**PATIENT PRESENTING CLINICAL SIGNS**

Flufftron Egan

History: Weight loss. Currently on D/D.

Abnormal PE/Chem/CBC/UA Results: (01/25/2022) CHEM: Potassium 5.3. CBC: Neutrophils 1915 and Reticulocyte Hemoglobin 15.2. (01/28/2022) U/A: SG &gt;1.050 and pH 6.0.

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****BREED***Urinary System*

Maine Coon

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 cm, are normal.

**SEX**

Male, neutered

The left kidney is normal in size (3.53 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**AGE**

11 Yrs.

The right kidney is normal in size (3.80 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**WEIGHT**

7.5 lbs.

*Adrenal Glands***INTERPRETED BY**

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

The left adrenal gland is normal in size (0.70 cm length; 0.35 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.86 cm length; 0.42 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

**IMAGING PERFORMED BY**

Potomac Mobile  
Veterinary Ultrasound

*Spleen*

The spleen is normal in size (0.79 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.

*Liver***HOSPITAL NAME**

Silver Spring AH

The liver is normal to slightly prominent in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen. 2 hepatic nodules are observed, both of which are heterogeneous and multi-septated/cystic, one measuring 1.22 x 0.79 cm and the other 0.80 x 0.61 cm. The remaining parenchyma is homogeneous. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of mostly gravity dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are normal.

**REFERRING VET**

Dr. Cathy Jarrett

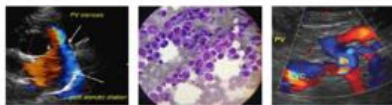
*Gastrointestinal***INVOICE**

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The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The proximal duodenum is mildly hyperperistaltic. The small intestinal lumen is not

**DATE**

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**PATIENT**

Flufftron Egan

dilated. The small intestinal wall is normal to mildly thickened (up to 0.31 cm) with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio in most segments. Discreet masses are not identified. The muscularis layer at the ileocecal colic junction is prominent. The colonic wall is normal. No obstructive disease is noted.

**SPECIES**

Feline

***Pancreas***

The left limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

**BREED**

Maine Coon

***Free Abdomen*****SEX**

Male, neutered

Trace free fluid is observed. A few prominent jejunal lymph nodes are visualized, the largest measuring 1.62 cm in length.

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**ULTRASONOGRAPHIC FINDINGS****Primary Findings:**

- The small intestinal wall changes are consistent with inflammatory bowel diseases. However, there is some potential for emerging lymphoma.
- The lymph node changes are most consistent with reactive lymphadenitis or lymphoid hyperplasia.
- Age-related pancreatic remodeling +/- fibrosis. Concurrent low-grade inflammation is also possible, particularly if a positive Murphy's sign is present.
- The trace ascites may be secondary to bowel and/or hepatic pathology.

**Secondary Findings:**

- Bilateral, degenerative renal changes with dystrophic mineralization.
- The hepatic nodules are most consistent with biliary cyst adenoma or less likely, biliary cyst adenocarcinoma.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Potomac Mobile  
Veterinary Ultrasound

**HOSPITAL NAME**

Silver Spring AH

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Three-view thoracic radiographs are recommended to assess cardiopulmonary status.
- Other diagnostic considerations include:
  1. GI panel (send to Texas A&M)
  2. A fecal evaluation for ova/Giardia, if not already performed

**REFERRING VET**

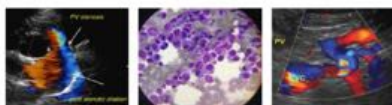
Dr. Cathy Jarrett

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**DATE**

2/1/22



**PATIENT**

Flufftron Egan

**SPECIES**

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**BREED**

Maine Coon

**SEX**

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**WEIGHT**

7.5 lbs.

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**HOSPITAL NAME**

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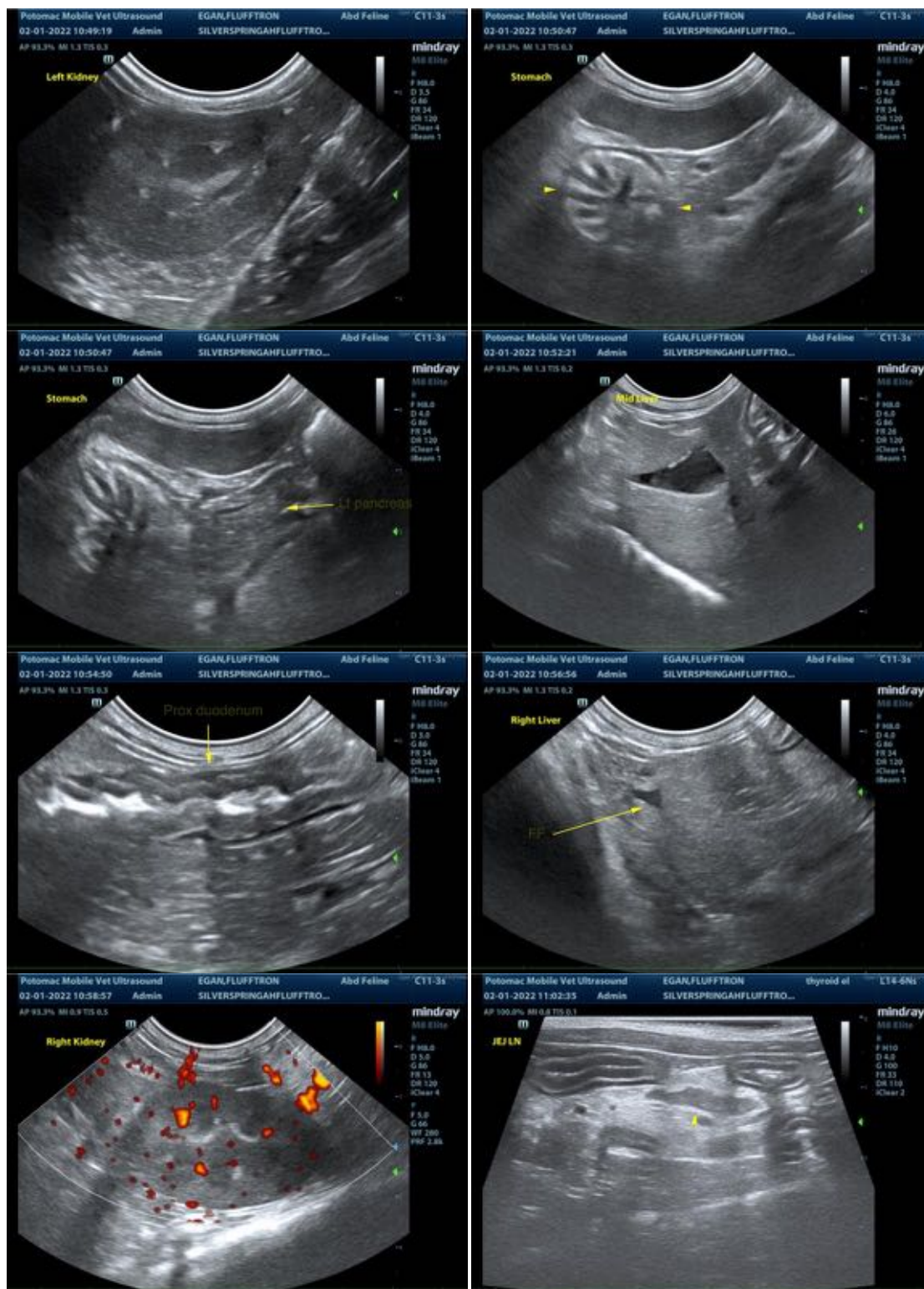
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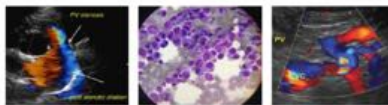
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- Ultimately, endoscopic or surgical GI biopsies may be necessary to get a definitive diagnosis. If biopsies are not to be pursued, empirical treatment for inflammatory bowel disease (i.e., hypoallergenic diet, corticosteroids) can be considered as long as the client understands the risk of treatment without a definitive diagnosis.





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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.

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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.

**WEIGHT**

7.5 lbs.

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

Andrea.nicastro@sonopath.com

**INTERPRETED BY**

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