



PATIENT PRESENTING CLINICAL SIGNS

Miss Priss Campbell

History: P presents with a rounded belly appearance per O, recent PU/PD. On exam, abdominal distention was noted with a possible mass palpated in the cranial/mid abdomen.

SPECIES

Abnormal PE/Chem/CBC/UA Results: Spot BG: 369 mg/dL UA: 3+ glucosuria

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

DSH

The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is moderately distended. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

SEX

Female Spayed

The left kidney is normal in size (4.08 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild to moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

AGE

14

The right kidney is normal in size (4.18 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild to moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

WEIGHT

14.7 lbs

Adrenal Glands

INTERPRETED BY

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

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

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

IMAGING PERFORMED BY

Saum Hadi

Spleen

The spleen is normal in size (0.59 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

Nimbus PH

Liver

The liver is normal to slightly prominent-in-size, with irregular peripheral contours. The parenchyma is isoechoic relative to the spleen. Several, varying-sized hypoechoic-to-heterogenous nodules are observed throughout the organ (one of the larger measuring 2.0 cm in its longest dimension). Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

REFERRING VET

Saum Hadi

The gallbladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are mostly anechoic. The cystic and common bile ducts are normal.

INVOICE

22300

Gastrointestinal

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 is normal in thickness 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

12-20-25

Pancreas

(See "Other" category).



PATIENT *Lymph Nodes*
(See "Other" category).

Miss Priss Campbell

SPECIES *Free Abdomen*
A small amount of free fluid is present.

Feline *Other*
In the cranial- to mid-abdomen, a >6.15 cm irregular, heterogenous mass, with micro-cavitations is visualized. Surrounding mesentery is hyperechoic. Several hypoechoic nodules are observed throughout the abdomen. Surrounding mesentery is hyperechoic.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

SEX *Primary Findings*

Female Spayed

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- Cranial- to midabdominal mass, the origin of which is unclear. It may be arising from pancreas, mesentery, lymph node, other. Neoplasia (i.e., adenocarcinoma, sarcoma, round cell tumor) is suspected, with a low possibility of a non-neoplastic process (i.e., inflammatory). Adjacent peritonitis is present.
- The hepatic nodules are concerning for metastatic disease, with a lower possibility of a benign focus (i.e., multifocal inflammatory disease, other).
- The nodules throughout the abdomen could be consistent with metastatic lesions within the mesentery, enlarged lymph nodes, other.

INTERPRETED BY

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Medicine)

Secondary Findings

- Bilateral nonspecific age-related renal changes with dystrophic mineralization

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HOSPITAL NAME

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PATIENT

Miss Priss Campbell

SPECIES

Feline

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SEX

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**IMAGING
PERFORMED BY**

Saum Hadi

HOSPITAL NAME

Nimbus PH

REFERRING VET

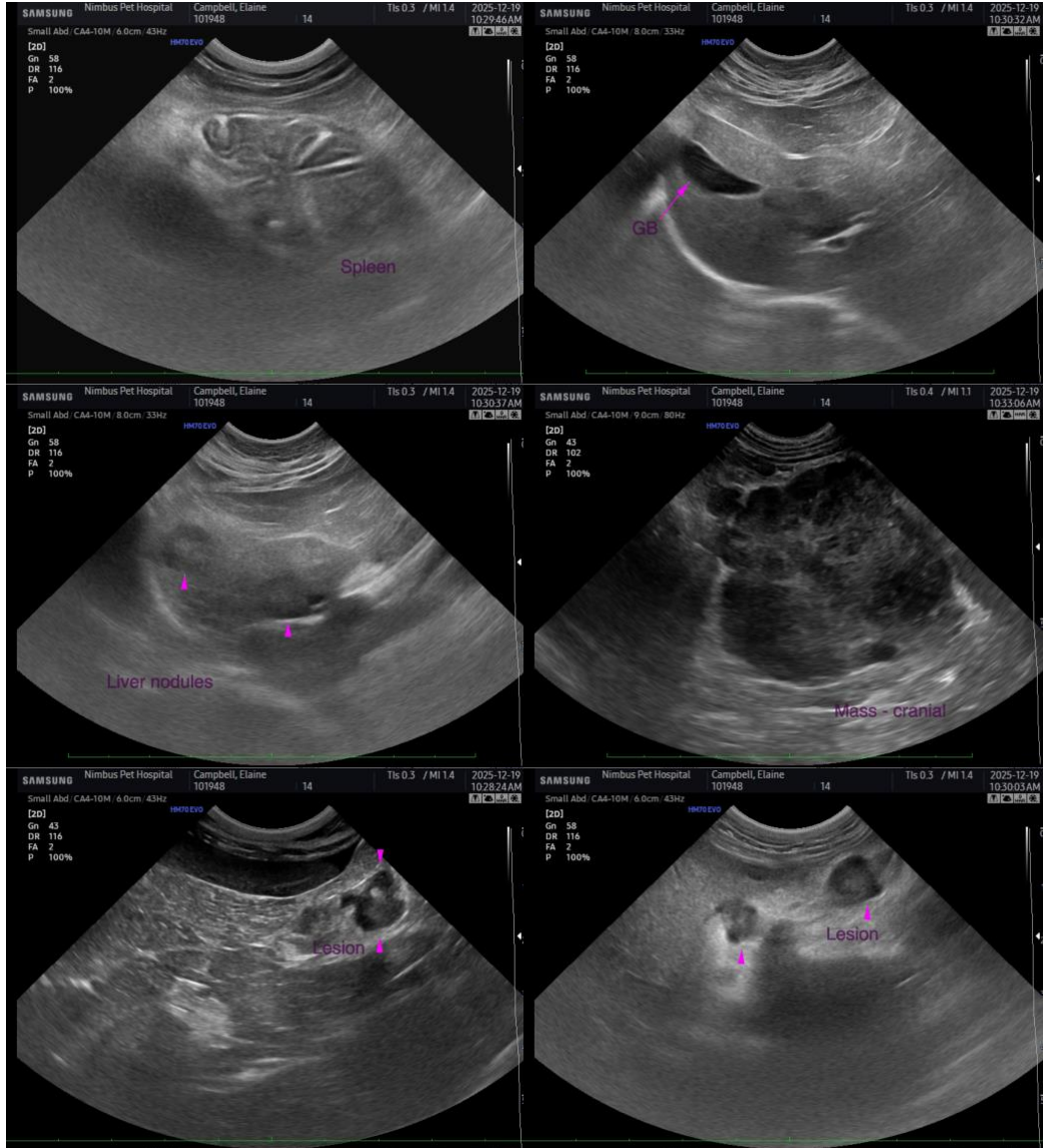
Saum Hadi

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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.

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