



PATIENT

Meatball Leonhart

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

16 ½ years

WEIGHT

7.8 lbs

INTERPRETED BY

Tam Mengine, DVM,
DABVP (canine/feline
practice)

**IMAGING
PERFORMED BY**

Dr. Mengine

HOSPITAL NAME

Stoney Creek VH

REFERRING VET

Dr. Mengine

INVOICE

18212

DATE

11/25/22

PRESENTING CLINICAL SIGNS

History: Ongoing wt loss for ~ 6 mos, visible but hard to measure due to fractious patient. Norm CBC / Chem / T4 / U/A except BUN 43 and urine spGr 1.020.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted. Urethra visualized to 2.0 cm.

The kidneys are hyperechoic and exhibit mildly decreased cortico-medullary differentiation. There is no evidence of nephrolithiasis, mineralization, pyelectasia or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 3.3 cm in length. The right kidney is 3.1 cm in length.

Adrenal Glands

The adrenal glands are both identified in their normal locations. They are normal in size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The left adrenal gland height is 2.9 mm at the caudal pole. The right adrenal gland height 2.8 mm at the caudal pole.

Spleen

The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal. Thickness at the splenic hilus is normal at 6.7 cm.

Liver

The liver is of appropriate size and shape, with sharp borders and a mildly coarse parenchymal echotexture that is hypoechoic to the spleen. There is a 1.0 cm x 0.8 cm microcystic mass located the left caudal lobe. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

The gallbladder is moderately distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

Gastrointestinal

The stomach is moderately distended with normal ingesta. The gastric wall is 3.3 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.

The visualized portions of the duodenum, jejunum, and ileum are of normal thickness with intact wall layering that exhibits the appropriate 1:3 muscularis to mucosa ratio. The duodenal wall measures 1.9 mm. The jejunal wall measures up to 2.3mm. Intestinal motility appears normal.

The visible portions of the colon are of normal thickness, up to 1.3 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

Pancreas



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The left limb of the pancreas is hypoechoic, but of normal size and with no changes to the surrounding mesenteric fat. There is no evidence of peripancreatic inflammation. The pancreatic duct appears normal.

SPECIES

Feline

Free Abdomen

BREED

Domestic Shorthair

There is no evidence of free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are of appropriate echogenicity. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis.

SEX

Spayed female

- A microcystic hepatic mass
- Mild chronic renal changes

AGE

16 ½ years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass in the liver is most consistent with a benign cystadenoma and unlikely to be correlated with the noted clinical signs. Additional diagnostics to investigate weight loss and lethargy would include:

- Fecal parasite testing and/or empiric deworming with Fenbendazole
- A TLI/cobalamin/folate level to screen for exocrine pancreatic insufficiency
- Three view chest radiographs
- It is possible for occult intestinal disease to present with normal ultrasound findings. Thus, endoscopic or surgical GI biopsies would be indicated if weight loss persists and another cause cannot be found.

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SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

16 1/2 years

WEIGHT

7.8 lbs

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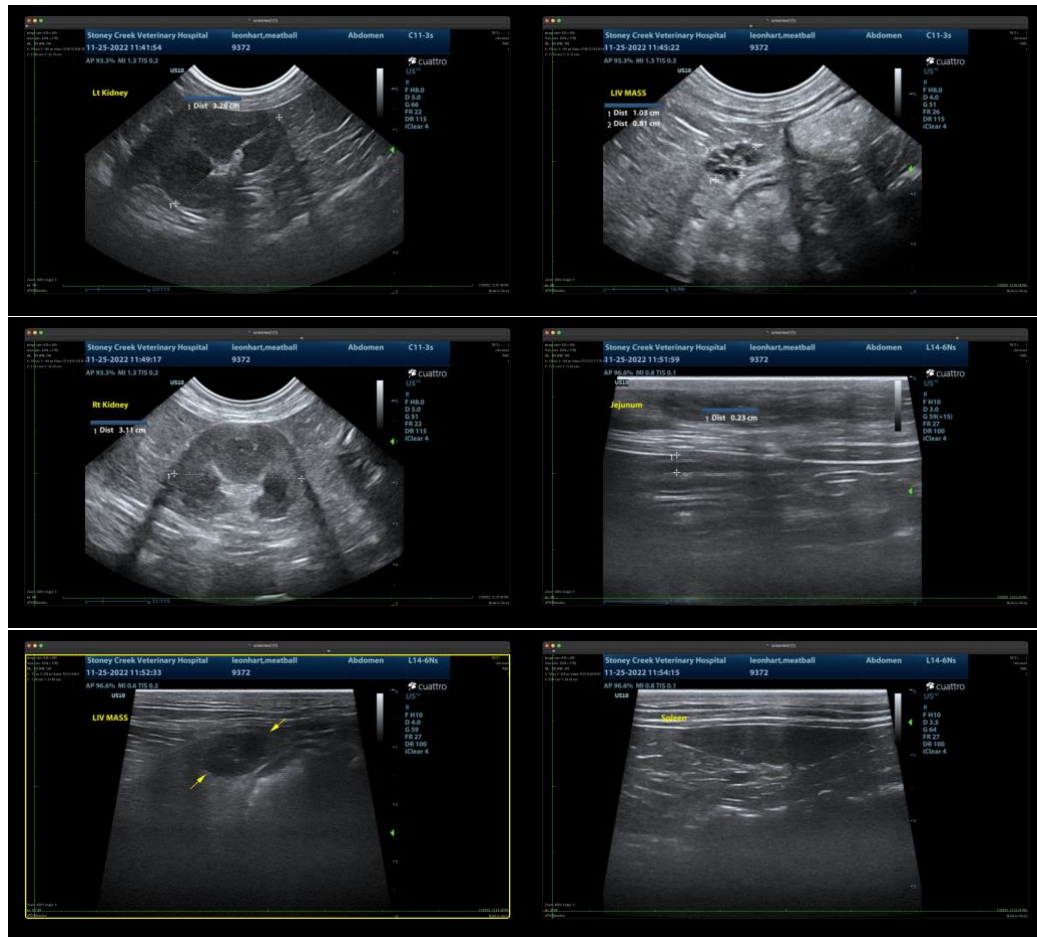
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tam Mengine, DVM, DABVP (canine/feline practice)

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