



PATIENT PRESENTING CLINICAL SIGNS

Callie Moorvartian

Decreased eating for last 3-4 days. Owner recently moved into new house and pet keeps bringing hair ties and toys to owner. Pet has been vomiting foam once a day for 3 days. Pet has been losing weight for a while. Jaundice coloration to mm and mild ear. Radiographic Findings Abdominal radiographs show no evidence of F/B, but mild liver organomegaly based on stomach access.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: See attached blood work with ALT, ALKP, GGT, and TBil elevated.

BREED

DLH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Spayed Female

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

AGE

3 Years

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 3.4 cm. The right kidney measured 3.9 cm.

WEIGHT

9.7 Pounds

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

Adrenal Glands

No overt pathology in the area of the left and right adrenal glands.

Spleen

IMAGING PERFORMED BY

Jenna Walsh

The spleen was mildly subnormal in size, potentially owing to volume contraction, measuring 0.51 cm in width. It 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.

HOSPITAL NAME

Rivers Edge PMC

Liver

The liver presented generalized enlargement with mild uniform increased parenchyma echogenicity with mild coarse echotexture. Areas of perihepatic free fluid were present, which appeared to be primarily acellular. 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 primarily anechoic luminal content and minor echogenic luminal debris. The cystic and common bile ducts were normal. No evidence of post-hepatic obstruction.

REFERRING VET

Dr. Gibson

INVOICE

25153

Gastrointestinal

DATE

9/2/21

The stomach was gas distended. The presence of gas prevented full evaluation of the gastric lumen, yet evidence of minor retained anechoic fluid was present. No overt evidence of retained ingesta or foreign material. The visualized gastric walls were sonographically unremarkable. Gastric body wall measured 0.23 cm.



PATIENT Callie Moorvartian
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. Jejunum wall measured 0.20 cm.

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

BREED DLH
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.

DLH

SEX

Spayed Female

AGE

3 Years

WEIGHT

9.7 Pounds

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy – subjectively acute or acute on chronic
- Primarily perihepatic free fluid
- Heterogeneous pancreas – patient variant versus potential for low-grade inflammation
- Gas distended stomach – probable mild metabolic gastric stasis

SECONDARY FINDINGS

- Mild urinary bladder sediment – cellular or crystalline debris probable.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

Rivers Edge PMC

REFERRING VET

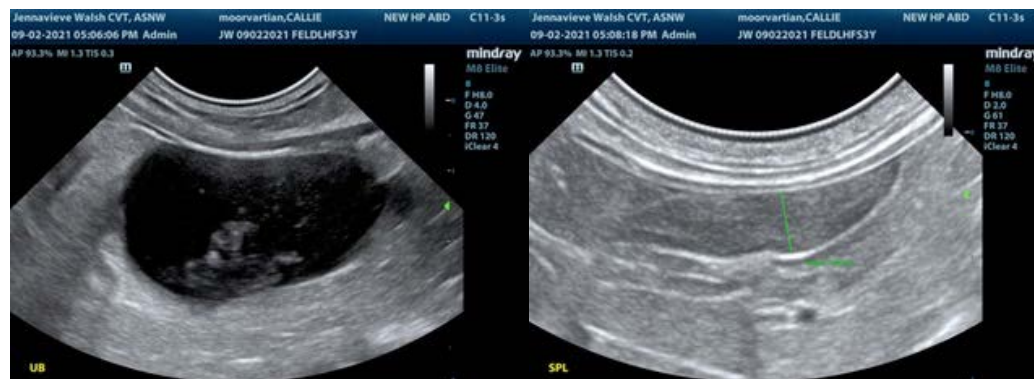
Dr. Gibson

INVOICE

25153

DATE

9/2/21





PATIENT

Callie Moorvartian

SPECIES

Feline

BREED

DLH

SEX

Spayed Female

AGE

3 Years

WEIGHT

9.7 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

Rivers Edge PMC

REFERRING VET

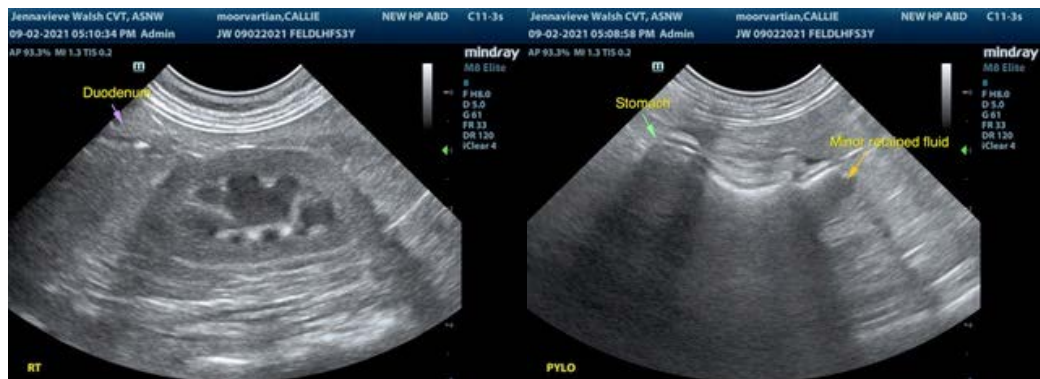
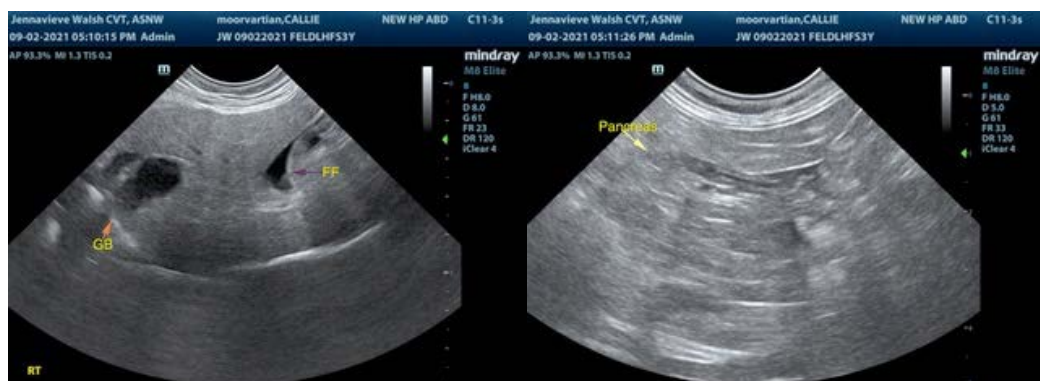
Dr. Gibson

INVOICE

25153

DATE

9/2/21





PATIENT

Callie Moorvartian

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

DLH

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

SEX

Spayed Female

AGE

3 Years

WEIGHT

9.7 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jenna Walsh

HOSPITAL NAME

Rivers Edge PMC

REFERRING VET

Dr. Gibson

INVOICE

25153

DATE

9/2/21