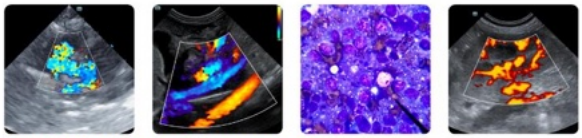


PATIENT

Nina Neelon

SPECIES

Feline

BREED

Domestic longhair

SEX

Female, spayed

AGE

5/8/21

WEIGHT

12.6 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

13347

DATE

11/18/25

PRESENTING CLINICAL SIGNS

Normal exam. On/of constipation with blood in stool. No recent bloodwork.

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. A small to moderate amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney is normal in size (3.98 cm in length) with a normal shape, architecture and smooth peripheral margins. The cortex is isoechoic to hyperechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal in size (3.82 cm in length) with a normal shape, architecture and smooth peripheral margins. The cortex is isoechoic to hyperechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with normal 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 (0.24 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.33 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.85 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.

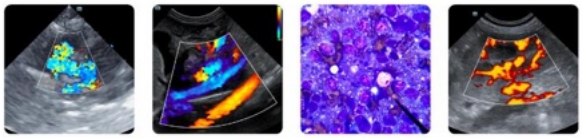
Liver

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

The gallbladder 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 (0.27 cm in width).

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 thickness is normal. There is disruption in the normal 1:3 muscularis: mucosal ratio in several segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.



PATIENT

Nina Neelon

SPECIES

Feline

BREED

Domestic longhair

SEX

Female, spayed

AGE

5/8/21

WEIGHT

12.6 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

13347

DATE

11/18/25

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

A few prominent lymph nodes are observed in the left mid to caudal abdomen, one of the nodes measuring 0.90 x 0.35 cm. In addition, a few prominent mesenteric lymph nodes are also seen adjacent to the ileocecocolic junction, one of the nodes measuring 1.13 x 0.43 cm. The mesentery surrounding all nodes is hyperechoic.

Free Abdomen

There is no obvious evidence of free fluid.

Other

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

ULTRASONOGRAPHIC FINDINGS

- The prominent abdominal lymph nodes are most consistent with reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.
- The small intestinal wall changes could be consistent with inflammatory bowel disease or may be a normal variant for this patient.

*It is unclear whether the patient's sonographic changes are associated with the clinical signs or if the inappropriate defecations are behavioral in nature. However, inflammatory bowel disease has the potential to cause inappropriate bowel movements with hematochezia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. A fecal evaluation for ova and Giardia is recommended (if not already performed) along with a minimum database including a CBC chemistry panel and urinalysis.
2. Also consider a 3-4 week limited antigen or hydrolyzed protein diet trial to assess for food allergies.
3. A GI panel including serum cobalamin, folate, TLI and PLI can also be considered.
4. Ultimately, a colonoscopy with GI biopsies may be necessary to get a definitive diagnosis.

PATIENT

Nina Neelon

SPECIES

Feline

BREED

Domestic longhair

SEX

Female, spayed

AGE

5/8/21

WEIGHT

12.6 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

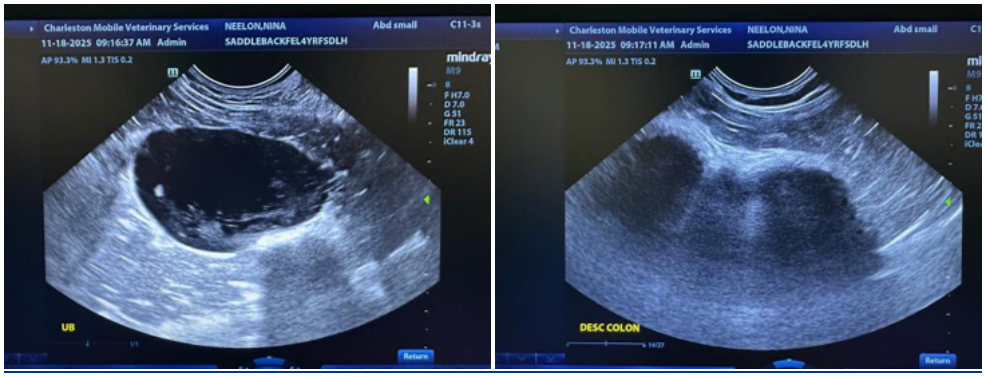
Dr. Klein

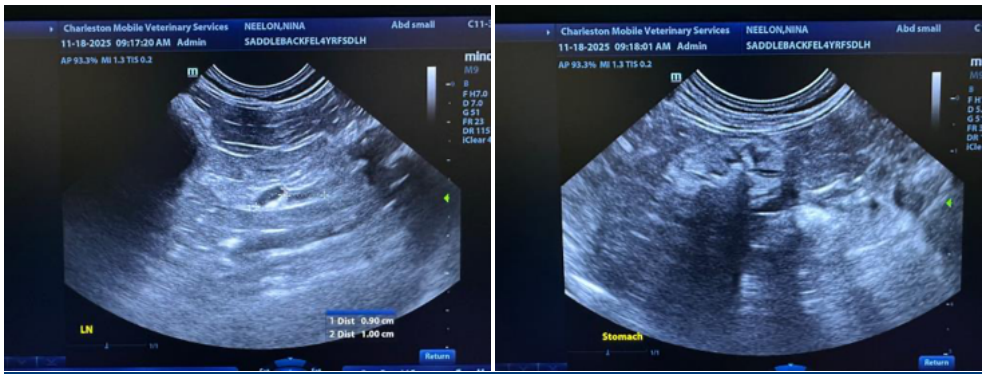
INVOICE

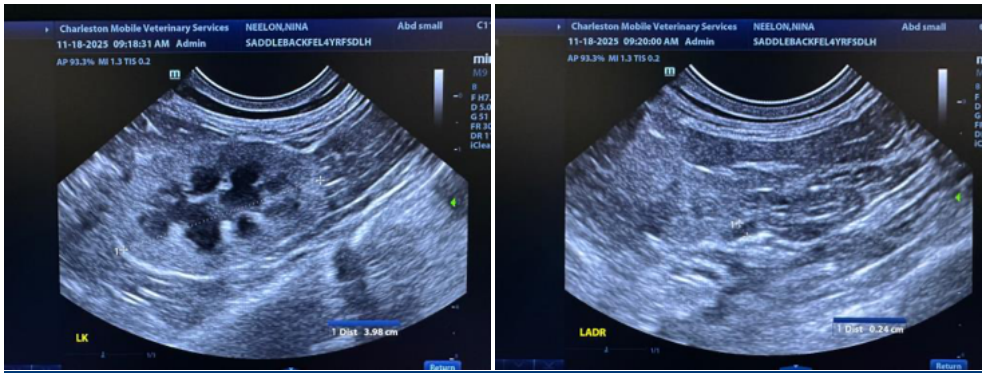
13347

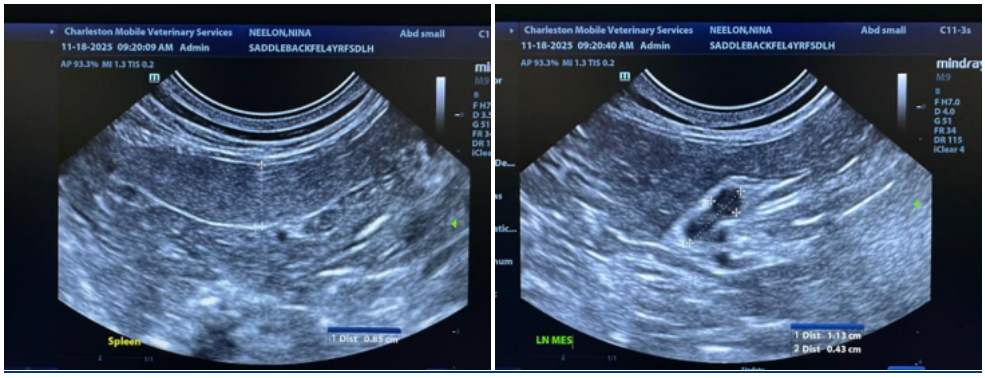
DATE

11/18/25



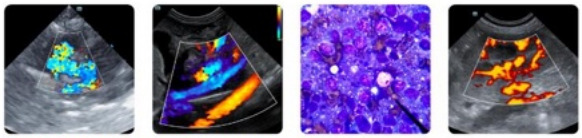






Charleston Mobile Veterinary Services
IN PARTNERSHIP WITH SONOPATH VETERINARY ULTRASOUND

SonoPath FOSTERING THE ART OF VETERINARY MEDICINE™
www.charlestonmobile.net
info@charlestonmobile.net
800.403.5408



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

PATIENT

Nina Neelon

SPECIES

Feline

BREED

Domestic longhair

SEX

Female, spayed

AGE

5/8/21

WEIGHT

12.6 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

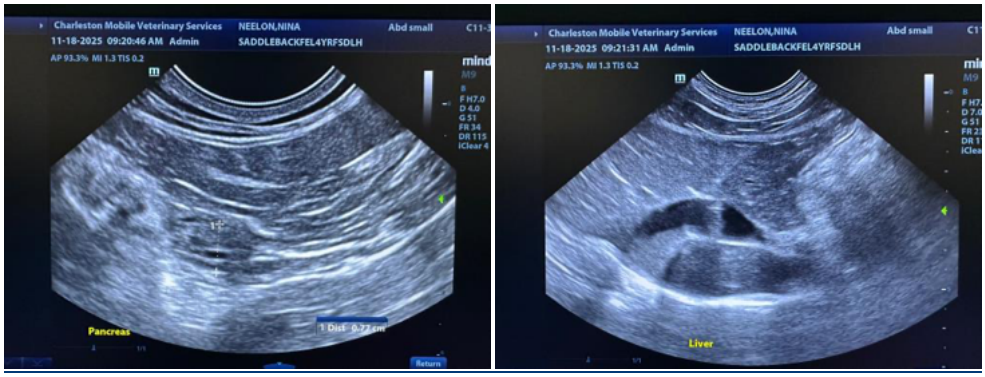
REFERRING VET

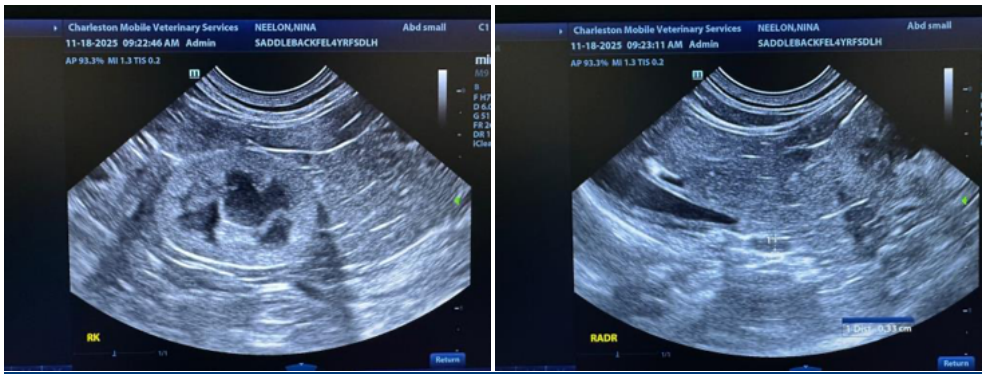
Dr. Klein

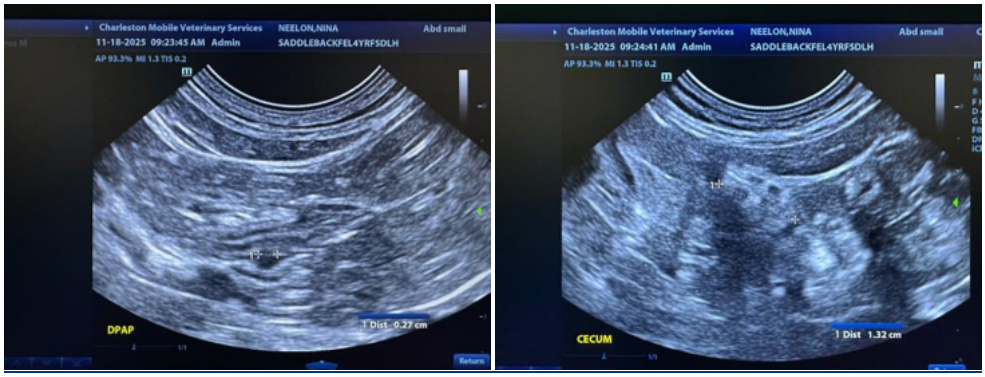
INVOICE

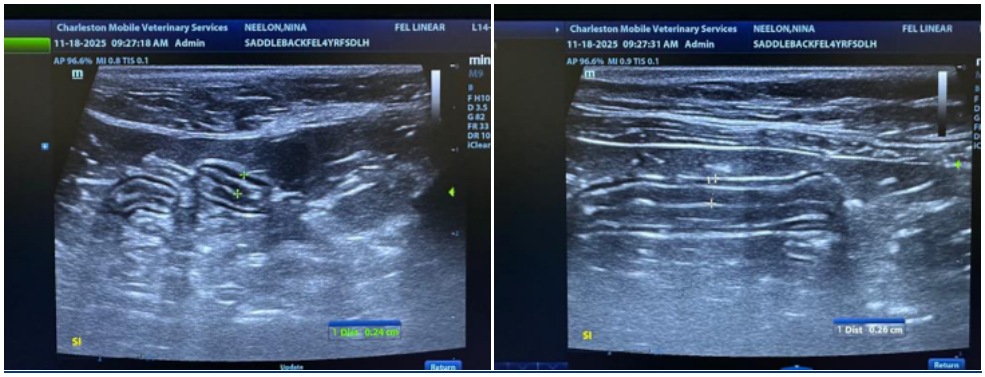
13347

DATE
11/18/25



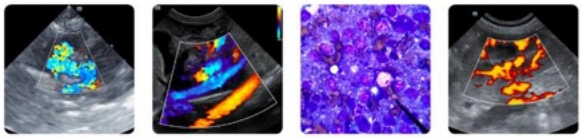






Charleston Mobile Veterinary Services
IN PARTNERSHIP WITH SONOPATH VETERINARY ULTRASOUND

SonoPath www.charlestonmobile.net
info@charlestonmobile.net 800.403.5408



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

PATIENT

Nina Neelon

SPECIES

Feline

BREED

Domestic longhair

SEX

Female, spayed

AGE

5/8/21

WEIGHT

12.6 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

13347

DATE
11/18/25

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