



PATIENT

Rosheen Miliband

PRESENTING CLINICAL SIGNS

History: Vomiting and diarrhea, decreased appetite for about a week. on metronidazole 125mg - but vomited it up after am and pm dosing yesterday.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: CBC/chem/UA NSF

BREED

Domestic Shorthair

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is mildly distended. The wall is normal in thickness with a smooth mucosal surface. A 0.61 cm cystic calculus is observed within the lumen. The region of the trigone and the visible portion of the proximal urethra are normal.

SEX

Female Spayed

The left kidney is normal size (3.92 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. A few small nephroliths are present. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

AGE

13 years

The right kidney is normal size (3.59 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. A few nephroliths are present, the largest measures 0.46 cm in diameter. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

12.8 lbs.

Adrenal Glands

The left adrenal gland is normal size (0.61 cm length; 0.27 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

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

The right adrenal gland is normal size (0.99 cm length; 0.47 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.78 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

Diane McFadden, RVT

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. 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.

HOSPITAL NAME

Andover AH

REFERRING VET

Dr. Hummel

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 thickness with a normal layering pattern and appropriate mural detail. There is slight disruption in the normal 1:3 muscularis to mucosal ratio and mild thickening of the submucosal layer in some segments. The ileocolic junction is normal. Several centimeters of descending colon wall are severely thickened (up to 0.98 cm) with loss of the normal layering pattern. The wall tapers to a normal thickness as it extends towards the ileocolic junction. There is no evidence of obstruction.

INVOICE

11755kk

DATE

9/3/21



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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.

SPECIES

Feline

Free Abdomen

Trace free fluid is observed. Several prominent, hypoechoic lymph nodes are observed along the length of the colon, the largest measuring 1.29 cm. Surrounding mesentery is hyperechoic.

BREED

Domestic Shorthair

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The colonic wall changes are concerning for infiltrative neoplasia (i.e., lymphoma, adenocarcinoma) with a lower possibility of a severe inflammatory process. The adjacent lymphadenopathy could be consistent with infiltrative neoplasia, reactive lymphadenitis, or lymphoid hyperplasia. Regional peritonitis is also present. The small intestinal wall changes could be consistent with emerging lymphoma or inflammatory bowel disease.

SEX

Female Spayed

Secondary Findings:

- Bilateral age-related renal changes with dystrophic mineralization and non-obstructive nephroliths.
- Cystic calculus.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- A fine needle aspirate of the colonic wall can be considered (if clotting status is appropriate). A 25-gauge needle should be used and care must be taken to avoid penetration of the colonic lumen. Alternatively, endoscopic, or surgical biopsies can be considered. If surgery is pursued, urinary bladder stone removal with analysis and culture can also be considered at the time of surgery.
- Also consider a malabsorption panel.

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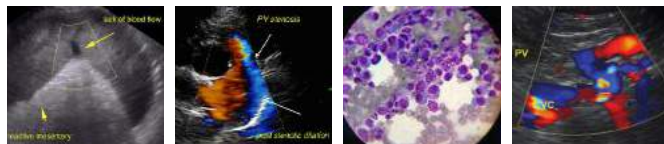
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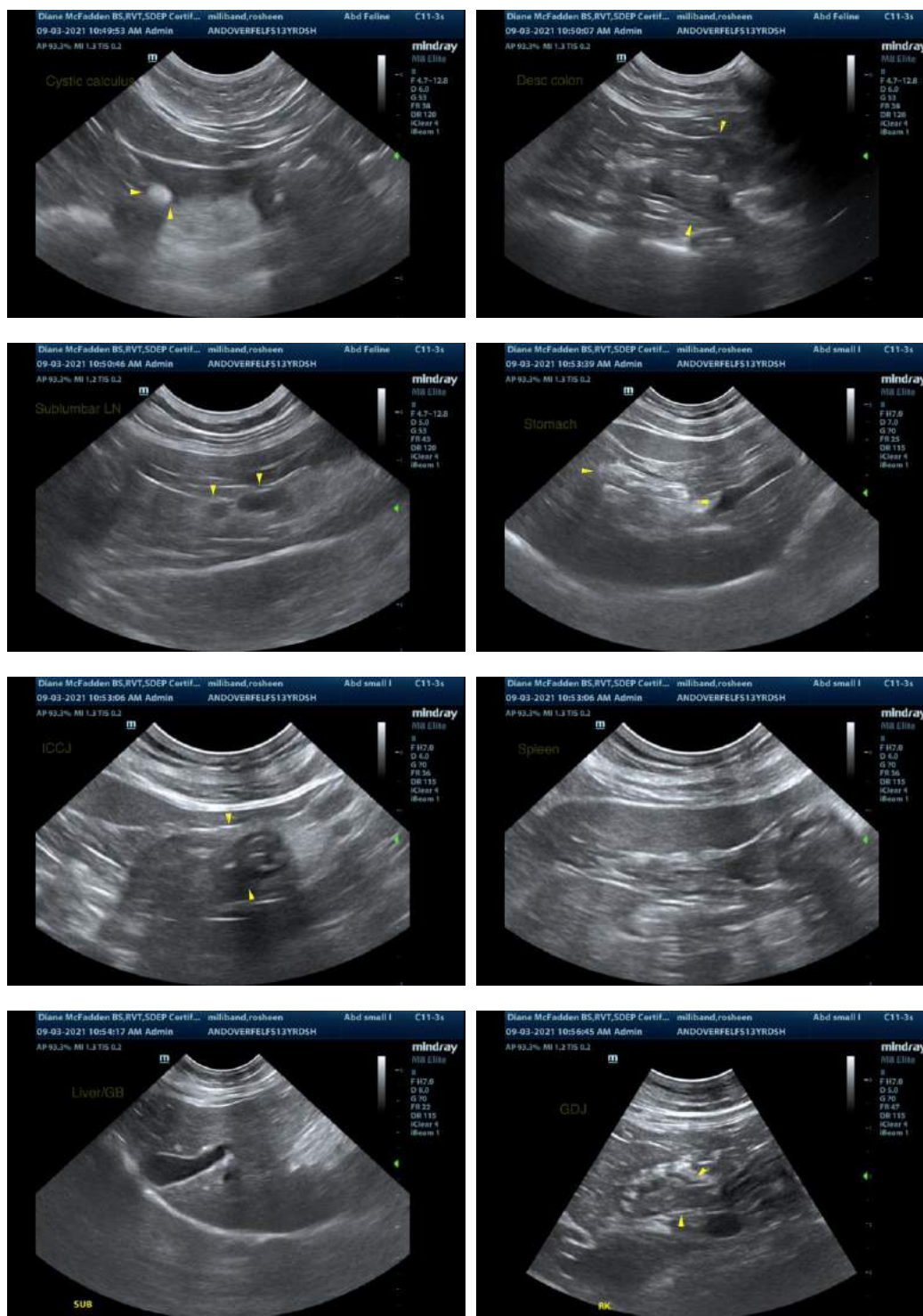
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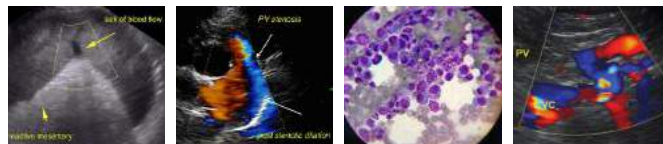
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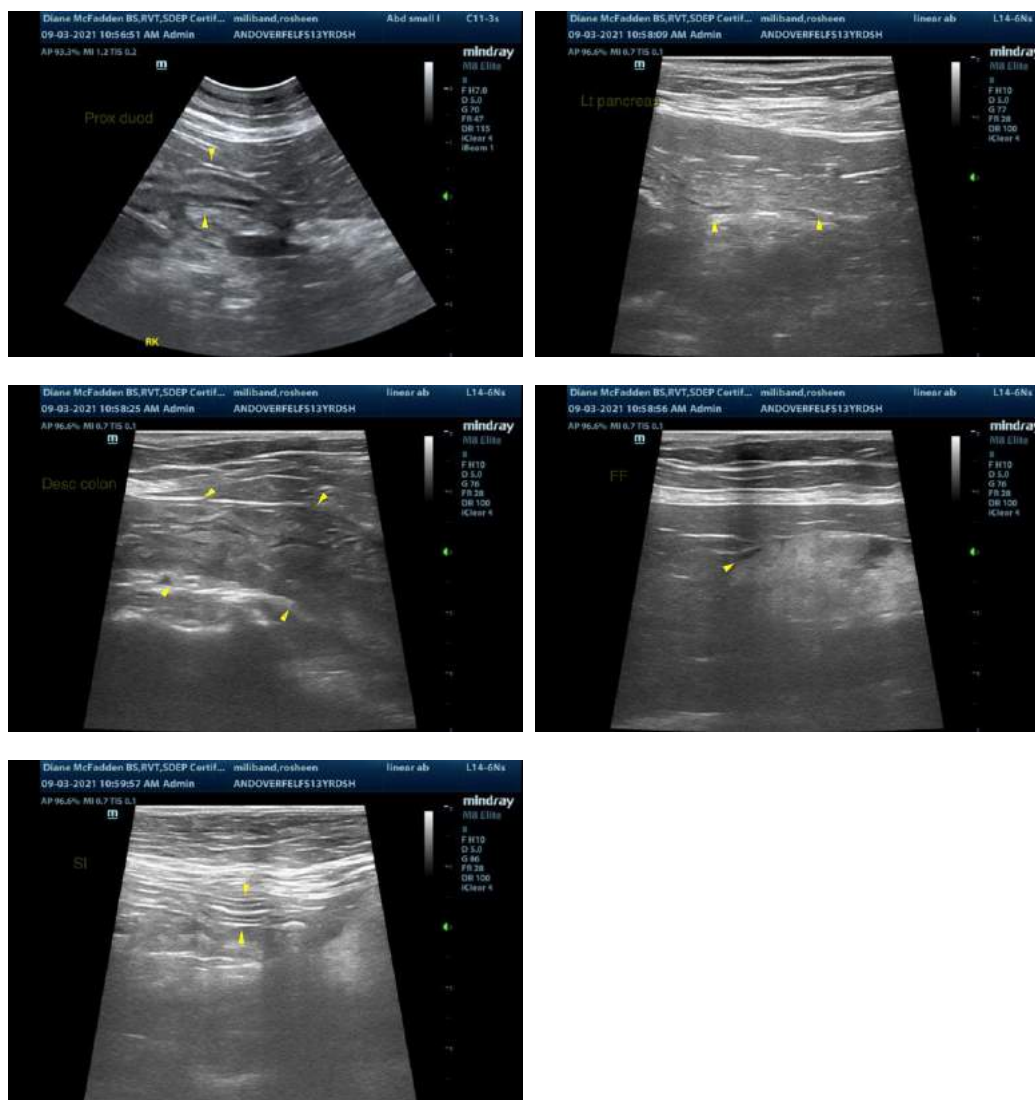
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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