairball density
- Overtly normal small bowel
- Mild chronic renal changes exhibiting pinpoint medullary mineral
- Minor nonobstructive common bile duct dilation
- Intermittent minor subjectively benign / mild reactive mesenteric lymph nodes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The common bile duct dilation finding may suggest age related changes or secondary to underlying cholangitis / cholangiohepatitis especially if previous or current liver enzymes elevations have been noted. No overt signs of post hepatic obstruction.

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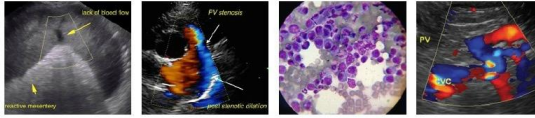
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Potentially, current Prednisolone therapy may be masking gastrointestinal mural changes. The mildly elevated folate is nonspecific yet may suggest upper small intestinal disease. Potential for low-grade chronic gastritis is possible.

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Continued supportive care including dietary therapy and gastroprotectants +/- hairball therapy if previous or current history of hairballs, would be reasonable. No overt evidence of intraabdominal or gastrointestinal neoplastic criteria was noted.



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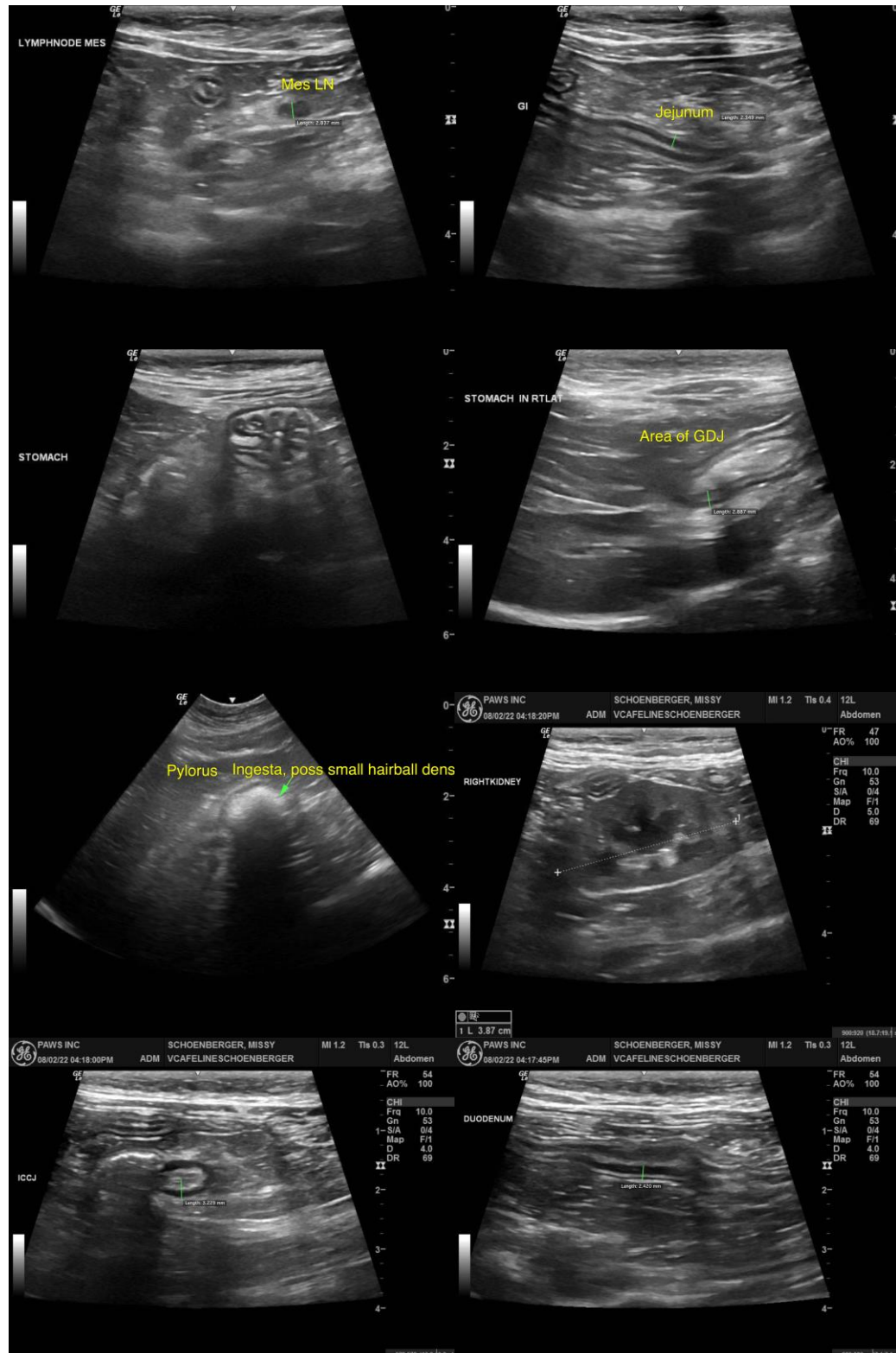
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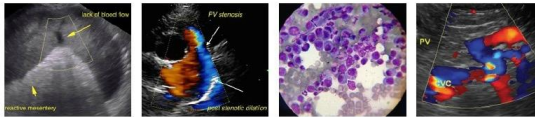
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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