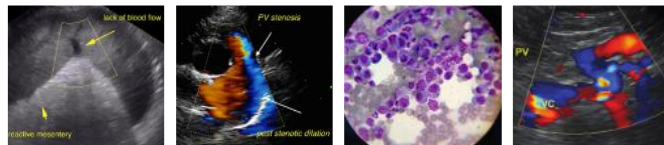




PATIENT	PRESENTING CLINICAL SIGNS
Bosox Gallo	History: Recent history of weight loss and inappropriate urination. Normal blood work . Concern about sonographic appearance of left pancreas in particular. Abnormal PE/Chem/CBC/UA Results: Normal bloodwork
SPECIES	
Feline	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
DSH	The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is distended. A scant amount of aggregated echogenic suspended debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.
SEX	
Neutered Male	The left kidney is borderline small in size (3.24 cm in length); with an irregular shape. The cortex is thickened.. There is moderated loss of corticomedullary distinction. A few non-obstructive nephroliths are visualized. Trace pyelectasia is present. There is no evidence of hydroureter.
AGE	
17 years	The right kidney is normal in size (3.50 cm in length); with a slightly irregular shape. The cortex is thickened. There is moderated loss of corticomedullary distinction. A few non-obstructive nephroliths are visualized. Trace pyelectasia is present. There is no evidence of hydroureter.
WEIGHT	
14.8	Adrenal Glands
	The left adrenal gland is normal size (0.53 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.
	The region of the right adrenal gland is evaluated. No obvious pathology is observed.
INTERPRETED BY	Spleen
Andrea Nicastro, DMV, Diplomate DACVIM (Small Animal Internal Medicine)	The spleen is normal in size (0.77 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.
IMAGING PERFORMED BY	Liver
Tiffany Brady DVM	The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.
HOSPITAL NAME	
Shiloh Veterinary Hospital	The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.
REFERRING VET	Gastrointestinal
Tiffany Brady DVM	The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio in some segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.
INVOICE	
10219	
DATE	
1/27/22	



PATIENT

Bosox Gallo

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

17 years

WEIGHT

14.8

INTERPRETED BY

Andrea Nicastro,
DMV, Diplomate
DACVIM (Small
Animal
Internal Medicine)

**IMAGING
PERFORMED BY**

Tiffany Brady DVM

HOSPITAL NAME

Shiloh Veterinary
Hospital

REFERRING VET

Tiffany Brady DVM

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Pancreas

The left limb is prominent to enlarged with slightly irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is mildly dilated (0.26 cm in diameter). The mesentery effacing the serosal surface is hyperechoic.

Free Abdomen

Trace free fluid is observed. A few prominent colic lymph nodes are visualized, the largest measuring 0.75 cm in length. Surrounding mesentery is hyperechoic.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The pancreatic changes are consistent with acute or chronic, active pancreatitis with regional peritonitis.
- Bowel pattern suggestive of inflammatory bowel disease.
- The lymph node changes are most consistent with reactive lymphadenitis or lymphoid hyperplasia.

Secondary Findings

- Bilateral regenerative renal changes with nonobstructive nephrolithiasis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Given the sonographic changes in the pancreas and bowel, consider the following:
 1. GI Panel including serum cobalamin, folate, PLI and TLI
 2. Fecal evaluation for ova and Giardia
 3. +/- endoscopic or surgical gastrointestinal +/- pancreatic biopsies. However, the patient's age should be taken into consideration when deciding whether to pursue and invasive anesthetic procedure.
- Regarding the inappropriate urinations, a urinalysis and urine culture and sensitivity are recommended to assess for an occult urinary tract infection, particularly given the renal changes.
- Given the patient's age, three-view thoracic radiographs are recommended to assess for occult neoplasia in the chest.



PATIENT

Bosox Gallo

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

17 years

WEIGHT

14.8

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DACVIM (Small
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Internal Medicine)

**IMAGING
PERFORMED BY**

Tiffany Brady DVM

HOSPITAL NAME

Shiloh Veterinary
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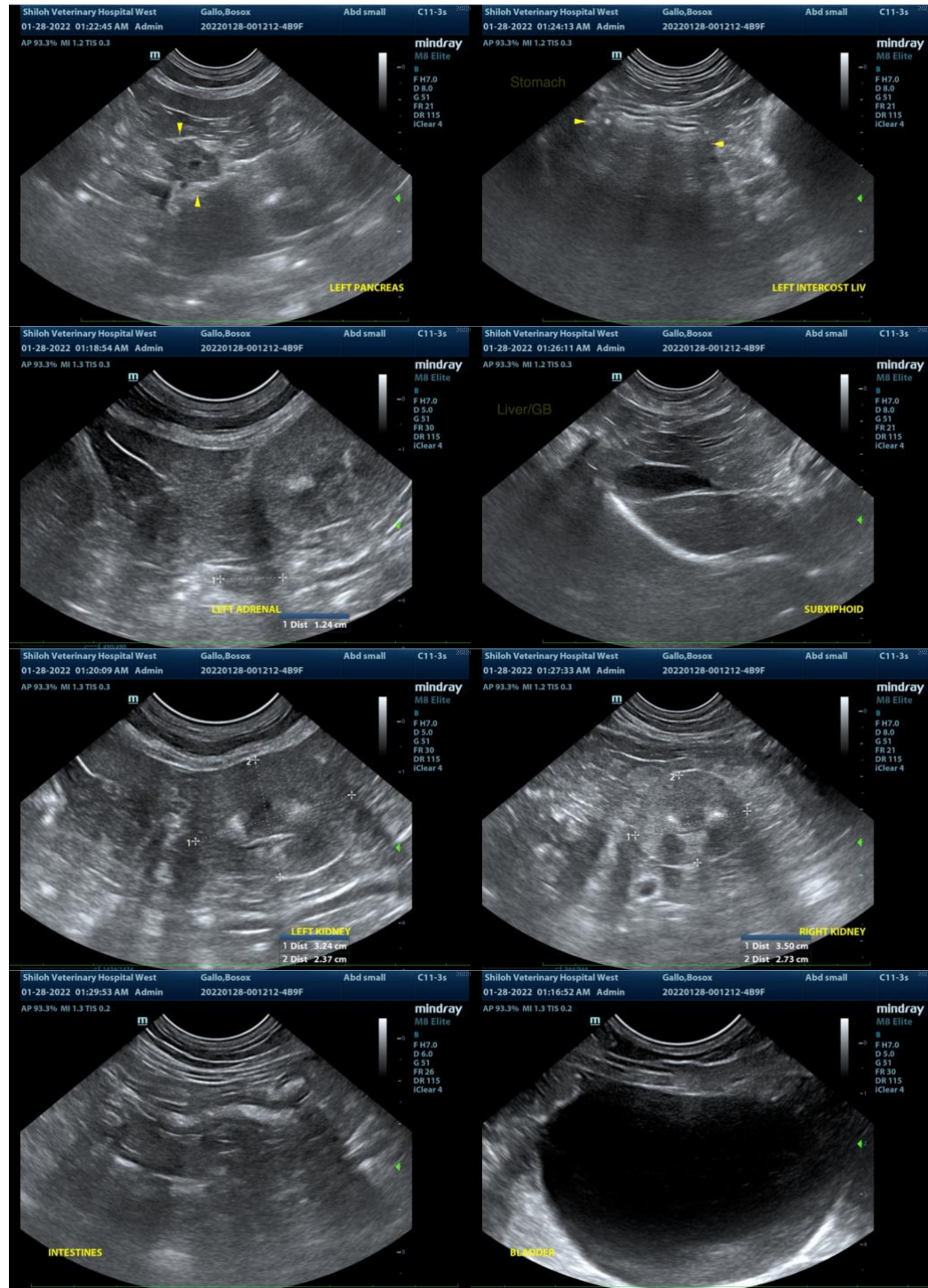
Tiffany Brady DVM

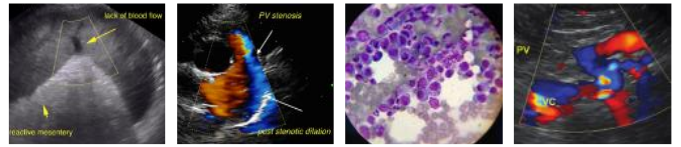
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PATIENT

Bosox Gallo

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

17 years

WEIGHT

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PERFORMED BY**

Tiffany Brady DVM

HOSPITAL NAME

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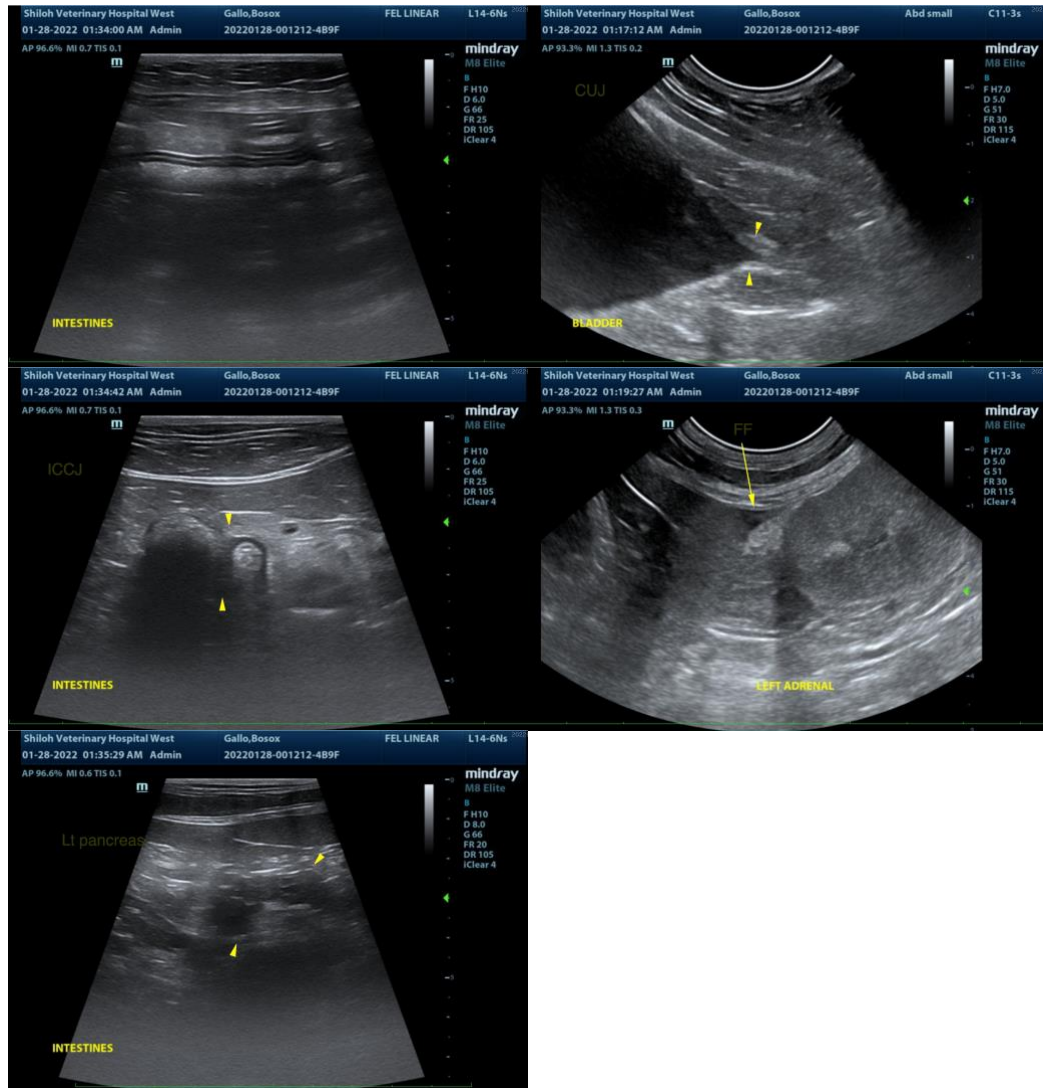
Tiffany Brady DVM

INVOICE

10219

DATE

1/27/22



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.

Andrea Nicastro, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com