

**PATIENT**

Tuffy Harley

**PRESENTING CLINICAL SIGNS**

History: Severe lethargy and a temp of 103°. CBC shows a neutropenia with a possible left shift. Mild thrombocytopenia on blood smear.

**SPECIES**

Feline

Abnormal lab-work values: Chem panel shows a BUN of 15. Otherwise unremarkable.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Persian

**Urinary System**

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2 cm, are normal.

**SEX**

Neutered Male

The left kidney is normal in size (4.22 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**AGE**

7 years

The right kidney is normal in size (3.89 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**WEIGHT**

NP

**Adrenal Glands**

The left adrenal gland is normal size (0.44 cm in width) with a normal shape and smooth peripheral contours. One-to-two pinpoint hyperechoic foci are visualized in the parenchyma. The glandular echogenicity and detail are otherwise normal. The phrenicoabdominal vein and surrounding vasculature are normal.

**INTERPRETED BY**

Andrea Nicastro, DVM,  
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Animal Internal Medicine*)

The right adrenal gland is normal size (0.47 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

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**Spleen**

The spleen is normal in size (0.97 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.

**HOSPITAL NAME**

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**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. The portal vein to caudal vena cava ratio is approximately 1: 1.

**REFERRING VET**

Magenta Kline

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. The duodenal papilla is normal in size (0.47 cm in width).

**INVOICE**

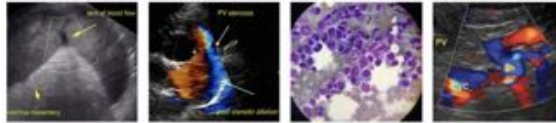
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**Gastrointestinal**

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 is normal in

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7.5.23



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thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

**SPECIES**

**Pancreas**

Feline

The left limb and base of the pancreas are prominent in size with minimal deviation from the normal peripheral contours. The parenchyma is slightly hypoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is visible but not overtly dilated (0.14 cm in diameter). Effusion.

**BREED**

**Free Abdomen**

Persian

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

**SEX**

**Other**

Neutered Male

A brief echocardiogram reveals no obvious evidence of pericardial effusion or pleural effusion in the visible window.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

**Primary Findings**

7 years

- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended.
- Mild bilateral chronic renal changes with dystrophic mineralization
- The hyperechoic foci in both adrenal glands likely represent a benign age-related incidental finding.

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\*An obvious cause for the patient's clinical signs is not definitively identified in this study. Considerations include infectious/inflammatory disease, occult neoplasia, autoimmune disease, other.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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- Further work-up for a fever of unknown origin is recommended, and could include the following:
  1. Urine culture and sensitivity
  2. Three-view thoracic radiographs to assess for occult disease in the chest
  3. Infectious disease testing (i.e., feline leukemia and FIV testing, +/- Toxoplasmosis, +/- FIP, +/- tick-borne infection)
  4. +/- echocardiogram to assess for endocarditis
  5. While awaiting test results, symptomatic care is recommended. Given the neutropenia, broad-spectrum antibiotic therapy is also recommended along with serial monitoring of the patients CBC to assess for progression. If neutropenia persists, a bone marrow aspirate may be warranted.

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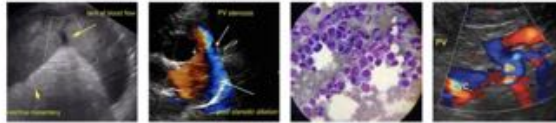
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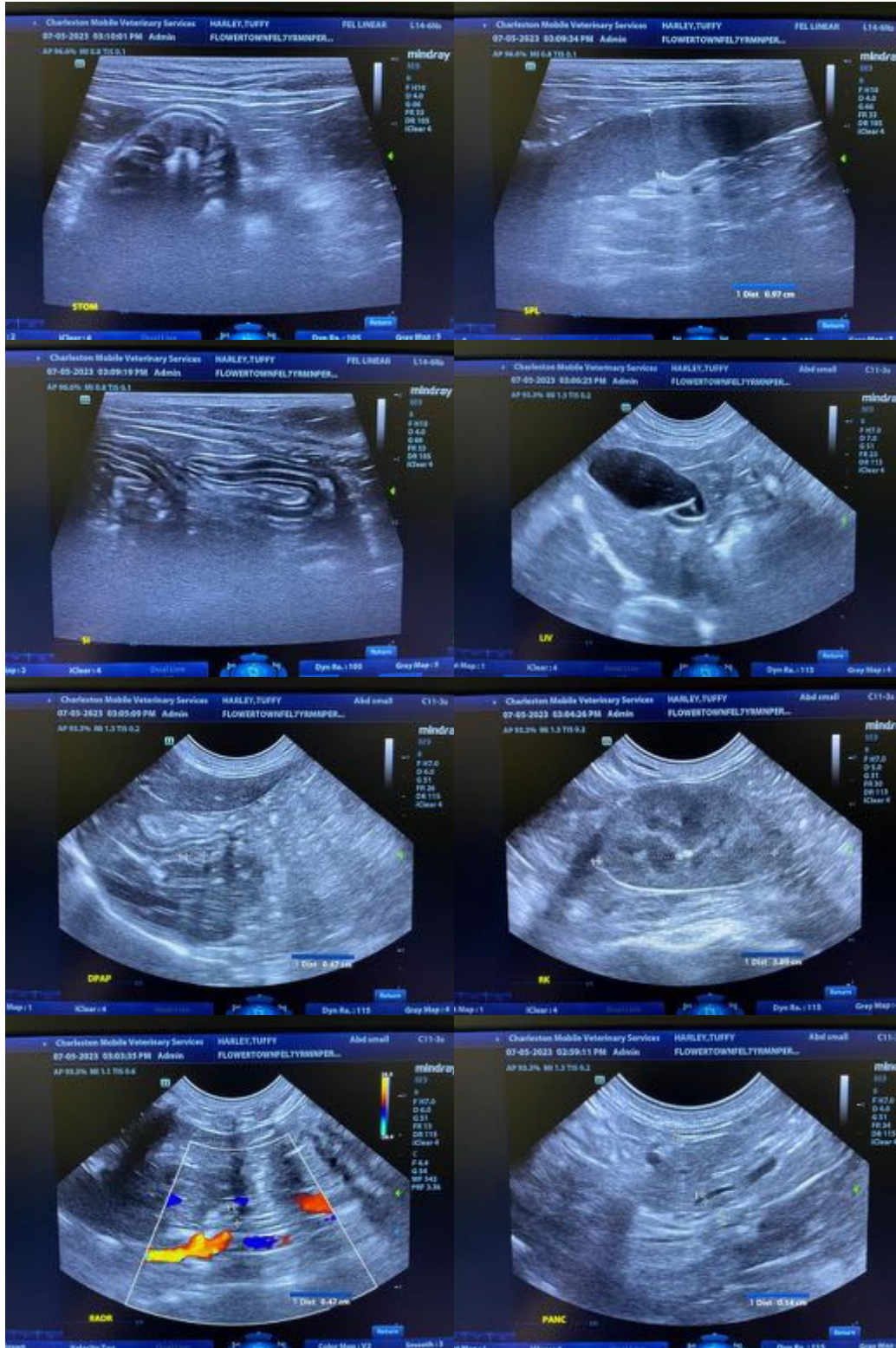
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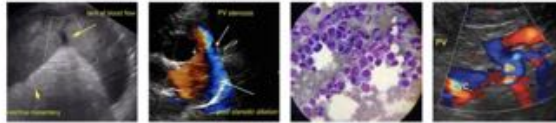
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**SPECIES**

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**BREED**

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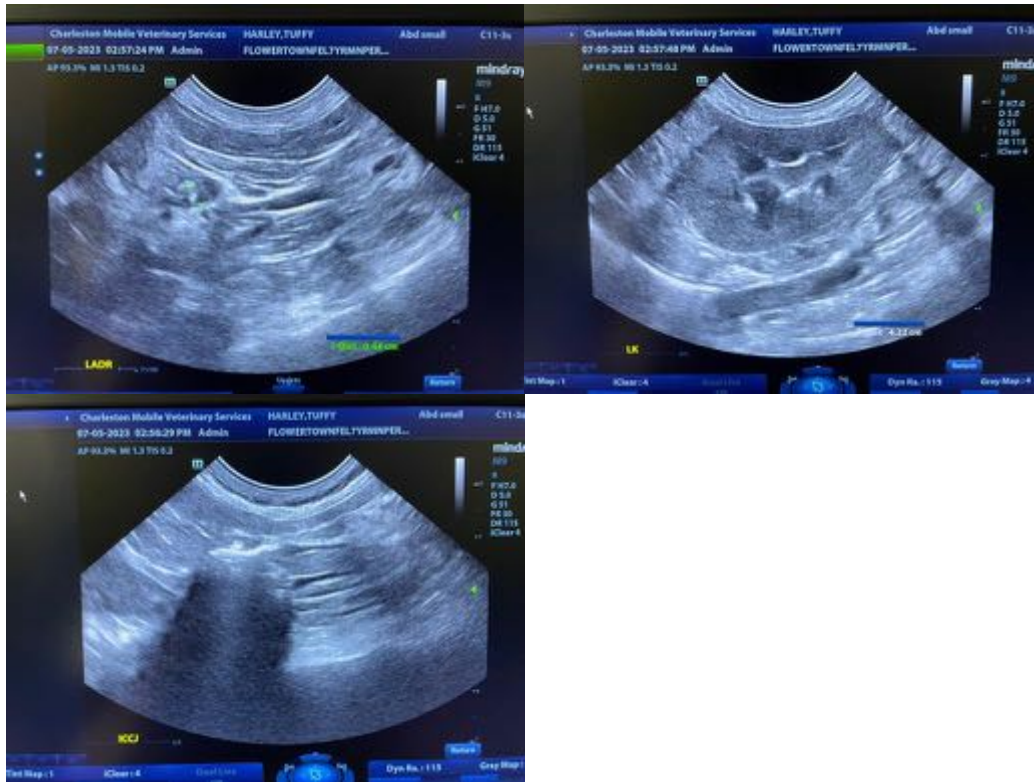
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**AGE**

7 years

**WEIGHT**

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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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