


PATIENT PRESENTING CLINICAL SIGNS

Gucci Battista History: The cat is hyperthyroid and is on Methimazole.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System

Feline

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. 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.

BREED

Domestic Shorthair

The left kidney is enlarged (5.47 cm in length) with normal, curvilinear, peripheral contours. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. Hyperechoic, shadowing, diverticular foci are visualized. Moderate to severe pyelectasia is present (1.19 cm in the transverse plane). There is no evidence of infarcts or hydronephrosis. Renal vasculature is normal.

SEX

Male Neutered

The right kidney is enlarged (5.48 cm in length) with normal, curvilinear, peripheral contours. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. Hyperechoic, shadowing, diverticular foci are visualized. Moderate pyelectasia is present (0.47 cm in the longitudinal plane). There is no evidence of infarcts or hydronephrosis. Renal vasculature is normal.

AGE

11 Years

Adrenal Glands

WEIGHT

5.36 kgs.

The left adrenal gland is normal size (0.51 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The region of the right adrenal gland is evaluated. No obvious pathology is observed. Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

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

Spleen

The spleen is subjectively enlarged (1.18 cm in width at the level of the hilus) with swollen peripheral contours. The parenchyma is diffusely mottled with a "moth-eaten" appearance. Splenic vasculature appears normal with no evidence of thrombosis.

IMAGING PERFORMED BY

Crystal Hill

Liver

The liver is subjectively enlarged with slightly swollen peripheral contours. The parenchyma is hyperechoic relative to the spleen and diffusely homogeneous in appearance. A 0.94 cm hypoechoic nodule is observed on the right side. Vascular and biliary tracts are of normal volume with no evidence of congestion. 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

Nelson AH

REFERRING VET

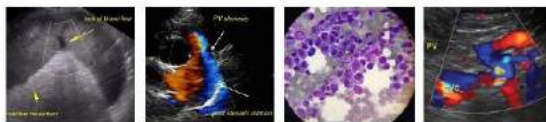
Dr. Frederick

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 mild thickening of the submucosal layer in some segments. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

INVOICE
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DATE
 8/24/21



PATIENT

Pancreas

Gucci Battista

The pancreas is visible/prominent with minimal deviation from the normal peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is borderline dilated (0.24 cm in diameter). Surrounding mesentery is mildly hyperechoic.

SPECIES

Feline

Free Abdomen

BREED

Domestic Shorthair

The mesentery throughout the abdomen is hyperechoic. Trace free fluid is observed. Several enlarged, irregular, hypoechoic lymph nodes, the largest measuring 3.0 cm in length, are observed in the cranial, mid, and caudal abdomen, some of which are mildly cystic.

SEX

Male Neutered

Primary Findings:

- The splenic changes are concerning for infiltrative neoplasia (i.e., round cell tumor) with a lower possibility of benign pathology (i.e., extramedullary hematopoiesis or lymphoid hyperplasia).
- The abdominal lymphadenopathy could be consistent with infiltrative neoplasia (i.e., round cell tumor), reactive lymphadenitis, or lymphoid hyperplasia.
- The diffuse peritonitis is likely secondary to splenic/lymph node pathology.

AGE

11 Years

Secondary Findings:

- Hepatic changes are non-specific and could be consistent with hepatic lipidosis, inflammatory/infectious disease, infiltrative neoplasia, or other hepatopathy.
- The pancreatic changes are consistent with pancreatitis (mild).
- The small intestinal wall changes are most consistent with an inflammatory process (i.e., inflammatory bowel disease) with a low possibility of emerging lymphoma.
- Bilateral, age-related renal changes with pyelectasia, more severe on the left.
- Urinary bladder debris.

WEIGHT

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Medicine*)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Three-view thoracic radiographs are recommended to assess for lymphadenopathy in the chest.
2. Fine needle aspirates of the spleen and enlarged abdominal lymph nodes are also recommended (if clotting status is appropriate). 25-gauge needles should be used.
3. Other diagnostic considerations include a urinalysis with urine culture and sensitivity and a malabsorption panel.

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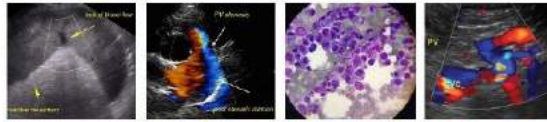
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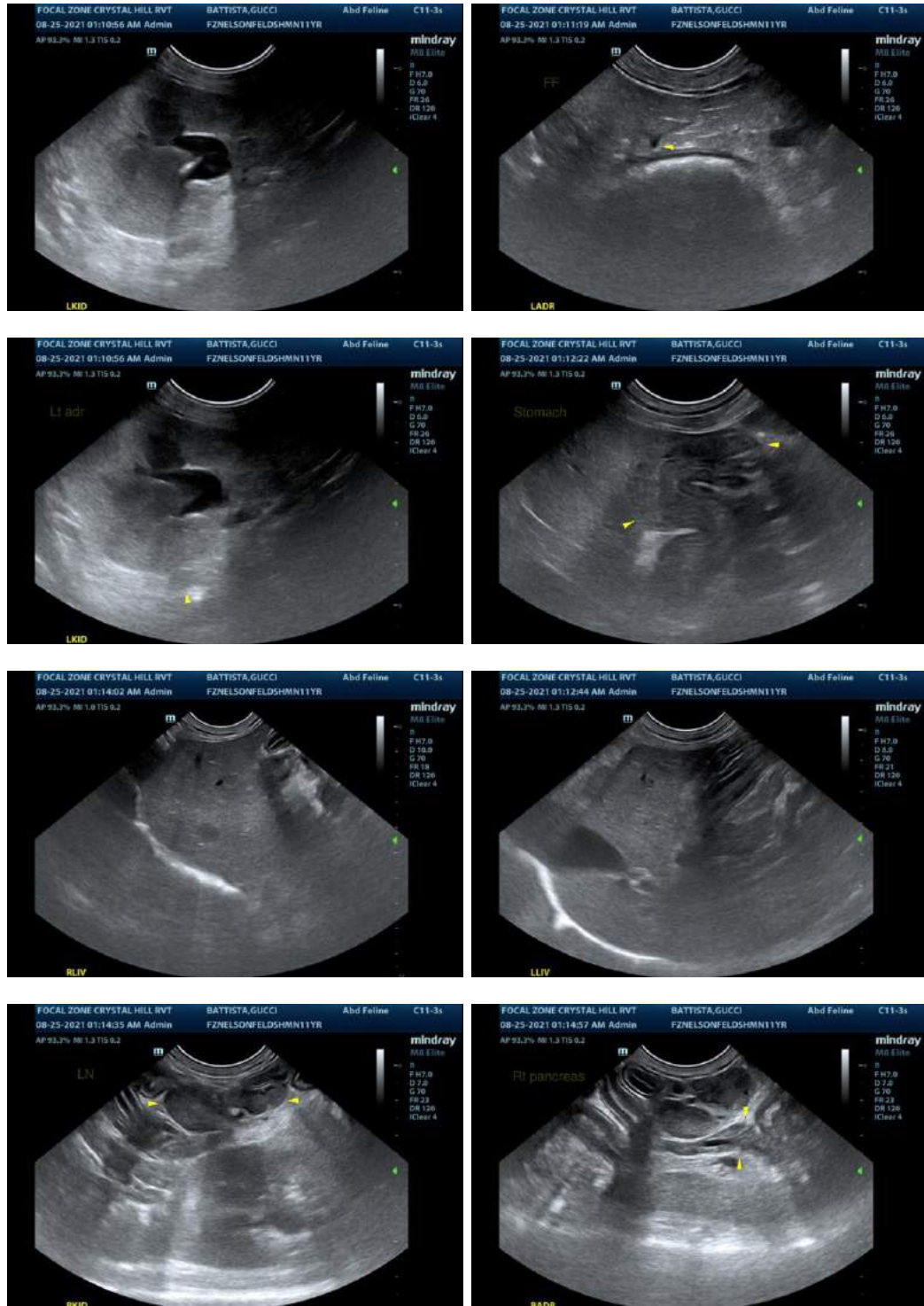
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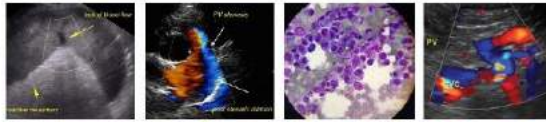
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com