

## PATIENT PRESENTING CLINICAL SIGNS

**Heihei Huang**  
**SPECIES** History: Vomited nematode type parasites a week ago and had mild decreased appetite/mentation since. Had fenbendazole for 3 days then a dose of revolution plus. No current on parasite control prior. Diagnosed and managed on CKD stage II. On phos restricted diet. Live with another cat. Indoor only but got out for 1 days about 8 months ago.

Feline

**BREED** Abnormal PE/Chem/CBC/UA Results: Mild ALT elevation (176, 66 five months ago) Crea stable at 2.0 USG 1.016 (stable) no active sediment. Echo within half year normal. Stable weight.

DSH

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

**SEX**

### Urinary System

Neutered Male The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is distended. A small-to-moderate amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone is normal.

**AGE**

15

The left kidney is normal in size (4.06 cm in length) with smooth peripheral contours. The cortex is hyperechoic relative to the spleen and variably thickened, with moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

**WEIGHT**

14

One still image of the right kidney is available for interpretation. The right kidney is normal in size (4.13 cm in length) with smooth peripheral contours. The cortex is hyperechoic relative to the spleen and variably thickened, with moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

## INTERPRETED BY

Andrea Nicastro, DVM,  
Diplomate ACVIM  
(Small Animal Internal  
Medicine)

### Adrenal Glands

The region of the left adrenal gland is evaluated. No obvious pathology is observed in this region.

No images provided of the right adrenal gland.

## IMAGING PERFORMED BY

Shen Li

### Spleen

The spleen is normal in size (0.76 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.

## HOSPITAL NAME

Dr. Shen Li Vet Svc

### Liver

The liver is subjectively normal in size with normal peripheral contours. The parenchyma is isoechoic relative to the spleen. A 0.82 cm septated cystic lesion is observed on the left side. The remaining parenchyma is homogenous. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

## REFERRING VET

Shen Li

The gallbladder lumen is moderately distended. The wall is thin and smooth. A small amount of gravity-dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

## INVOICE

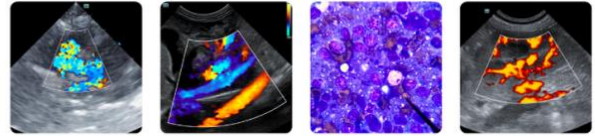
22484

### Gastrointestinal

The gastric lumen is mildly distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is mostly empty. In one segment, a small amount of soft, shadowing material is visualized. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

**DATE**

1-31-26



## PATIENT

Heihei Huang

### *Pancreas*

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

## SPECIES

Feline

### *Lymph Nodes*

The abdominal lymph nodes are normal/not visible.

## BREED

DSH

### *Free Abdomen*

There is no obvious evidence of free fluid.

## ULTRASONOGRAPHIC FINDINGS

## SEX

Neutered Male

- The bilateral renal changes are most consistent with chronic interstitial nephrosis/nephritis.
- Urinary bladder debris
- Mild retained gastric ingesta

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- An obvious cause for the elevated liver enzymes is not identified in the study. However, a microscopic hepatopathy (i.e., bacterial cholangiohepatitis, Leptospirosis, chronic active hepatitis, copper-associated hepatotoxicity, reactive hepatopathy, infiltrative neoplasia (less likely)) is suspected. Left hepatic cyst. Differentials include biliary cystadenoma, or less likely, biliary cystadenocarcinoma.

## WEIGHT

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- The soft, shadowing material seen in one segment of small intestine, likely represents transient foreign material (i.e., hair). It appears nonobstructive at the time of this study.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## INTERPRETED BY

Andrea Nicastro, DVM,  
Diplomate ACVIM  
(Small Animal Internal  
Medicine)

- Consider obtaining updated bloodwork (including a chemistry panel, urinalysis, and T4) along with a baseline blood pressure measurement.
- Given the patient's clinical history, consider a consultation with a board-certified neurologist, +/- brain MRI.

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## REFERRING VET

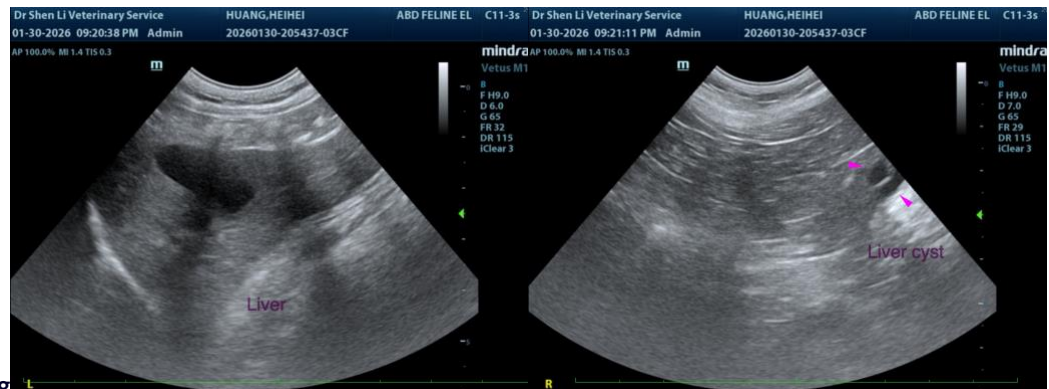
Shen Li

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**PATIENT**

Heihe Huang

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

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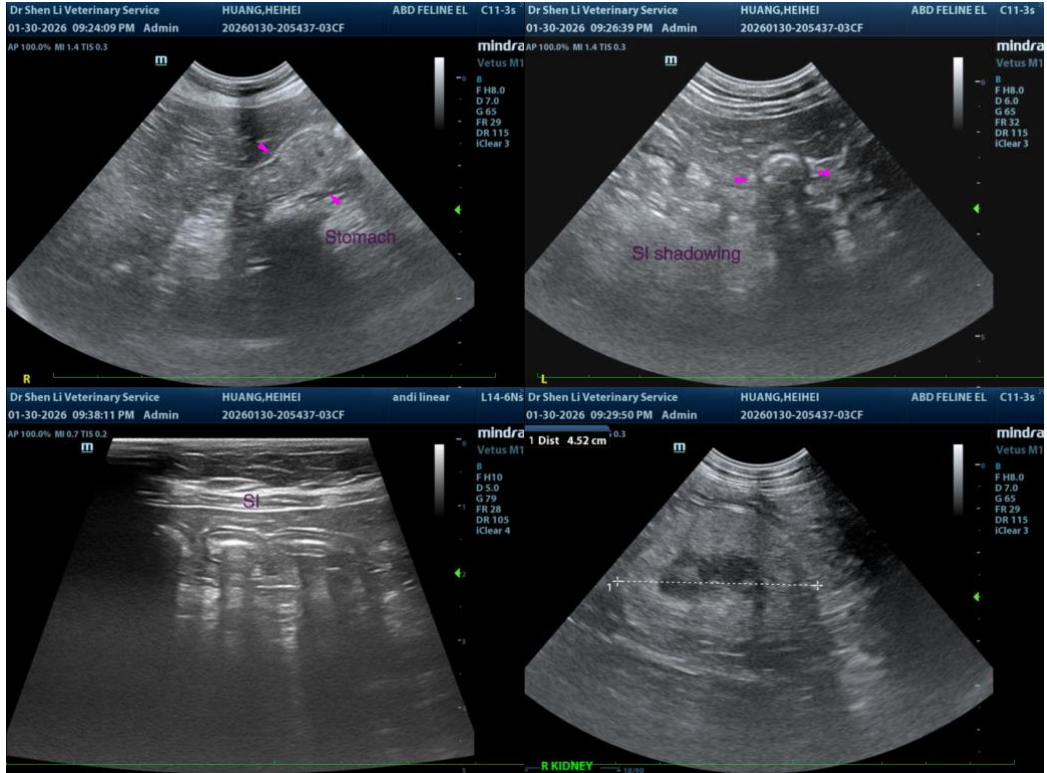
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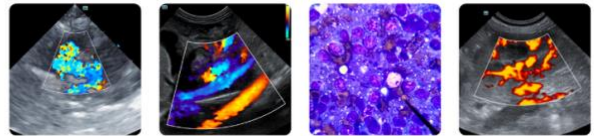
1-31-26



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.

**Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
[info@SonoPath.com](mailto:info@SonoPath.com)



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## SPECIES

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## SEX

Neutered Male

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