

PATIENT PRESENTING CLINICAL SIGNS

- PATIENT** Boo Lowen
- Progressive anorexia, nausea, and weight loss
 - Eats briefly then stops (suggestive of nausea)
- SPECIES** Feline
- Chronic low body weight with recent decline
 - Intermittent retching (no current vomiting)
 - Constipation (small, dry stools; hair present, no foreign material)

BREED Abnormal PE/Chem/CBC/UA Results: Underweight, mildly dehydrated Cranial abdominal abnormality palpated Otherwise stable

Siberian

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Female Spayed

Urinary System

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

AGE

8 years 9 mos

The left kidney is normal in size (3.08 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

2.72 kg

The right kidney is normal in size (3.44 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.33 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.39 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Mariusz Chmielinski DVM

Spleen

The spleen is normal in size (0.47 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.

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Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is isoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion.

REFERRING VET

Alpine 24/7 / ER

The gallbladder lumen is moderately distended. The wall is thin and smooth. A small amount of gravity-dependent, echogenic debris is observed within the lumen. The cystic and common bile ducts are normal. The duodenal papilla is normal-in-size (0.21 cm in width).

INVOICE

22764

Gastrointestinal

DATE

3-28-26

The gastric lumen is minimally fluid-distended. An approximately 4.0 cm segment of gastric wall is severely thickened (up to 1.74 cm) and hypoechoic with a mass effect. There is loss of the normal layering pattern in this region. The mesentery effacing the serosal surface in this region is hyperechoic. The remaining gastric wall is normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small



PATIENT

Boo Lowen

intestinal lumen is not dilated. In one small segment of small intestine, there is a suspected area of loss of the normal layering pattern. In the remaining segments, there is disruption in the normal 1:3 muscularis: mucosal ratio. The ileoceocolic junction and colonic wall are normal. There is no obvious evidence of an obstructive pattern.

SPECIES

Feline

Pancreas

The base and limbs of the pancreas are visible with normal curvilinear peripheral contours. The parenchyma is slightly hypoechoic 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

Siberian

Lymph Nodes

A few prominent lymph nodes are observed adjacent to the stomach (one measuring 1.44 x 0.70 cm). A few prominent mesenteric lymph nodes are also seen (one measuring 1.05 x 0.31 cm). Surrounding mesentery is mildly hyperechoic.

SEX

Female Spayed

Free Abdomen

There is no obvious evidence of free fluid.

AGE

8 years 9 mos

ULTRASONOGRAPHIC FINDINGS

WEIGHT

2.72 kg

Primary Findings

- The gastric wall thickening/mass effect is concerning for infiltrative neoplasia (i.e., lymphoma, adenocarcinoma) with a lower possibility of a focal inflammatory process. Mild adjacent peritonitis is present. The regional lymphadenopathy could be consistent with infiltrative neoplasia or reactive change.
- The mesenteric lymphadenopathy could be consistent with lymphoid hyperplasia, lymphadenitis, or infiltrative neoplasia.
- Suspected focal small intestinal wall thickening (in one video clip). This may be an imaging artifact or may represent infiltrative neoplasia, or focal inflammation.

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Secondary Findings

- Bilateral nonspecific age-related renal changes
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Feline leukemia and FIV testing are recommended if not already performed.
- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Consider fine-needle aspiration of the thickened gastric wall if clotting status is appropriate. A 25-gauge needle should be used.
- Depending on the results of the above diagnostics, consultation with a board-certified oncologist may be warranted.



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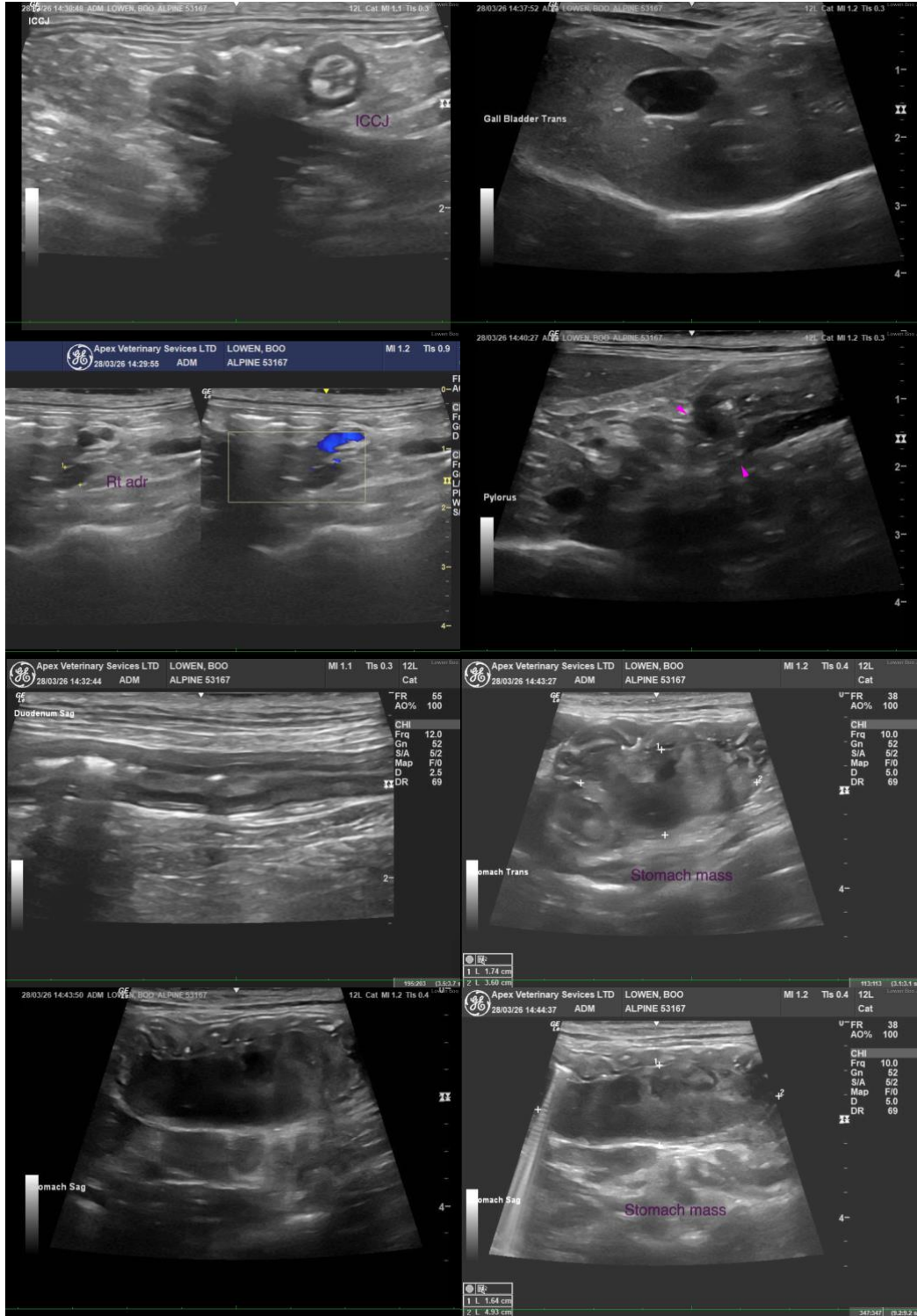
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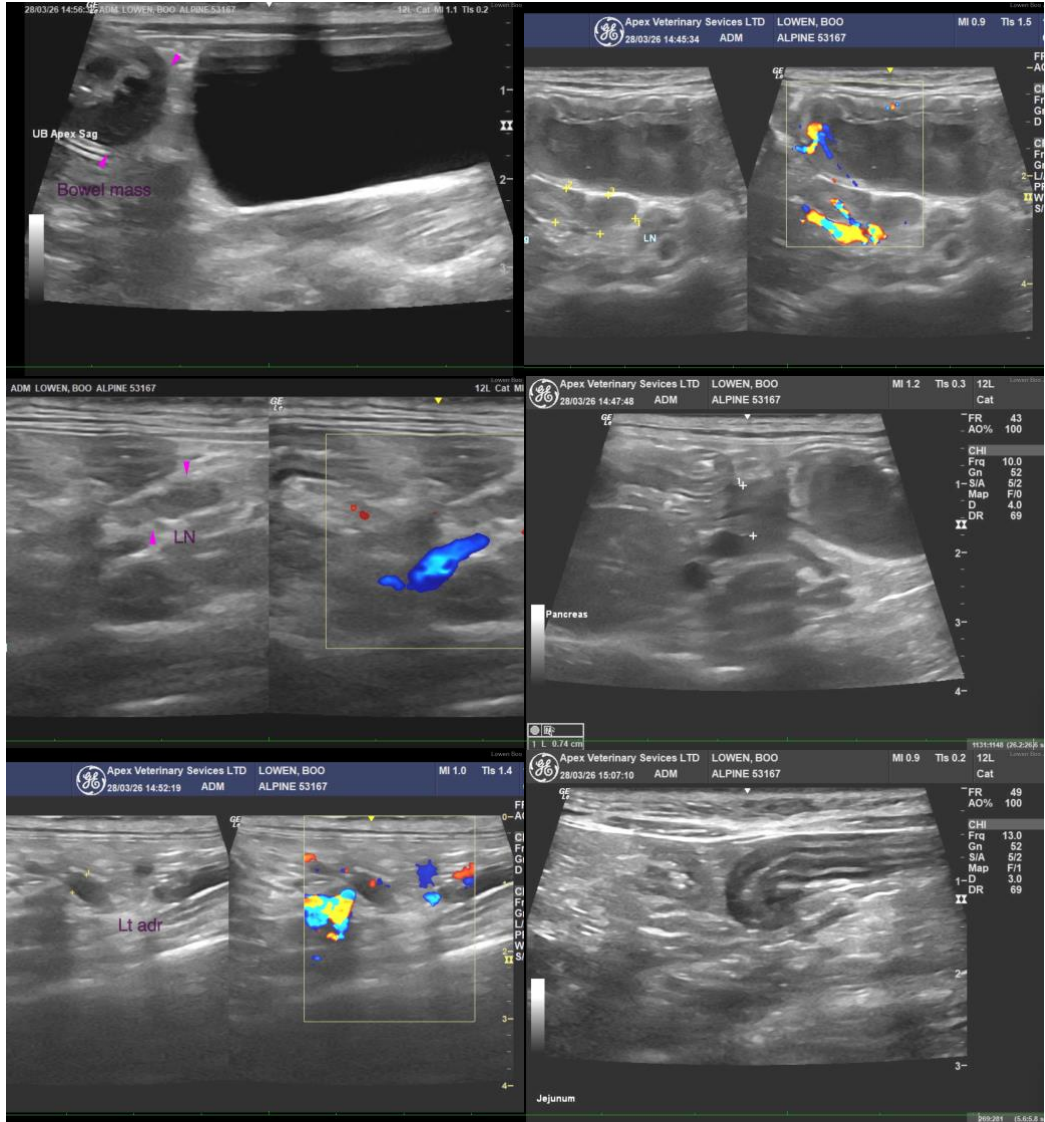
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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