



PATIENT PRESENTING CLINICAL SIGNS

Melody O'Leary History: pancreatitis

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small to moderate amount of suspended, echogenic debris is observed within the lumen. 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.

BREED

DSH

SEX

Spayed Female

The left kidney is small in size (2.79 cm in length); with an irregular shape. The cortex is variably thickened. There is moderate loss of corticomedullary distinction. Several cortical infarcts are visualized. There is no evidence of pyelectasia, nephroliths or hydronephrosis. Renal vasculature is normal. The mesentery effacing the serosal surface of the kidney is mildly hyperechoic.

AGE

11 years

The right kidney is normal size (3.82 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

13 lbs

Adrenal Glands

The left adrenal gland is normal size (0.42 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

The region of the right adrenal gland is evaluated. No obvious pathology is observed.

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Spleen

The spleen is normal in size with a normal capsular contour. The spleen is contracted with normal curvilinear peripheral contours. No focal lesions are observed. Splenic vasculature is normal.

IMAGING PERFORMED BY

Jenn

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

HOSPITAL NAME

Rockaway AH

The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

REFERRING VET

Dr. Maniar

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. 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 thickness is normal with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio in most segments. Discrete masses are not identified. The ileocecal colonic wall is normal. There is no evidence of an obstructive pattern.

INVOICE

10900

Pancreas

The pancreas is normal in size with normal peripheral contours. The pancreatic duct is normal. The base and limbs of the pancreas are isoechoic to surrounding omental fat. No focal lesions are observed. There is no evidence of peripancreatic inflammation or effusion.

DATE

5/12/22



PATIENT

Melody O'Leary

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

SPECIES

Feline

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bowel pattern suggestive of inflammatory bowel disease. There is some potential for emerging lymphoma. However, neoplasia is considered less likely at this time.

BREED

DSH

- Bilateral age-related renal changes with left cortical infarcts.

SEX

Spayed Female

Secondary Findings

- The splenic contraction is most consistent with dehydration.

AGE

11 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If the patient is exhibiting gastrointestinal signs, consider the following:

WEIGHT

13 lbs

- Fecal evaluation for ova and Giardia
- Malabsorption panel, including serum cobalamin and folate, TLI and PLI
- Thoracic radiographs to assess for occult esophageal disease.
- +/- GI biopsies (i.e., endoscopic or surgical)

While awaiting test results, symptomatic treatment is recommended.

INTERPRETED BY

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REFERRING VET

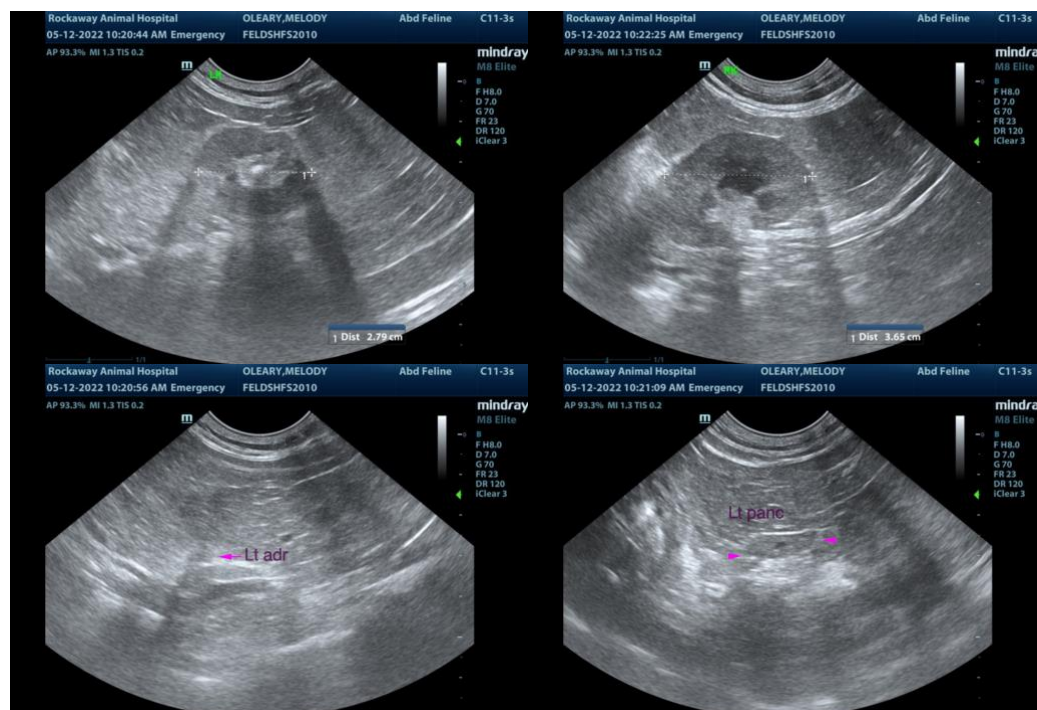
Dr. Maniar

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PATIENT

Melody O'Leary

SPECIES

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BREED

DSH

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Spayed Female

AGE

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WEIGHT

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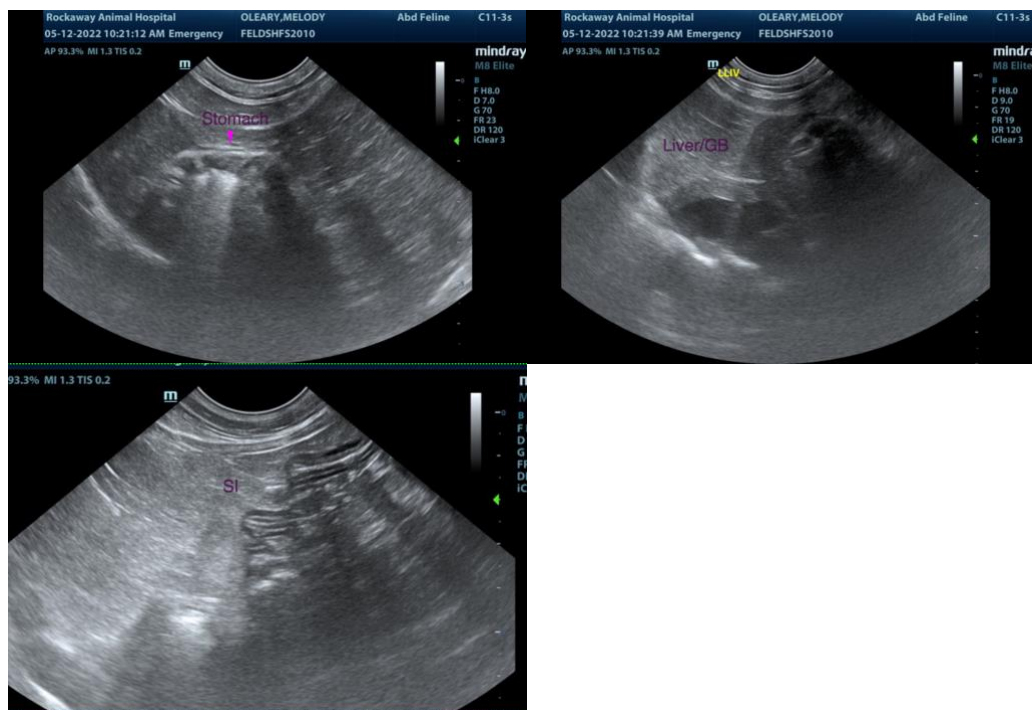
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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