



PATIENT PRESENTING CLINICAL SIGNS

Preston Caro History: Declining health and reduce appetite. HX of IBD, FIC, CKD IRIS stage 3/4, nonregenerative anemia, hyperthyroidism, and constipation Current Medications prednisolone, omeprazole, cerenia, prazosin, gabapentin, buprenorphine, methimazole, denamarin, lactulose, miralax, K supplement, elura

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: fPL abnormal, HCT 27%, Creatinine 3.2, BUN 42, Ca 12.6, ALT 131

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

DSH

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder is distended. A small amount of suspended echogenic 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 2.0 cm, are normal.

SEX

Neutered Male

The left kidney is normal size (3.97 cm in length); with a slightly irregular shape. The cortex is variably thickened and there is poor corticomedullary distinction. A few foci of mineralization are visualized. A cortical infarct is suspected at the craniomedial aspect. There is mild pyelectasia (0.28 cm in the longitudinal plane). There is no evidence of hydroureter. Renal vasculature is normal.

AGE

15 Years

The right kidney is normal size (3.18 cm in length); with a slightly irregular shape. The cortex is variably thickened and there is poor corticomedullary distinction. A few foci of mineralization are visualized. A cortical infarct is suspected at the craniomedial aspect. There is mild pyelectasia (0.31 cm in the longitudinal plane). There is no evidence of hydroureter. Renal vasculature is normal.

WEIGHT

12.58 Pounds

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.83 cm length; 0.49 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.91 cm length; 0.44 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Jenna Walsh

Spleen

Despite an exhaustive search, the spleen is not definitively visualized.

HOSPITAL NAME

West Hills AH

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative the spleen. 1-2 small cystic areas are visualized. 1-2 small hypoechoic nodules are also seen. In the remaining parenchyma there are minor changes consistent with age-related remodeling. Hepatic vascular and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

REFERRING VET

Dr. Remcho

DATE

10/28/21

The gall bladder is of normal contours and contains some gravity dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal.

INVOICE

14048



PATIENT *Gastrointestinal*

Preston Caro 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.

SPECIES

Feline

BREED *Pancreas*

DSH The left limb of the pancreas is visible with minimal deviation from the normal peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat and subtly mottled in appearance. No distinct focal lesions are observed. The pancreatic duct is not overtly dilated.

SEX

Neutered Male

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

AGE

15 Years

Other

A brief echocardiogram (no charge) reveals no evidence of pericardial effusion.

WEIGHT

12.58 Pounds

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bowel pattern consistent with inflammatory bowel disease.
- Bilateral age-related nephropathy with pyelectasia and non-obstructive nephrolithiasis.

Secondary Findings

- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- Minor age-related hepatic changes

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*An obvious cause for the patients' recent clinical signs is not identified in the study. Considerations include worsening inflammatory bowel and/or renal disease, gastric ulceration, occult neoplasia, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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- Three-view thoracic radiographs are recommended to assess cardiopulmonary status.
- An ionized calcium +/- PTH/PTHrP can be considered to further assess for causes of hypercalcemia.

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PATIENT

Preston Caro

- Given the renal disease, a urine culture and sensitivity +/- UPC (if proteinuria is present) can be considered. A baseline blood pressure measurement is also recommended, if not already performed.

SPECIES

Feline

- Also consider a malabsorption panel, including serum cobalamin, folate, TLI and PLI +/- pre- and post-prandial serum bile acids.

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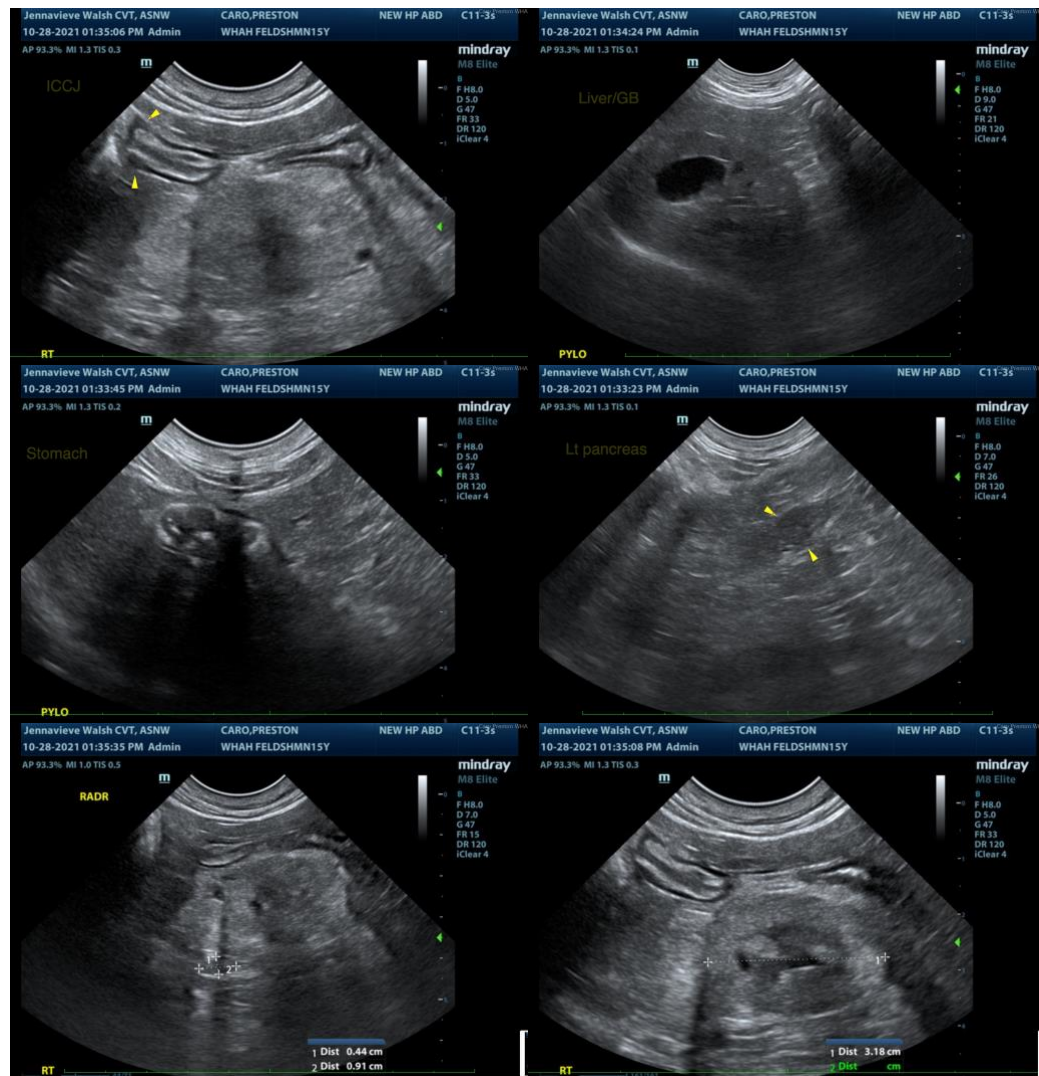
Dr. Remcho

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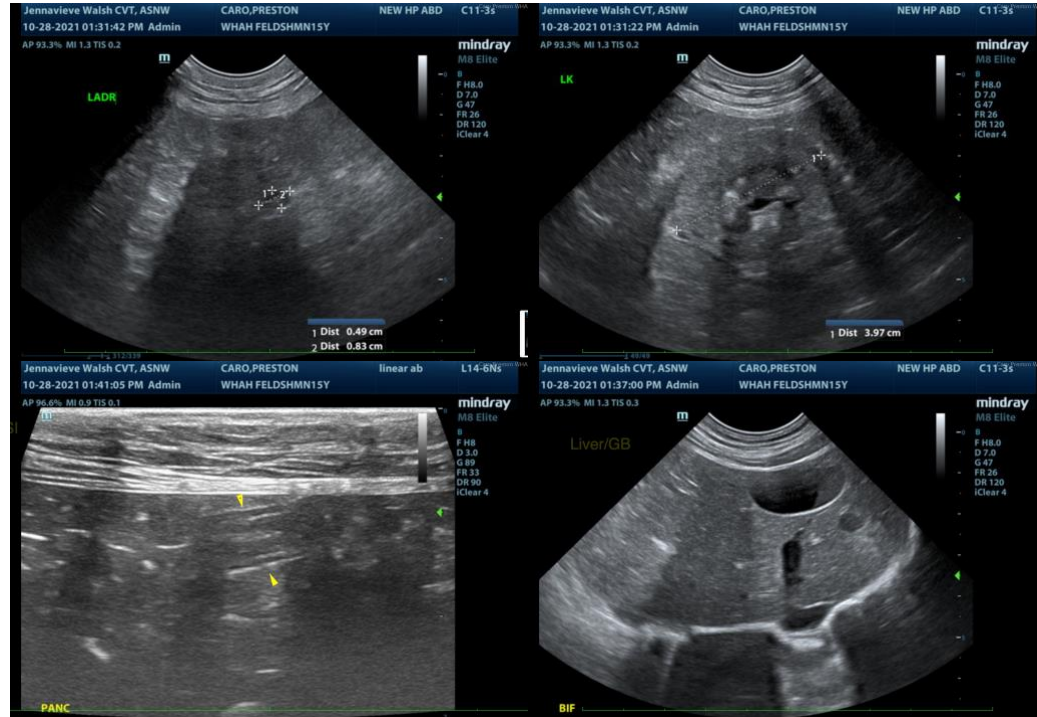
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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