

**PATIENT PRESENTING CLINICAL SIGNS**

**Molly Martin**  
Molly, 9yo, FS DSH presents for lethargy, anorexia and trouble breathing. Owner reports that 3 days ago she was hiding in the closet and not wanting to come out and eat or drink. Owner brought her water and she drank quite a bit but hasn't had much since. Has not used litter box and has remained hiding in the closet. No previous issues. Indoor mostly, will go in the backyard some. UTD on vaccines but not prevention. No meds at home. Went to rDVM where they did blood work which was normal and xrays which showed pleural effusion.

**SPECIES**

Feline

**BREED**

Domestic shorthair

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

**SEX**

Female, spayed

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately 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.

**AGE**

7/6/2013

The left kidney is normal size (3.23 cm in length) with a slightly irregular shape. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. A cortical infarct is observed at the lateral aspect. There is no evidence of pyelectasia, nephroliths or hydroureter. Renal vasculature is normal.

**WEIGHT**

4.38

The right kidney is normal size (3.69 cm in length) with a slightly irregular shape. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths or hydroureter. Renal vasculature is normal.

**INTERPRETED BY**

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

*Adrenal Glands*

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

The right adrenal gland is normal in size (0.45 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

**IMAGING PERFORMED BY**

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*Spleen*

The spleen is normal in size (0.59 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**

Blue Pearl Mount  
Pleasant

*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: 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.

**REFERRING VET**

Dr. Danielle Fraser

**INVOICE**

13503

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*Gastrointestinal*



**PATIENT**

Molly Martin

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 with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

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Feline

***Pancreas***

**BREED**

Domestic shorthair

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.

***Free Abdomen***

**SEX**

Female, spayed

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 1.55 x 0.77 cm cystic lymph node is observed just caudal to the left adrenal gland in the region of the left renal artery.

***Other***

**AGE**

7/6/2013

An approximately 1.5-2 cm irregular echogenic mass effect is observed in the left hemothorax, adjacent +/- adherent to the heart. A small to moderate amount of pleural effusion is present. A small (<1.0 cm) lymph node is observed in the cranial mediastinum.

**WEIGHT**

4.38

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings:**

- Left thoracic mass. Neoplasia (i.e., adenocarcinoma, round cell tumor, other) is considered likely with a lower possibility of a benign process (i.e., inflammatory).
- The prominent lymph node in the cranial mediastinum may be a reactive node or may represent metastatic disease.
- Pleural effusion.

**Secondary Findings:**

- Bilateral, chronic age-related renal changes with a left cortical infarct.
- The cystic lymph node in the left mid-abdomen is likely reactive/benign with a lower possibility of infiltrative neoplasia.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Submission of the pleural fluid is recommended for analysis and cytology. If results are inconclusive, consider a fine needle aspirate or surgical biopsy of the thoracic mass. If surgery is pursued, consider a thoracic CT scan may be beneficial in pre-surgical planning and assessing for lymphadenopathy.
- Additional recommendations should be based on the echocardiogram report.



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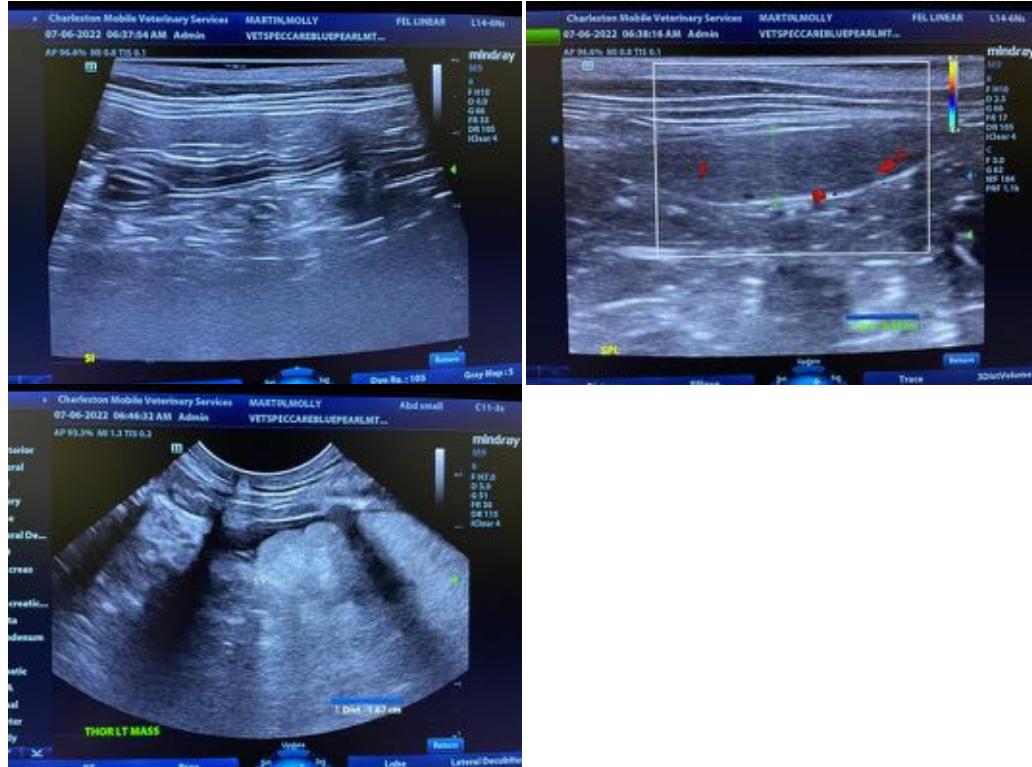
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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