



PATIENT PRESENTING CLINICAL SIGNS

Dominic Miller

- Presented for lethargy and hyporexia for several days.
- Previously hospitalized for IMHA, received 2 blood transfusions and was on pred, then weaned off.
- History of MCT (several masses removed), IMHA, hypertension (managed on amlodipine).

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

9.5

WEIGHT

4.73 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Lindsay Powell, CVT

HOSPITAL NAME

Hershey AEC

REFERRING VET

Dr. Shally Gastelu

INVOICE

22804

DATE

4-2-26

Abnormal PE/Chem/CBC/UA Results: Grade 4/6 HM, mucous membranes pale pink/moist, mild generalized muscle wasting Soft, abdomen palpates doughy CBC: RBC 3.01 (L), HCT 15.4% (L), Retic 236.6 (H), Eos 0.09 (L), PLT >150k EPOC: K 3.1 (L), iCa 1.08 (L), Lac 4.04 (H), Glu 154 (H), HCT 14 (L) FeLV/FIV/HW: Neg x 3 Chem: ALT <10 (L), NSF BP: 215 PT/PTT: Error/105.7 Rads: No obvious pulmonary consolidation/metastasis, hepatomegaly with mineralization along ventral border, gas present in colon, moderate sized bladder SAT: neg micro/macro agglutination Recheck PCV/TS 4am: 14/7 Recheck BP 220

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is distended. A moderate amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

The left kidney is normal in size (4.41 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. The cortex is hyperechoic relative to the spleen. Mild pyelectasia is present (0.24 cm in the longitudinal plane). There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal in size (4.49 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild- to moderate loss of corticomedullary distinction. The cortex is hyperechoic relative to the spleen. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

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

Spleen

The spleen is normal in size (0.63 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

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen with minor changes consistent with age-related remodeling. No focal lesions are observed. Hepatic vasculature and biliary tracts are of normal volume with no evidence of congestion. The portal vein to caudal vena cava ratio is approximately 1: 1.

The gallbladder lumen is moderately distended. The wall is thin and smooth. A small amount of suspended echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is moderately-distended with fluid and ingesta. 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



PATIENT obstructive pattern.

Dominic Miller **Pancreas**

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

9.5

WEIGHT

4.73 kg

A portion of the pancreas is obscured by the gastric distention. In the visualized portion of the right limb, the pancreas is normal in size with minimal deviation from the normal peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is not overtly dilated.

Lymph Nodes
The abdominal lymph nodes are normal/not visible.

Free Abdomen
There is no obvious evidence of free fluid.

ULTRASONOGRAPHIC FINDINGS

- Minor pancreatic parenchymal remodeling
- Bilateral nonspecific age-related renal changes

*An obvious cause for the patient's anemia is not definitively identified in this study. Considerations include immune-mediated disease, occult neoplasia, vector-borne disease, early blood loss, bone marrow disease, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider vector-borne disease testing, particularly if the clinical suspicion for infection is high.
- If the anemia remains nonregenerative, consider a bone marrow aspirate, a feline leukemia immunofluorescence assay should also be performed on a bone marrow sample.
- While awaiting test results, symptomatic care is recommended.

INTERPRETED BY

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

IMAGING PERFORMED BY

Lindsay Powell, CVT

HOSPITAL NAME

Hershey AEC

REFERRING VET

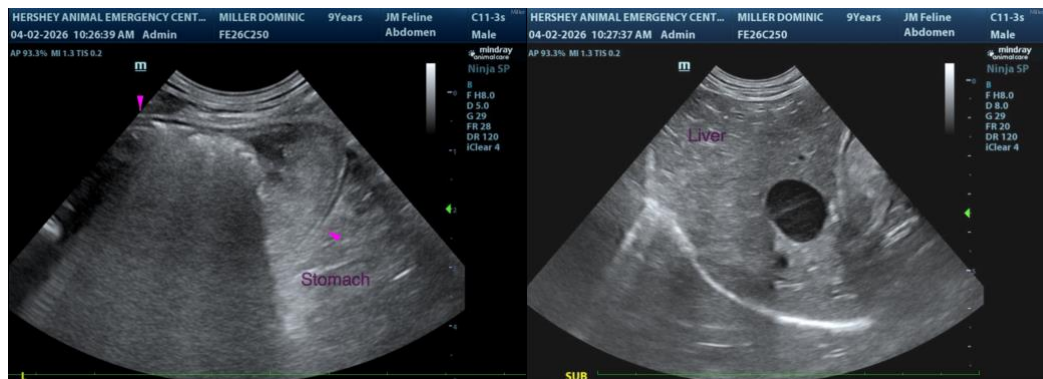
Dr. Shally Gastelu

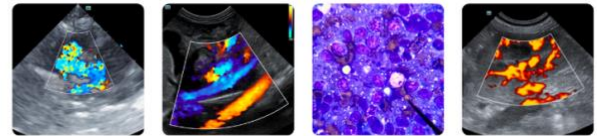
INVOICE

22804

DATE

4-2-26





PATIENT

Dominic Miller

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

9.5

WEIGHT

4.73 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Lindsay Powell, CVT

HOSPITAL NAME

Hershey AEC

REFERRING VET

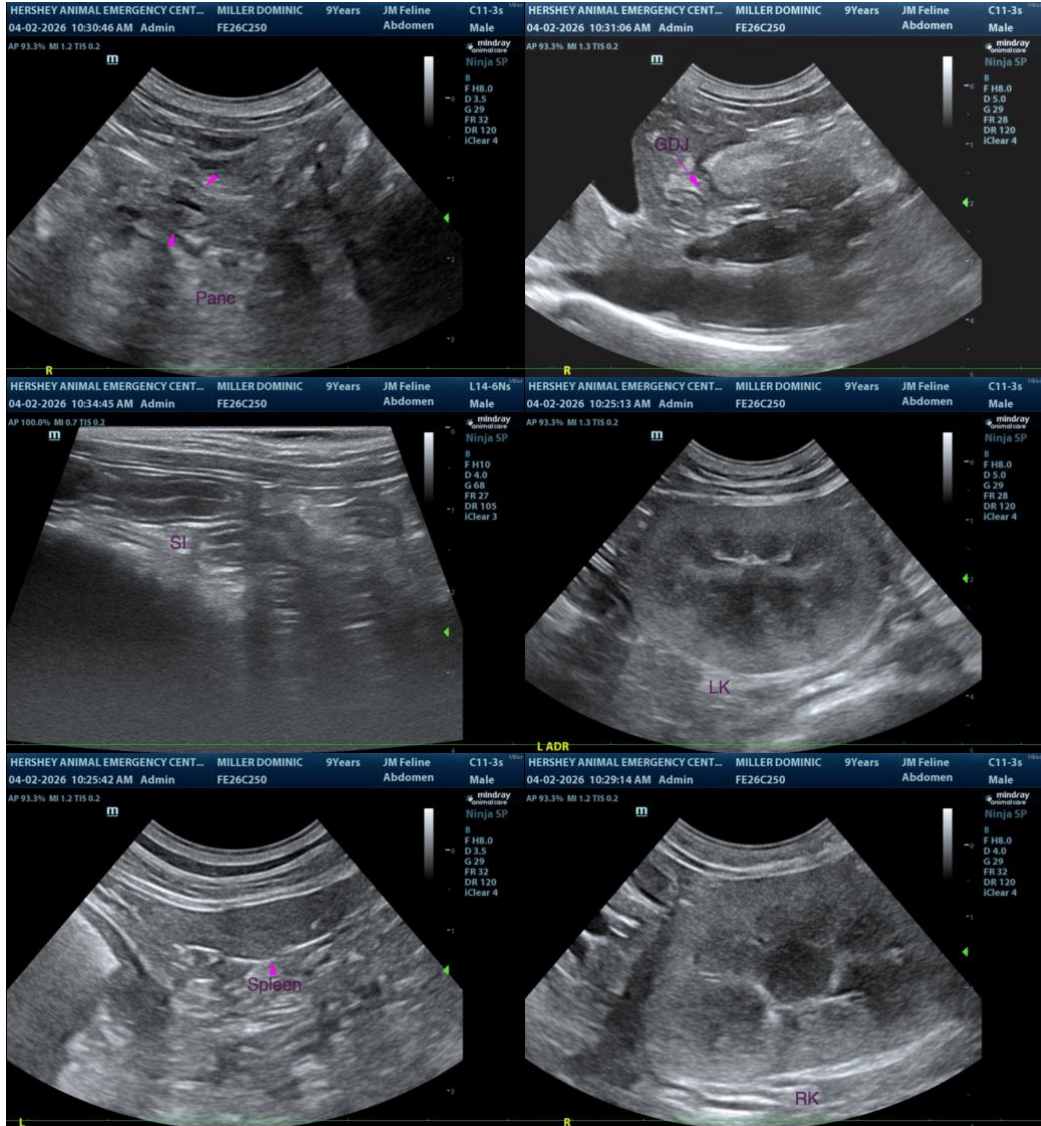
Dr. Shally Gastelu

INVOICE

22804

DATE

4-2-26



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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com



PATIENT

Dominic Miller

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

9.5

WEIGHT

4.73 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Lindsay Powell, CVT

HOSPITAL NAME

Hershey AEC

REFERRING VET

Dr. Shally Gastelu

INVOICE

22804

DATE

4-2-26