



PATIENT

Jilly Fitch

SPECIES

Feline

BREED

Domestic shorthair

SEX

Female, spayed

AGE

3 Yrs.

WEIGHT

7.8 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Bailes

HOSPITAL NAME

All Creatures Great &
Small VC, Corvallis OR

REFERRING VET

Dr. Justin Vaughn

INVOICE

12247

DATE

9/23/21

PRESENTING CLINICAL SIGNS

History: acute onset anorexia, lethargy 8/10/21; unremarkable exam; abdominal rads performed = NSF. Previously tested negative for Felv/FIV; indoor only. Cerenia administered. Bloodwork performed: hypercalcemia (11.5), otherwise NSF Recheck TCa 2 weeks later - still elevated @ 11.7 Ionized calcium checked: elevated @ 1.46 pTH checked: decreased @ <0.5
Abnormal PE/Chem/CBC/UA Results: NSF on PE today other than weight loss Patient was started on DM diet 2 weeks ago to hopefully help w/ hypercalcemia. Thoracic rads taken today: NSF

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

The left kidney is normal size (3.62 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

The right kidney is normal size (3.85 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size (0.34 cm length; xxx cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.20 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.70 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 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 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.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is minimally fluid distended. The gastric wall and pylorus are normal in thickness with a normal layering



PATIENT

Jilly Fitch

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. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

SPECIES

Feline

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.

BREED

Domestic shorthair

Free Abdomen

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

SEX

Female, spayed

ULTRASONOGRAPHIC FINDINGS

AGE

3 Yrs.

- 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.

WEIGHT

7.8 lbs.

*An obvious cause for the patient's clinical signs is not identified in this study.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Regarding the weight loss and anorexia, consider the following diagnostics:

- Serum cobalamin, folate, PLI and TLI
- A fecal evaluation for ova/Giardia
- +/- endoscopic or surgical gastrointestinal biopsies.

IMAGING PERFORMED BY

Jessica Bailes

Regarding the hypercalcemia, it is likely idiopathic given the low PTH level and lack of evidence of neoplasia. If dietary therapy is ineffective in reducing the serum calcium level, consider bisphosphonate therapy (i.e., alendronate).

HOSPITAL NAME

All Creatures Great &
Small VC, Corvallis OR

REFERRING VET

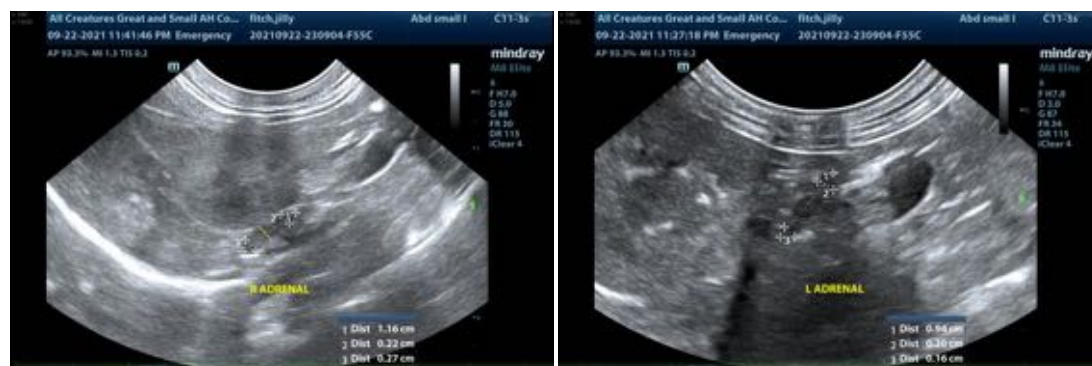
Dr. Justin Vaughn

INVOICE

12247

DATE

9/23/21





PATIENT

Jilly Fitch

SPECIES

Feline

BREED

Domestic shorthair

SEX

Female, spayed

AGE

3 Yrs.

WEIGHT

7.8 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Bailes

HOSPITAL NAME

All Creatures Great &
Small VC, Corvallis OR

REFERRING VET

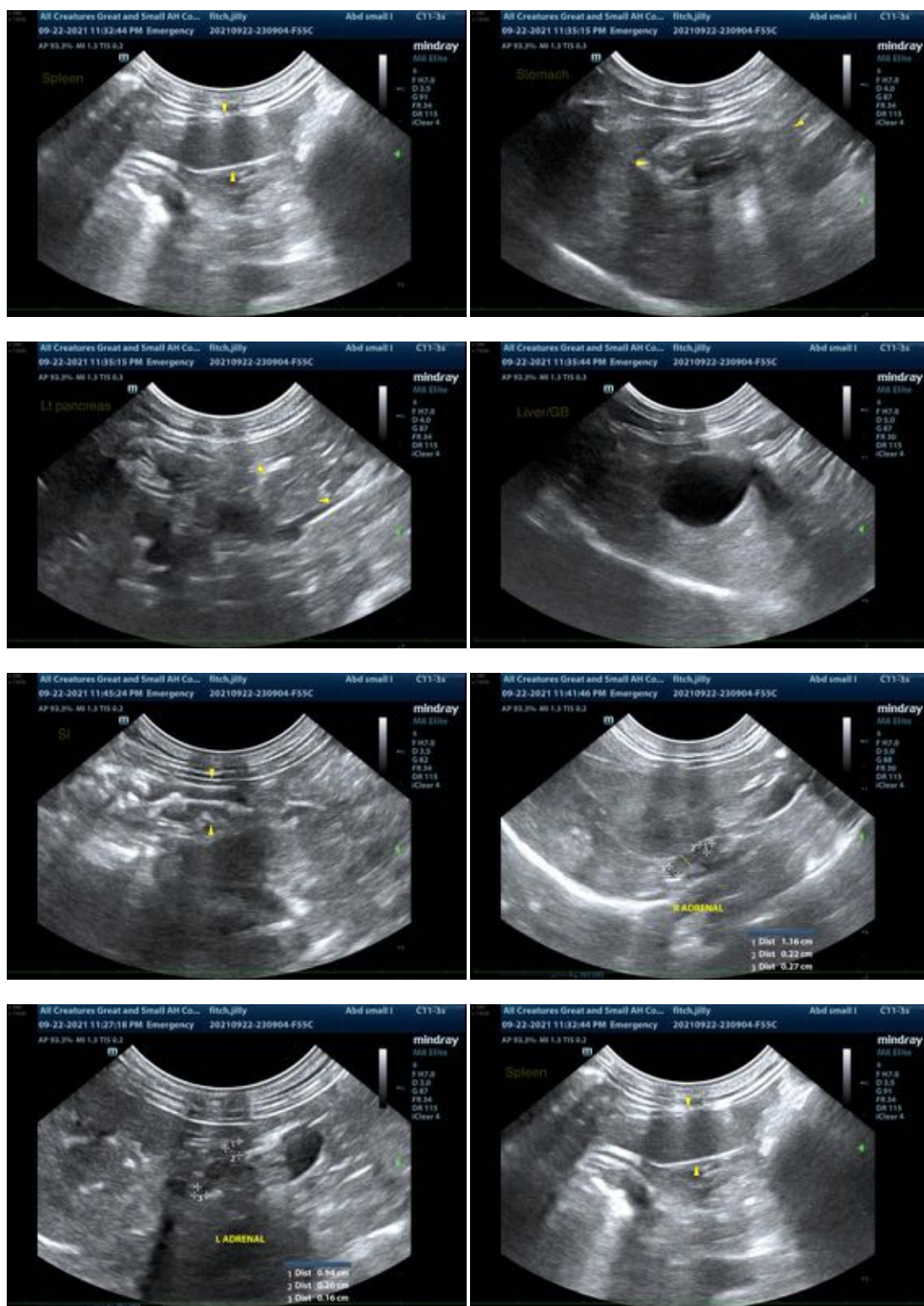
Dr. Justin Vaughn

INVOICE

12247

DATE

9/23/21





PATIENT

Jilly Fitch

SPECIES

Feline

BREED

Domestic shorthair

SEX

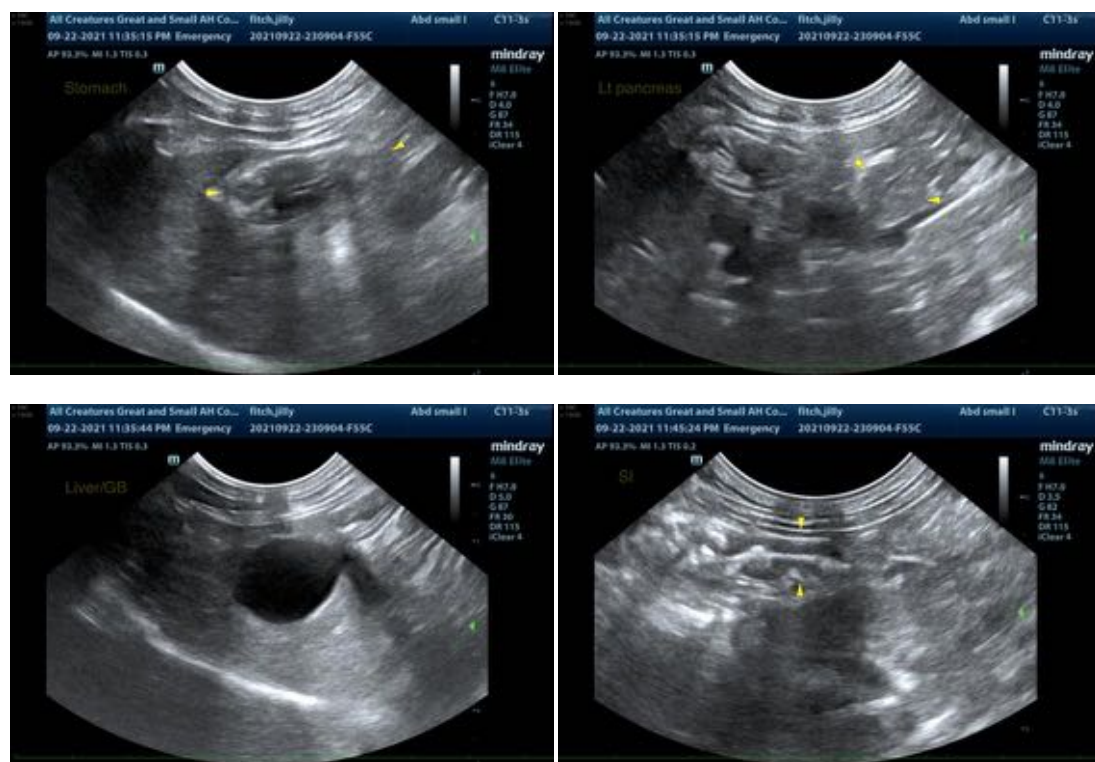
Female, spayed

AGE

3 Yrs.

WEIGHT

7.8 lbs.



INTERPRETED BY

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

The information and recommendations provided are based on the images presented by the referring veterinarian. 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, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

Andrea.nicastro@sonopath.com

IMAGING PERFORMED BY

Jessica Bailes

HOSPITAL NAME

All Creatures Great &
Small VC, Corvallis OR

REFERRING VET

Dr. Justin Vaughn

INVOICE

12247

DATE

9/23/21