

**PATIENT PRESENTING CLINICAL SIGNS**

Milo Post History: Ate Angel Hair yesterday (unknown amount). Vomited large amt. up, hasn't eaten since. No current meds.

**SPECIES** Abnormal PE/Chem/CBC/UA Results:

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 moderately distended with anechoic urine. 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 (3.36 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

**AGE**

1 Year 2 Months The right kidney is normal size (3.30 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

**WEIGHT**

8 Pounds

**Adrenal Glands**

The left adrenal gland is normal size (0.31 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.27 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**Spleen**

The spleen is normal in size (0.74 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**

Andover AH

**Liver**

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.

**REFERRING VET**

Dr. Vanderbogart

The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

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**Gastrointestinal**

The gastric lumen is fluid distended and hypomotile. A hyperechoic linear structure is observed within the lumen and appears to extend into the pylorus. The gastric wall is normal in thickness with a normal layering pattern. Several small intestinal bowel loops are fluid-distended, hypomotile and plicated. A hyperechoic linear structure is observed within the lumen of these segments. A few bowel

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**PATIENT**

loops are not distended and are normal in thickness with a normal layering pattern. The colonic wall is normal

Milo Post

**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

**Free Abdomen**

Trace free fluid is observed. A few prominent lymph nodes are observed in the mid abdominal cavity.

**BREED**

DSH

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

- Suspected small intestinal linear foreign body/obstruction. The foreign material is suspected to originate in the stomach and extend through the pylorus and into the small intestine.
- The trace free fluid is likely secondary to bowel pathology.

Neutered Male

**AGE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

1 Year 2 Months

- Three-view thoracic radiographs are recommended to assess for aspiration pneumonia.
- An abdominal exploratory is recommended as soon as possible to remove the foreign material. A resection and anastomosis may be warranted, depending upon bowel integrity/health.

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8 Pounds

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**REFERRING VET**

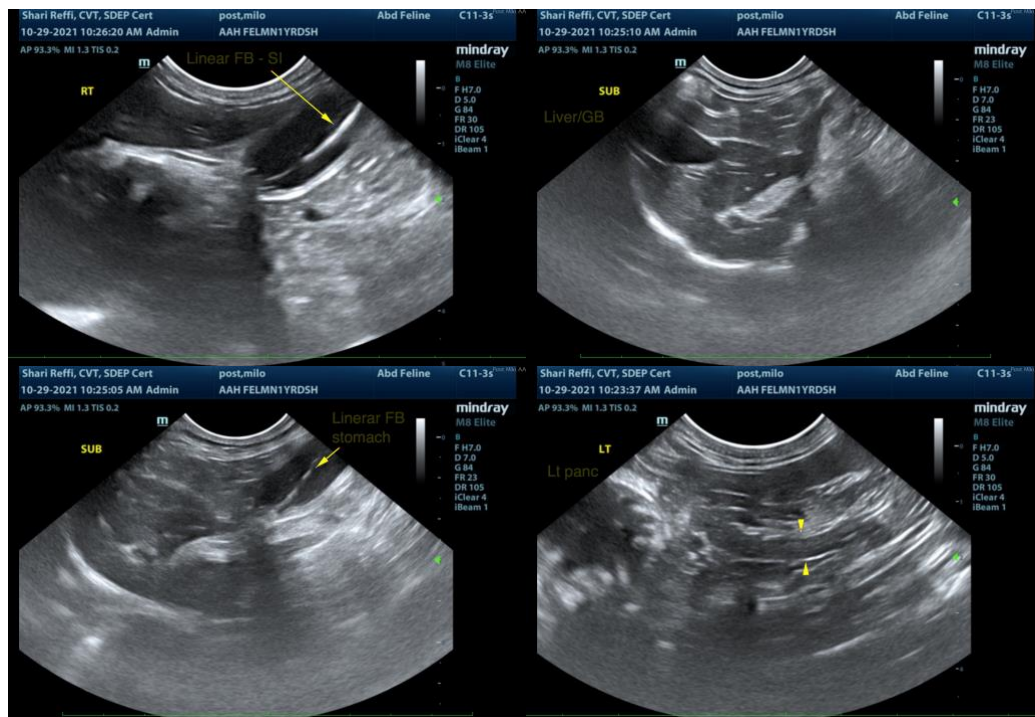
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**PATIENT**

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**SPECIES**

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**BREED**

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**SEX**

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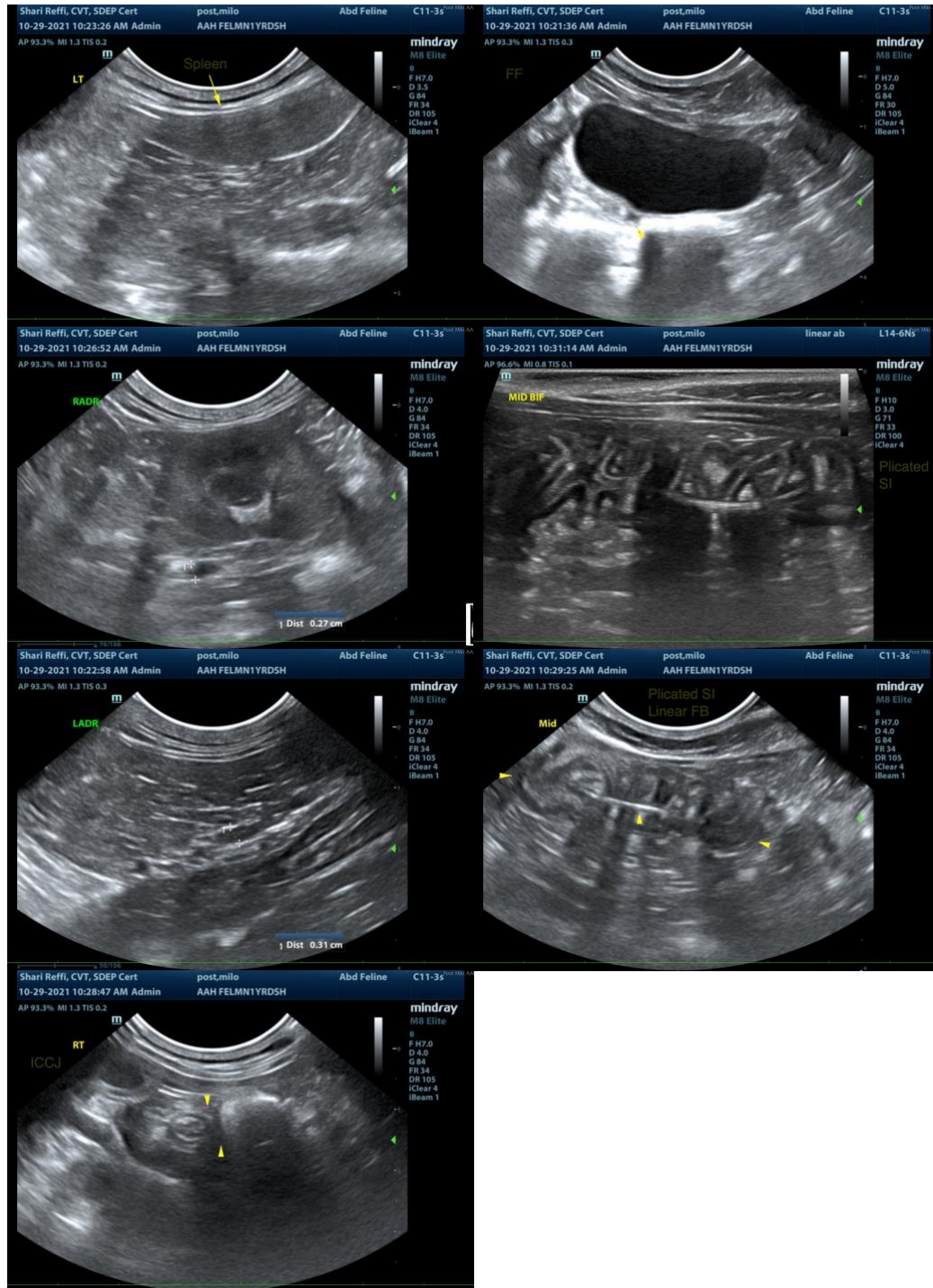
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



**PATIENT**

can be of any further assistance please contact me.

Milo Post

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DSH

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Neutered Male

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