



PATIENT PRESENTING CLINICAL SIGNS

Dudley Finocchiaro History: Vomiting, diarrhea, weight loss – treated with budesonide, Cerenia, cobalamin, renal diet, and dewormed with good response. History of triaditis. Renal Tech positive prediction.

SPECIES Physical Examination: N/A.

Feline Urinalysis: SG 1.014, negative sediment.

BREED CBC: Neutrophilia, monocytosis, eosinophilia.

DSH Serum Biochemistry: Elevated SDMA.

Radiographic Findings: N/A.

SEX

MN

AGE

17 years

WEIGHT

9.7 #

INTERPRETED BY

Remo Lobetti, BVSc,
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ECVIM

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3.5 cm, right 3.6 cm) with increased echogenic appearance, loss of cortico-medullary differentiation, and normal capsule and right pelvis. Left pyelectasia.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.78 x 0.24 cm, right 0.75 x 0.37 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size with a diffuse hyperechogenic appearance, and loss of portal markings. Multiple hypoechogenic irregular parenchymal nodules of varying sizes (up to 1 x 1.1 cm). No masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

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Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen.

IMAGING PERFORMED BY

Dr Megan Cassels-Conway,
DVM

HOSPITAL NAME

Central Broward Animal
Hospital

REFERRING VET

Dr Oms, DVM



PATIENT *Pancreas*

Dudley Finocchiaro Normal size with a hyperechogenic appearance. Irregular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Feline No mesenteric lymphadenomegaly.
No ascites.

BREED **ULTRASONOGRAPHIC FINDINGS**

DSH Primary Findings:

- SEX**
- MN
- AGE**
- Nodular hepatopathy.
 - Renal disease.
 - Pancreatic fibrosis.

17 years Secondary Findings:

- Gall and urinary bladder sediment.

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Etiologies for the hepatopathy would be reactive, hyperplasia, cholangio-hepatitis complex, granulomatous disease, lipidosis, and infiltrative neoplasia.

The appearance of the kidneys is typical for chronic kidney disease.

Although the appearance of the pancreas is typical for fibrosis, chronic pancreatitis needs to be considered.

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Further assessment that could be considered would be UPC, blood pressure, fPL/PSL assay, and FNA cytology of the liver.

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Additional therapy that can be added for the liver and gall bladder would be ursodiol.

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PATIENT IMAGES

Dudley Finocchiaro **Liver**

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

17 years

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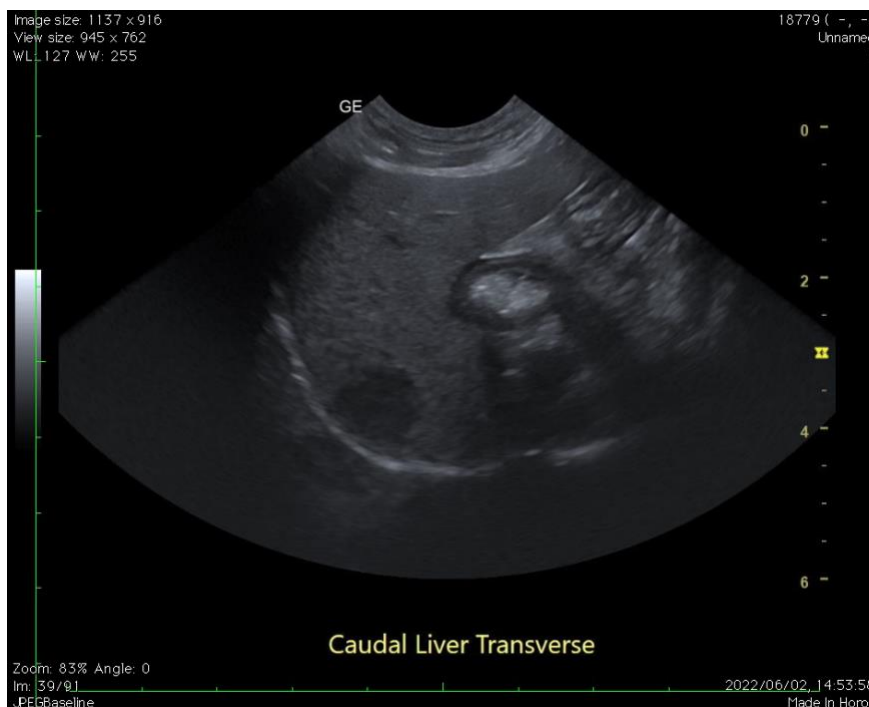
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PATIENT Gall bladder

Dudley Finocchiaro

SPECIES

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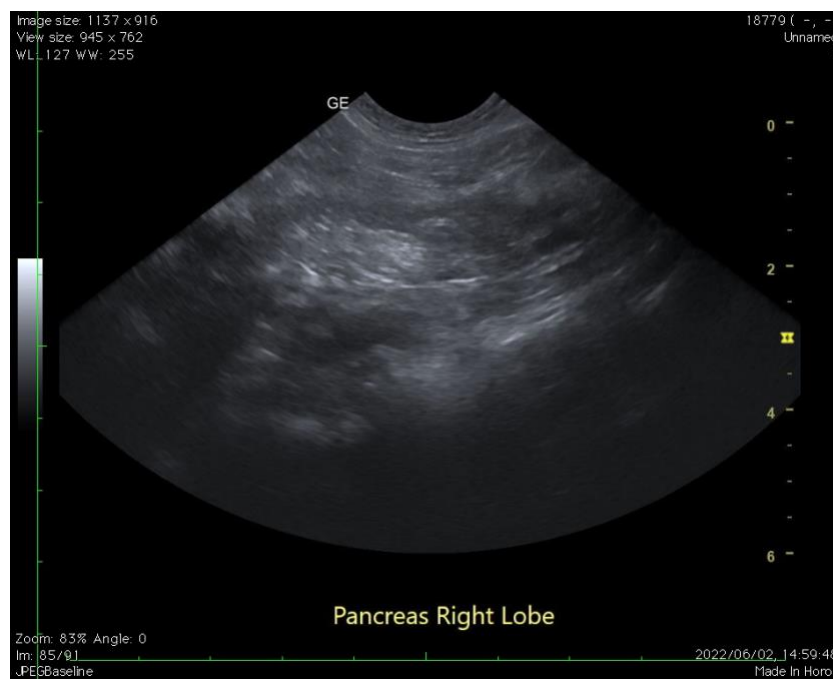
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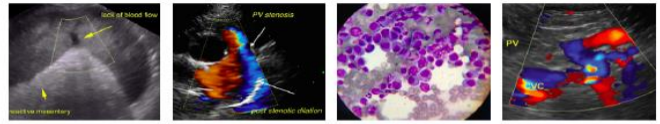
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Pancreas





PATIENT

Left kidney

Dudley Finocchiaro

SPECIES

Feline

BREED

DSH

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AGE

17 years

WEIGHT

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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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