



PATIENT PRESENTING CLINICAL SIGNS

Robbie Brooks

History: weight loss

Medications: Midazolam 5mg/ml - admin 0.1 ml iv for scan.

SPECIES

Torbugesic 10mg/ml - admin 0.08 ml IV for scan

Abnormal PE/Chem/CBC/UA Results: Alt = 62.8 AST = 331 ALP = 598 TBILI = 1.1 Conjugated Bili = 0.7

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

DSH

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. Luminal contents are anechoic. No cystic calculi are observed.

SEX

Female Spayed

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

AGE

16 years 6 mos

The right kidney is normal in size (3.47 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal-to-mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

8.5 lbs

Adrenal Glands

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

INTERPRETED BY

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

Spleen

The spleen is normal in size (0.8 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.

IMAGING PERFORMED BY

Heather

Liver

The liver is subjectively prominent-in-size, with slightly swollen peripheral contours. The parenchyma is hyperechoic relative to the spleen and somewhat attenuating. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

HOSPITAL NAME

ACC of Flanders

The gallbladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is diffusely gas-distended. 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.

REFERRING VET

Dr. Villari

INVOICE

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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.

DATE

2-6-26

Lymph Nodes

The abdominal lymph nodes are normal/not visible.



PATIENT *Free Abdomen*

There is no obvious evidence of free fluid.

Robbie Brooks

ULTRASONOGRAPHIC FINDINGS

SPECIES

Primary Findings

Feline

The diffuse hepatic parenchymal changes could be consistent with hepatic lipidosis, an inflammatory hepatopathy (i.e., hepatic lipidosis bacterial cholangiohepatitis, lymphoplasmacytic hepatitis, feline infectious peritonitis), infiltrative neoplasia (i.e., lymphoma) and/or other hepatopathy.

BREED

DSH

Secondary Findings

SEX

Minor bilateral age-related renal changes

Female Spayed

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

Hepatic tissue sampling (i.e., fine-needle aspirates or biopsies) would be necessary to get a definitive diagnosis. Aerobic and anaerobic bile cultures would also be beneficial. If hepatic tissue sampling is pursued, clotting times are recommended. If tissue sampling is not pursued, consider empirical treatment of hepatic lipidosis and cholangiohepatitis (i.e., nutritional support, broad-spectrum antibiotic therapy, hepatic antioxidants, and other supportive measures).

16 years 6 mos

WEIGHT

8.5 lbs

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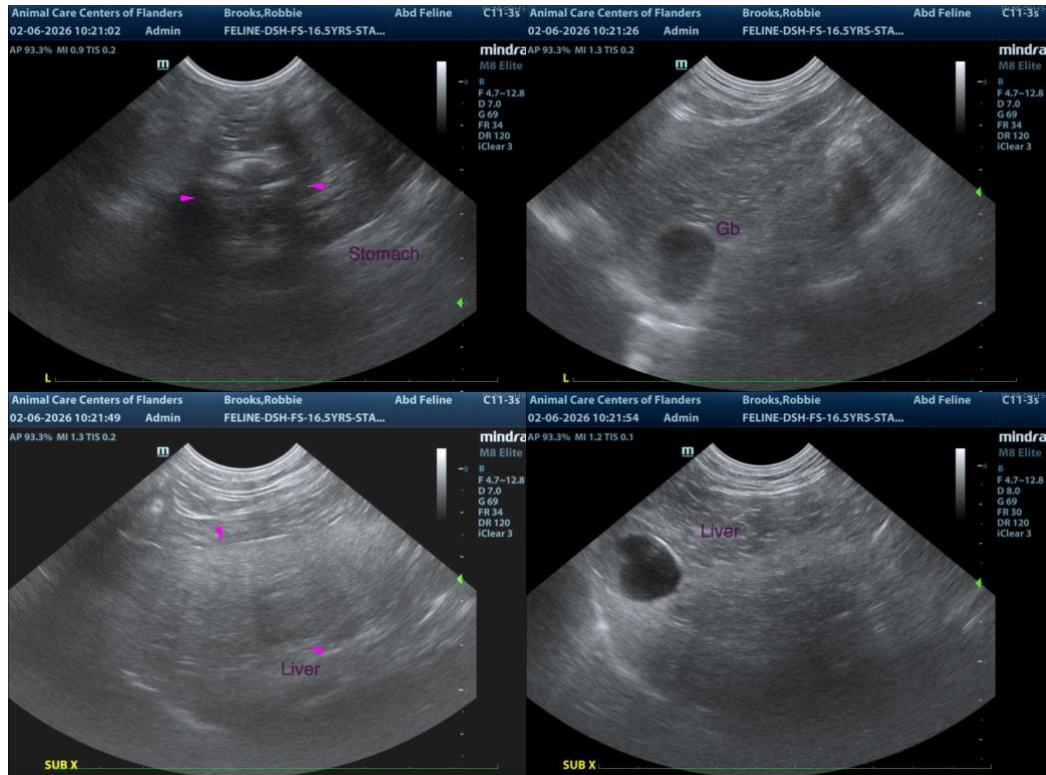
Dr. Villari

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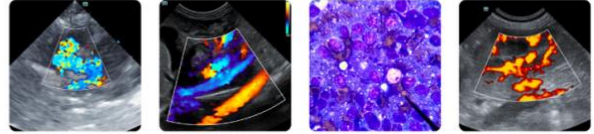
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DATE

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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.



PATIENT

Robbie Brooks

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.

SPECIES

Feline

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

DSH

SEX

Female Spayed

AGE

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