

PATIENT PRESENTING CLINICAL SIGNS

Doug Hagerman
 Clinical Exam Findings: Ongoing weight loss and decreased in appetite despite appetite stimulant usage
 Abnormal lab-work values: Blood work as well as fecal results I just emailed to info@animalsoundsnw.com
SPECIES Current Medications: None
 Radiographic Findings: No radiographs have been taken

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Blue Point Balinese
 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 the proximal urethra, visible to a depth of 2.5 cm, are normal.

SEX

Neutered Male
 The left kidney is normal in size (3.56 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. Renal vasculature is normal.

AGE

13

The right kidney is normal in size (3.68 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. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

9.37 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
 (Sm Animal Internal Med)

Spleen

The spleen is normal in size (0.66 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

Sara Hansen

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.

HOSPITAL NAME

VCA Salem AH

The gallbladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated, gravity-dependent sludge is observed within the lumen. The cystic and common bile ducts are normal.

REFERRING VET

Dr Stoehr

Gastrointestinal

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. A >8.0 cm mass effect is observed within the bowel. The wall in this region is severely thickened (at least 3.1 cm) and hypoechoic, with loss of the normal layering pattern. Surrounding mesentery is hyperechoic. In the remaining bowel segments, the wall is normal in thickness with a normal layering pattern and appropriate mural detail. There is no obvious evidence of an obstructive pattern.

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Pancreas

The left limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic 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.

DATE

5-27-26



PATIENT *Lymph Nodes*

Doug Hagerman

A few prominent hypochoic- to heterogenous mesenteric lymph nodes are observed (one measuring 1.52 x 1.62 cm).

SPECIES *Free Abdomen*

Feline

The mesentery in the cranial- to mid-abdomen is hyperechoic, with ill-defined hypochoic areas/nodules. Trace free fluid is observed.

BREED **ULTRASONOGRAPHIC FINDINGS**

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Primary Findings

SEX

Neutered Male

- Intestinal mass effect. Neoplasia (i.e., adenocarcinoma, lymphoma, other) is strongly suspected, with a lower possibility of a severe inflammatory process. Adjacent peritonitis is present. The regional lymphadenopathy could be consistent with metastatic disease or reactive change.

AGE

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- The mesenteric changes in the cranial- to mid-abdomen could be consistent with metastatic lesions or reactive pathology.

Secondary Findings

WEIGHT

9.37 lbs

- 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.

INTERPRETED BY

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 Diplomate ACVIM
 (Sm Animal Internal Med)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Consider fine-needle aspiration of the bowel mass (assuming normal clotting status). A 25-gauge needle should be used. Depending on the cytology results, consultation with a board-certified oncologist and/or surgeon may be warranted.
- Also consider a GI panel including serum cobalamin and folate, TLI and PLI to assess for concurrent maldigestion/malabsorption and pancreatic disease.

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

VCA Salem AH

REFERRING VET

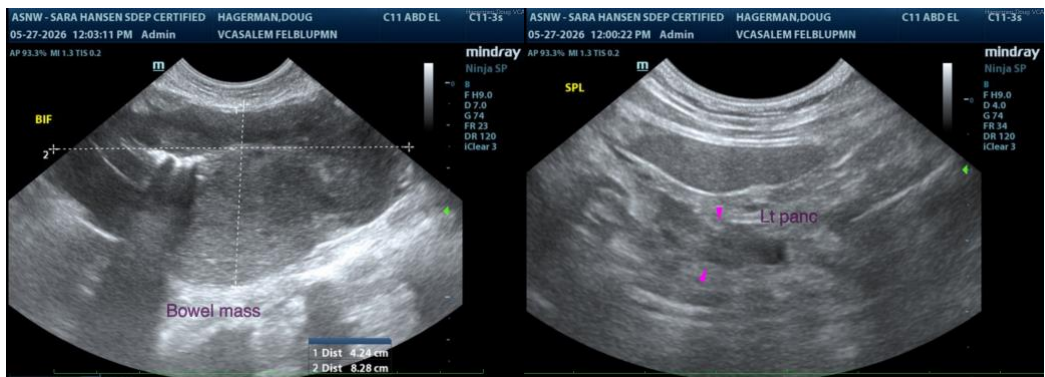
Dr Stoehr

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PATIENT

Doug Hagerman

SPECIES

Feline

BREED

Blue Point Balinese

SEX

Neutered Male

AGE

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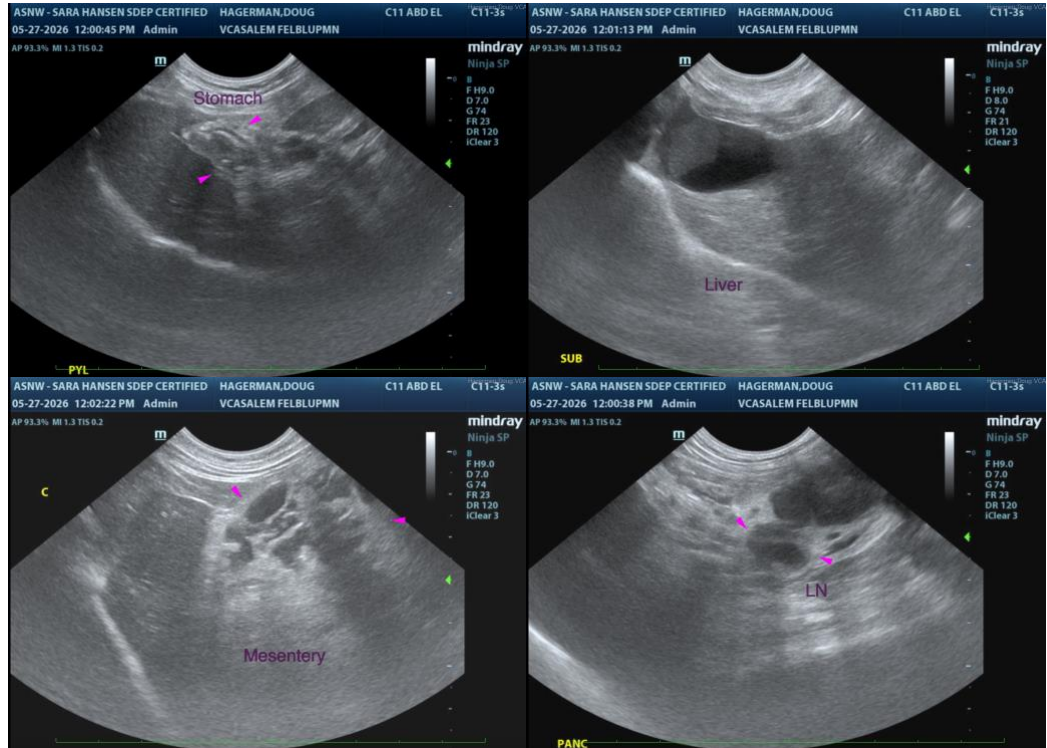
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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