



PATIENT

Isabella Sparrow Lewis

SPECIES

Feline

BREED

Manx

SEX

Female, spayed

AGE

14 Yrs.

WEIGHT

7.5 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

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

HOSPITAL NAME

Saddleback

REFERRING VET

Dr. Klein

INVOICE

13371

DATE

1/6/26

PRESENTING CLINICAL SIGNS

The patient improved after defecating a large hairball and is no longer symptomatic.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and 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 cm, are normal. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney is normal in size (3.69 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.

The right kidney is normal in size (4.06 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.

Adrenal Glands

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

The right adrenal gland is normal size (0.37 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.87 cm in width at the level of the hilus) with a normal capsular contour. Using a high frequency probe, the parenchyma is subtly mottled in appearance. A 0.24 cm hypoechoic nodule is observed at the medial aspect approximately mid-body. Splenic vasculature is normal.

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. 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. A small amount of gravity-dependent mineralized sand is observed within the lumen. The cystic and common bile ducts are normal.

Gastrointestinal

The gastric lumen is not distended. The gastric wall in the region of the fundus is normal in thickness with a normal layering pattern. In the region of the pylorus, the muscularis layer is slightly prominent. The pyloric outflow tract is patent. The wall in the region of the pylorus measures 0.36 cm. The small intestinal lumen is not dilated. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileoceocolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.



PATIENT

Isabella Sparrow Lewis

SPECIES

Feline

BREED

Manx

SEX

Female, spayed

AGE

14 Yrs.

WEIGHT

7.5 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

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

HOSPITAL NAME

Saddleback

REFERRING VET

Dr. Klein

INVOICE

13371

DATE

1/6/26

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

Lymph nodes

The abdominal lymph nodes are normal/not visible.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion.

Other

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The pyloric wall changes are similar to the previous sonogram. Given the lack of change, this may be a normal variant for this patient with a lower possibility of inflammation, hypertrophy or emerging neoplasia.

Secondary Findings:

- Mild bilateral nonspecific, age-related renal changes. Changes are similar to the previous sonogram.
- The splenic parenchymal changes are most consistent with a benign process such as lymphoid hyperplasia, extramedullary hematopoiesis, splenitis or antigenic stimulation with a lower possibility of infiltrative neoplasia (i.e., lymphoma, mast cell neoplasia). Changes are similar to the previous sonogram.
- Gallbladder sand, likely a benign incidental finding.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

At this time, there are no further recommendations. However, if the patient exhibits recurrence of clinical signs, further workup may be indicated.



PATIENT

Isabella Sparrow Lewis

SPECIES

Feline

BREED

Manx

SEX

Female, spayed

AGE

14 Yrs.

WEIGHT

7.5 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Saddleback

REFERRING VET

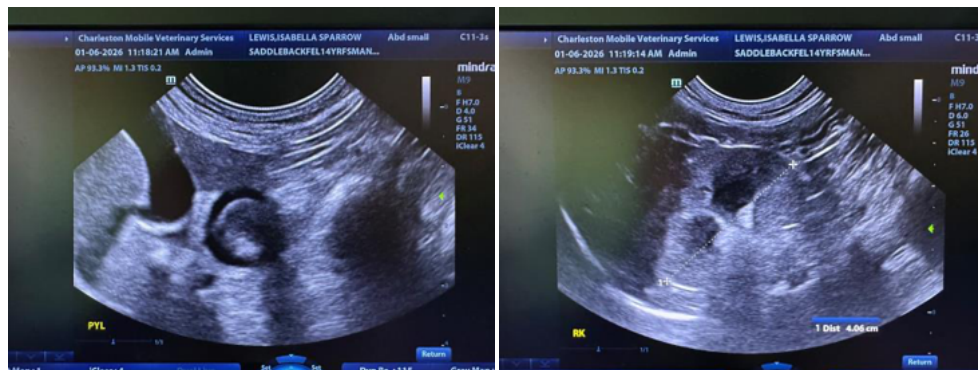
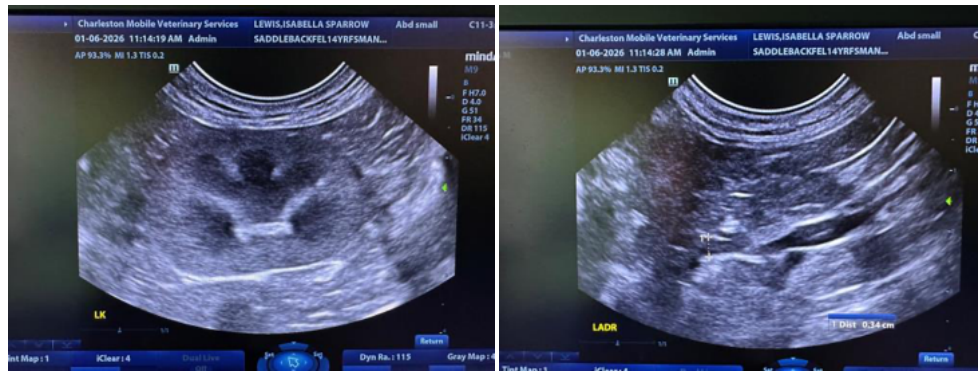
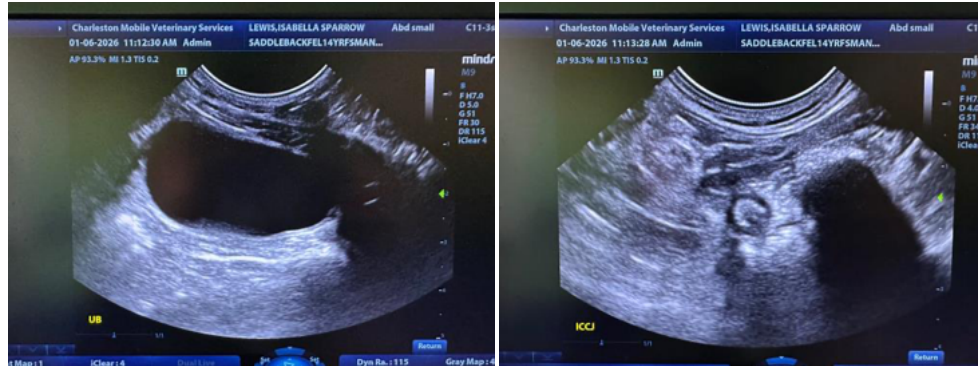
Dr. Klein

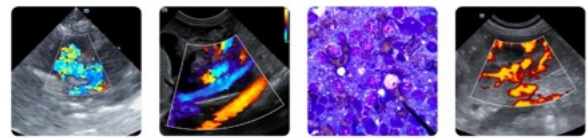
INVOICE

13371

DATE

1/6/26





PATIENT

Isabella Sparrow Lewis

SPECIES

Feline

BREED

Manx

SEX

Female, spayed

AGE

14 Yrs.

WEIGHT

7.5 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Saddleback

REFERRING VET

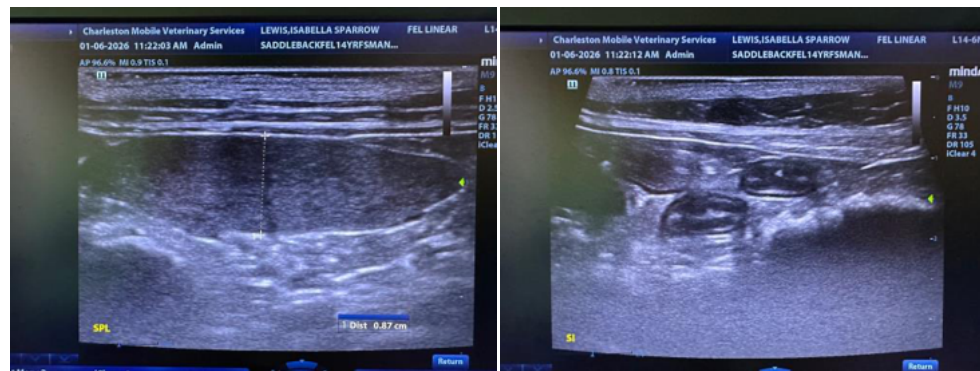
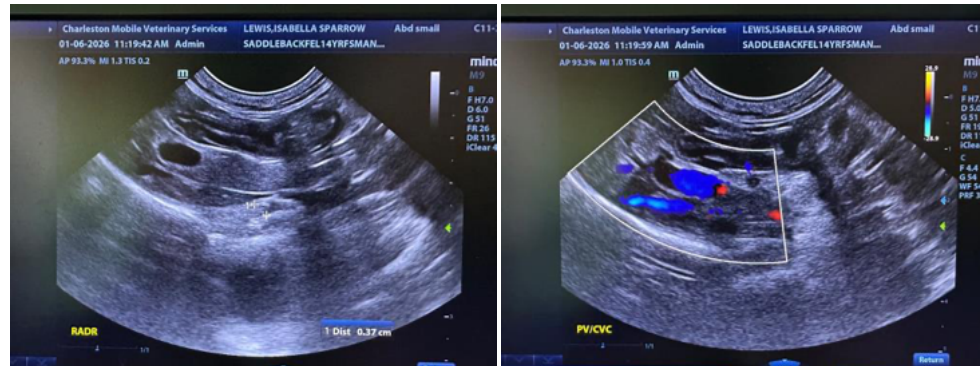
Dr. Klein

INVOICE

13371

DATE

1/6/26



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)
info@SonoPath.com