



**PATIENT PRESENTING CLINICAL SIGNS**

**Lagertha Nallia**  
**SPECIES** Lagertha is a hunter of bugs and potentially rodents. She has never been a great eater. She is picky and tends to not want to eat cat food but will eat people foods. Abdominal ultrasound shows changes that can indicate intestinal inflammation and liver/bile tree infection/inflammation. Possible infection can include toxoplasma, FIP, liver fluke Stomach: Small amount of ingesta present. Normal wall thickness. No masses seen.  
**Feline** Abnormal PE/Chem/CBC/UA Results: CBC: Hct 31%, neut 12610, mono 1260, remainder wnl  
**BREED** CHEM 17/lytes Tbili 4.2, ALT 209, ALP 412, GGT 8, chol 238, BUN 12, Glu 85, Bile acids level is extremely elevated, which is most concerning for presence of portosystemic shunt.

**COMPUTED TOMOGRAPHY OF THE ABDOMEN**

**Domestic Medium Hair**  
 A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX** The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**Female**  
 Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

**AGE** The adrenal glands are within normal limits for size, shape and organ architecture.

**1**  
 The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**INTERPRETED BY**

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

The quadrate liver lobe presents a decreased volume and is post contrast hypoattenuating . There is generalized moderate dilation of the intraparenchymal biliary vessels of the quadrate liver lobe. The remainder of the hepatic parenchyma are uniform soft tissue attenuating and contrast enhancing.

**HOSPITAL NAME**

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

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The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

**REFERRING VET**

Kimberly Winters

The bony and surrounding soft tissue structures reveal no abnormalities.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Cystic dilation intraparenchymal biliary vessels quadrate liver lobe with increased contrast enhancement pattern of the quadrate liver lobe
- No evidence of portosystemic shunting, neither intra- nor extrahepatic

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

7-7-22

The cystic dilation of the intraparenchymal vessels and parenchymal changes of the quadrate liver lobe might be a sequela congenital malformation and cystic dilation of the biliary tree of the respective liver lobe ± accompanying cholangitis.



**PATIENT**

Lagertha Nallia

No macroscopic vascular bypass of the liver was noted in the pre- and post- contrast studies of the abdomen. However, if the clinical signs are consistent with insufficiency of the liver primary non-cirrhotic portal hypertension (microvascular dysplasia) or other diffuse parenchymal liver disease would still be a potential.

**SPECIES**

Feline

Surgical resection of the quadrate liver lobe and hepatic biopsy of the unaffected hepatic lobes might be beneficial for further workup of potential hepatic dysfunction ± cholangiohepatitis.

No abnormalities of the gastrointestinal tract are appreciated, however ultrasound has a higher sensitivity of intramural changes of the gastrointestinal tract.

**BREED**

Domestic Medium Hair

**SEX**

Female

**AGE**

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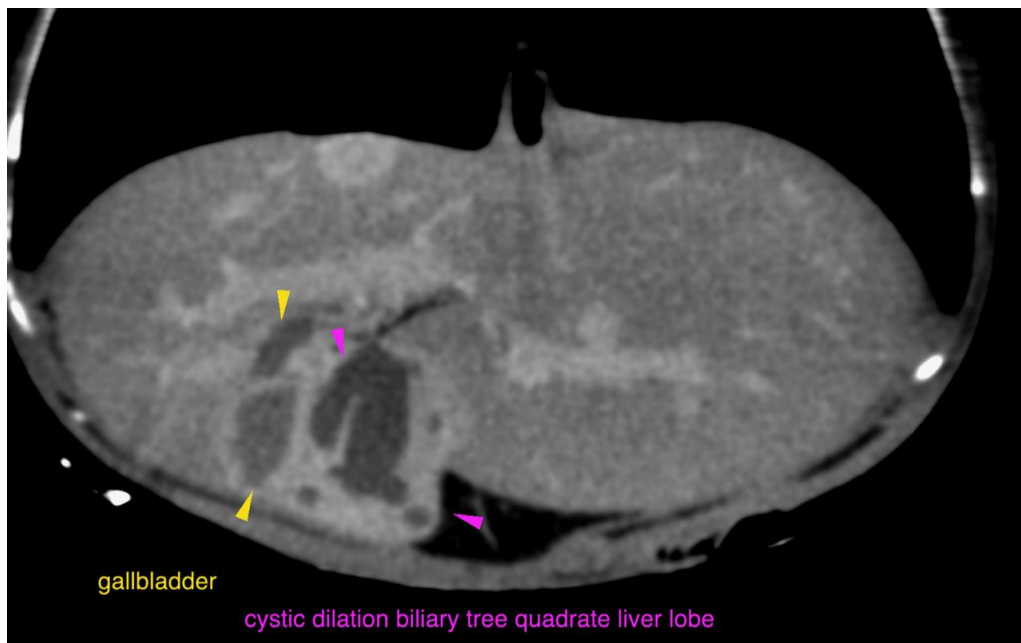
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**PATIENT**

Lagertha Nallia

**SPECIES**

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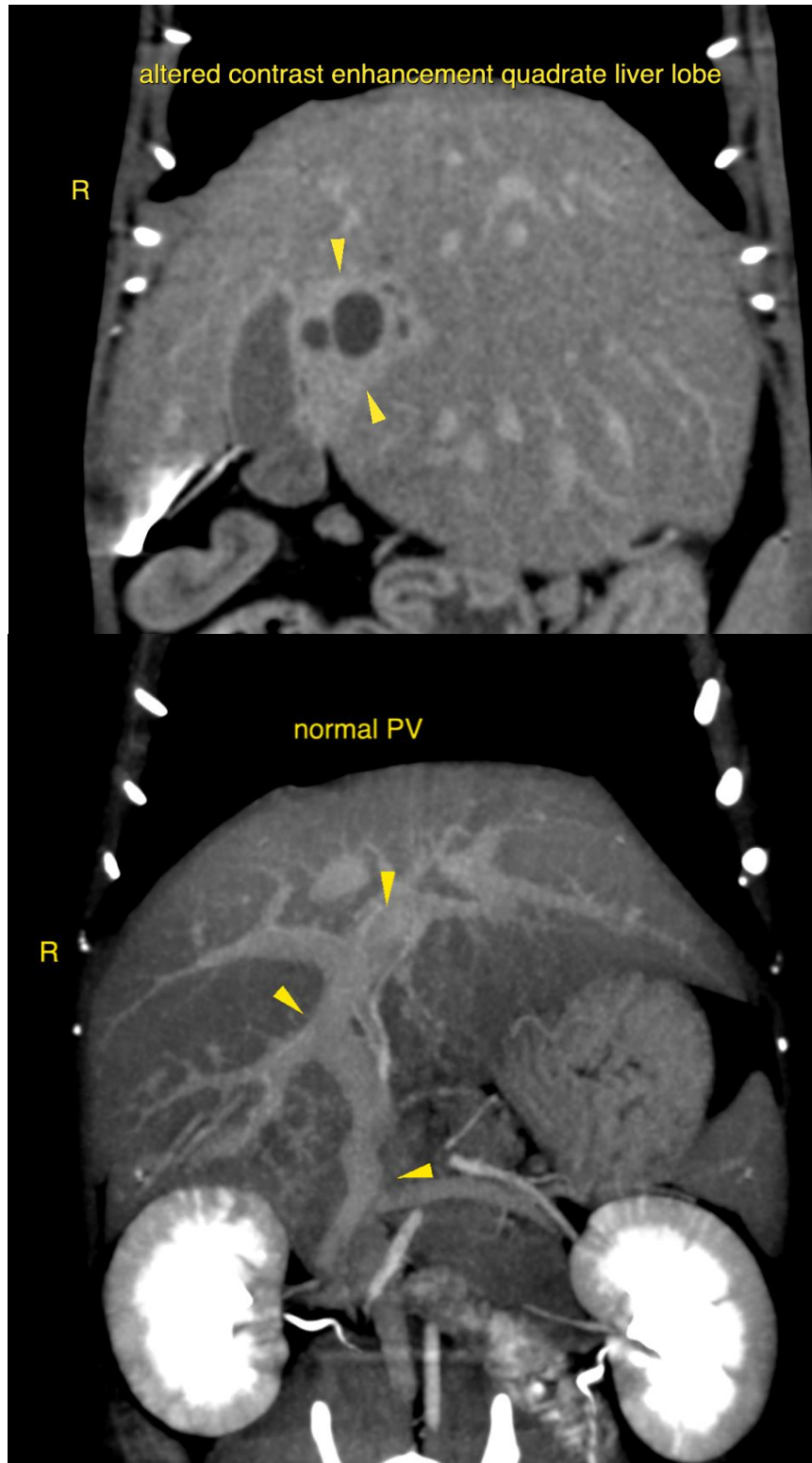
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**PATIENT**

Lagertha Nallia

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.

**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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

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Hair

**SEX**

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