

PATIENT PRESENTING CLINICAL SIGNS

Fluffy Rajeh Ali

History: Adult cat with a previous history of pancreatitis, currently hospitalized for the past two weeks for treatment of a superficial corneal ulcer and at the owner's request for a complete health check-up.

SPECIES

Feline

Screening bloodwork showed:

- SDMA: 21.4 µg/dL (mildly elevated)
- Amylase: 1518 U/L (slightly above reference range)
- fPLI: negative

BREED

British LH

The cat remained bright and stable until three days ago, when it developed two episodes of vomiting, and today presented with reduced appetite and liquid diarrhea. No current medications affecting the gastrointestinal tract; no known toxin exposure. Mild stress or environmental factors related to hospitalization may also be contributing. Purpose of ultrasound: To evaluate the kidneys, pancreas, liver, and gastrointestinal tract for possible early CKD changes, recurrence of pancreatitis, or other causes of the recent vomiting and diarrhea.

SEX

Spayed Female

AGE

9

WEIGHT

4.19 kg

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is not definitively visualized in the available images.

The kidneys are not labeled left vs right. Both kidneys are subjectively normal-in-size with left kidney is a normal shape, architecture and smooth peripheral contours. There is minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

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

Spleen

The spleen is not definitively visualized in the available images.

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.

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

Gastrointestinal

The lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall is normal in thickness. There is slight disruption in the normal 1:3 muscularis: mucosal ratio in several segments. Discreet masses are not identified. There is no obvious evidence of an obstructive pattern.

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.

Lymph Nodes

The abdominal lymph nodes are normal/not visible.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Claudia Carreirao

HOSPITAL NAME

The Vet Surgery

REFERRING VET

Dr. Claudia Carreirao

INVOICE

22232

DATE

11-9-25



PATIENT

Free Abdomen

Fluffy Rajeh Ali

There is no obvious evidence of free fluid.

SPECIES

Feline

- Bilateral nonspecific age-related renal changes
- The small intestinal wall changes may be consistent with inflammatory bowel disease or may be a normal variant for this older feline patient. Correlation with the patient's long-term clinical history is recommended.

BREED

British LH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Given the recent GI signs and the sonographic bowel changes, consider the following:

Spayed Female

1. Fecal evaluation for ova and Giardia
2. GI panel including serum cobalamin and folate, TLI and PLI
3. Symptomatic care for gastroenteritis. If clinical signs persist, further work-up (i.e., hypoallergenic or hydrolyzed protein diet trial, GI biopsies) may be indicated.

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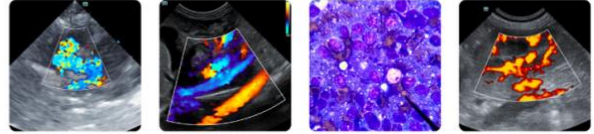
DATE

11-9-25



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.



PATIENT

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Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
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