



PATIENT PRESENTING CLINICAL SIGNS

Molly Heal History: Vomiting pink-tinged fluid several weeks. No weight loss. Still has appetite and good activity.

SPECIES Abnormal PE/Chem/CBC/UA Results: ALT 166 (12-130), GGT 10 (0-4), rest of chemistries WNL. WBC 30,000 (2.87-17.02) with neutrophils, lymphocytes, monocytes and eosinophils all increased

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

DSH The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly 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

Spayed Female The left kidney is normal size (3.31 cm in length); with a slightly irregular shape There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. A cortical infarct is observed at the caudal aspect. Trace pyelectasia is present. There is no evidence of nephroliths, hydroureter.

AGE

14 years The right kidney is normal size (3.82 cm in length); with an irregular shape. The cortex is variably thickened. There is moderate loss of corticomedullary distinction. Cortical infarcts are observed at the caudolateral aspect. Hyperechoic shadowing diverticular foci are seen. Trace pyelectasia is present. There is no evidence of hydroureter.

WEIGHT

7.2 lbs

Adrenal Glands

The region of the adrenal glands is evaluated. No obvious pathology is seen.

INTERPRETED BY

Spleen

Andrea Nicastro, DVM, Diplomate ACVIM (Small Animal Internal Medicine) The spleen is subjectively prominent to enlarged with swollen peripheral contours. The parenchyma is subtly mottled in appearance. No distinct focal lesions are observed. Splenic vasculature appears normal with no evidence of thrombosis.

IMAGING PERFORMED BY

Liver

Michelle Bartus The liver is subjectively enlarged with slightly swollen 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. The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of aggregated echogenic partially dependent debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

HOSPITAL NAME

Valley Vet. Svc., Inc. The gall bladder 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.

REFERRING VET

Gastrointestinal

Michelle Bartus The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. A >2.50 cm bowel mass is observed in the left midabdomen, just caudal to the right kidney. The mesentery effacing the serosal surface is mildly hyperechoic. The wall in this region is severely thickened (up to 0.92 cm), with complete loss of the normal layering pattern. The lumen in this region is mildly distended. In the remaining small intestinal segments, the wall is thickened (up to 0.46 cm), with a normal layering pattern. There is disruption in the normal 1:3 muscularis: mucosal ratio, with a >1: 1 ratio in several segments. The ileoceocolic junction and colonic wall are normal.

INVOICE

10689

DATE

Pancreas

4/5/22



PATIENT

Molly Heal

The left limb is prominent with minimal deviation from the normal peripheral contours. The parenchyma is hypochoic relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is not overtly dilated.

SPECIES

Feline

Free Abdomen

Trace free fluid is observed. A few prominent colic lymph nodes are visualized, the largest measuring 0.88 cm in length.

BREED

DSH

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bowel mass, right midabdomen, just caudal to the right kidney. Neoplasia (i.e., lymphoma, adenocarcinoma) is suspected, with a lower possibility of a severe inflammatory process (i.e., pyogranulomatous). Regional peritonitis is present. The remaining small intestinal changes could be consistent with emerging lymphoma or severe inflammatory bowel disease.
- The prominent abdominal lymph nodes could be consistent with reactive lymphadenopathy, lymphoid hyperplasia or infiltrative neoplasia (i.e., lymphoma).

Secondary Findings

- The pancreatic changes are suggestive of chronic pancreatitis.
- The hepatic parenchymal changes may be a normal variant for this patient or may be secondary to emerging hepatic lipidosis, inflammatory disease, infiltrative neoplasia, other hepatopathy.
- The mild splenomegaly could be consistent with emerging neoplasia, antigenic stimulation, lymphoid hyperplasia, extramedullary hematopoiesis or splenitis.
- Bilateral age-related renal changes with cortical infarcts and right dystrophic mineralization

AGE

14 years

WEIGHT

7.2 lbs

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- A fine-needle aspirate of the bowel mass is recommended, if accessible and if clotting status is appropriate. If cytology results are inconclusive or if the lesion is not accessible, abdominal exploratory with biopsy +/- removal of the mass may be necessary to get a definitive diagnosis. Also consider a GI panel including serum cobalamin and folate, TLI and PLI.

IMAGING PERFORMED BY

Michelle Bartus

HOSPITAL NAME

Valley Vet. Svc., Inc.

REFERRING VET

Michelle Bartus

INVOICE

10689

DATE

4/5/22



PATIENT

Molly Heal

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

14 years

WEIGHT

7.2 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Michelle Bartus

HOSPITAL NAME

Valley Vet. Svc., Inc.

REFERRING VET

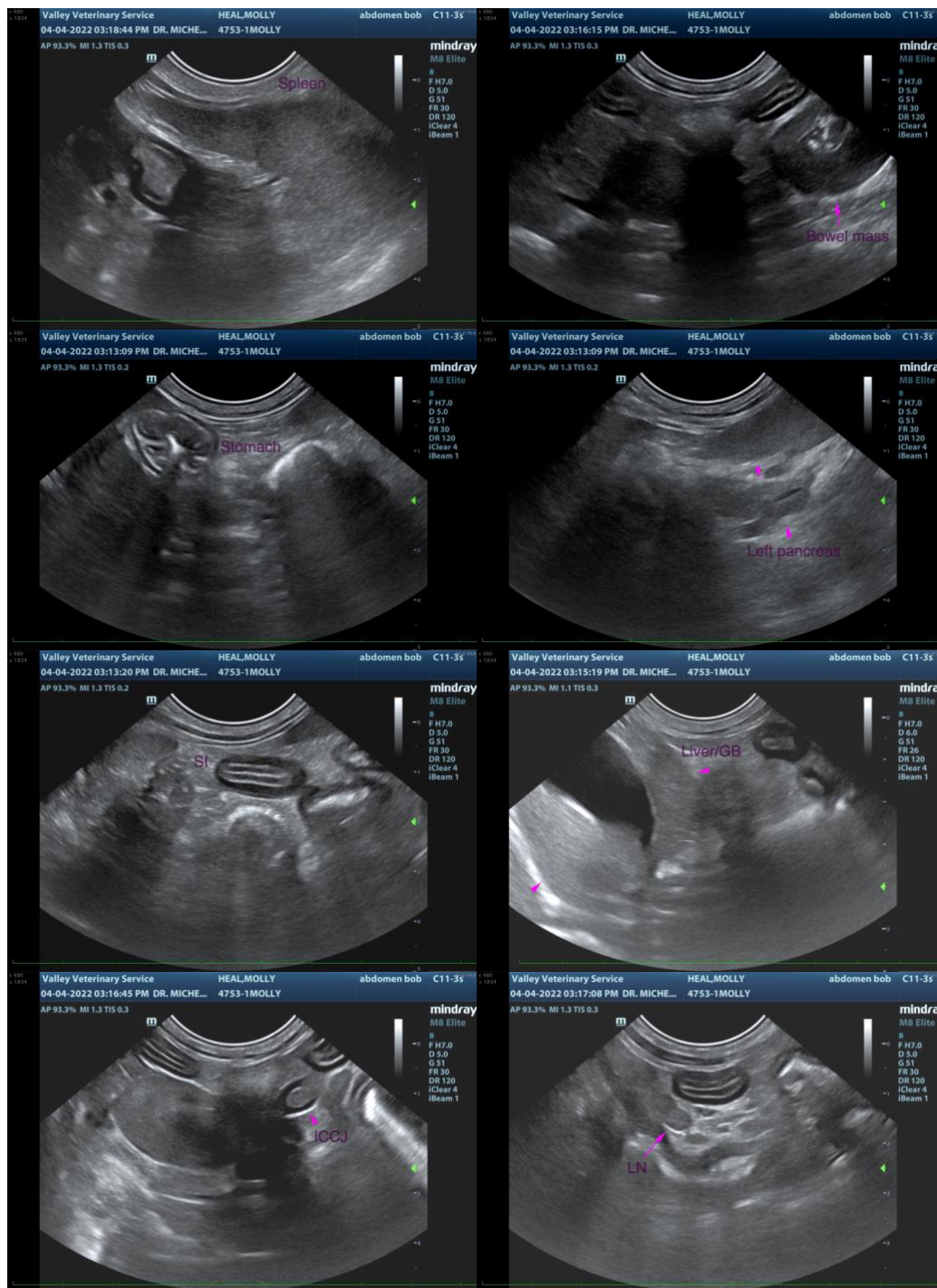
Michelle Bartus

INVOICE

10689

DATE

4/5/22



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.



PATIENT

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

Molly Heal

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

14 years

WEIGHT

7.2 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Michelle Bartus

HOSPITAL NAME

Valley Vet. Svc., Inc.

REFERRING VET

Michelle Bartus

INVOICE

10689

DATE

4/5/22