



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Ellie Plotts

SPECIES Feline

BREED DSH

SEX Spayed Female

AGE 15 Years

WEIGHT 9 Pounds

Repeatable abdominal pain with multiple exams. Grade 3/6 heart murmur, systolic and ejection on left/sternal area. No other abnormalities. Radiographic Findings - Large soft tissue opacity present in the right cranial quadrant of the abdomen, on lateral views there is a mass effect with small intestine and stomach being displaced dorsally. There is also a small radiodensity/mineralization in the right kidney. There is spondylosis and narrowing at LS junction. Suspected hepatic mass and right renolith and lumbosacral disease vs IVDD. Will send radiographic findings Primary Question/Differential to Be Answered in This Exam Origin of abdominal mass.

Abnormal PE/Chem/CBC/UA Results: BW done 6/22/21 all WNL except mildly elevated T4 which O declined treating for.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

Normal size and margination were present in the left kidney. 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. Focal areas of dystrophic medullary mineral were present. The left kidney measured 3.2 cm.

Normal size and margination were present in the right kidney. 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. Mild dystrophic medullary mineral was present with focal non-obstructive medullary renolith. The renolith measured 0.5 cm in diameter. The right kidney measured 3.8 cm.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.39 cm in width. The right adrenal gland measured 0.36 cm in width.

Spleen

The spleen was normal in size (0.79 cm in width) and 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.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

Ark Animal Hospital

REFERRING VET

Dr. Jackson

INVOICE

25409

DATE

9/14/21



PATIENT *Liver*

Ellie Plotts A large non-homogeneous to echogenic cystic mass was present occupying the majority of the left, mid and right liver parenchyma. Normal appearing liver appeared to be deep to the mass and adjacent to the diaphragm. The mass measured approximately 10 cm in diameter, but potentially larger, as the entire mass would not fit into a single viewing window. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

BREED *Gastrointestinal*

DSH 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.

SEX 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.

Spayed Female

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

AGE

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Pancreas

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

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

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- Bilateral chronic renal changes with dystrophic medullary mineralization and focal non-obstructive right kidney renolith
- Large echogenic to cystic hepatic mass

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding in this case is the large echogenic to cystic hepatic mass, consistent with the large soft tissue opacity noted on radiographs. Considerations for the mass may include large benign cystic biliary adenoma with potential for biliary cystic adenocarcinoma or other. Generally, FNA of these masses is unrewarding. Therefore, biopsy would be required for definitive diagnosis. Given the lack of hepatic enzyme elevations, continued sonographic monitoring of the mass with as needed supportive care +/- analgesic (if evidence of abdominal pain) may be considered.

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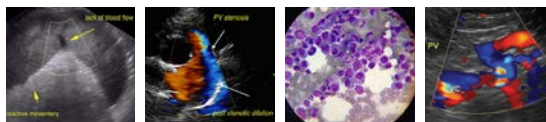
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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