



**PATIENT**

Lalo Massey

**PRESENTING CLINICAL SIGNS**

History: Lethargic, not eating, jaundice. Current meds: Steroid (1 dose O unsure what)  
Abnormal PE/Chem/CBC/UA Results: Hct 28.8, ALP 485, TBili 18.4, phos 2.7

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

**BREED**

Domestic shorthair

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

**SEX**

Female, spayed

The left kidney is normal size (3.76 cm in length); normal shape and architecture with smooth peripheral margins. 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.

**AGE**

3 Yrs.

The right kidney is normal size (3.79 cm in length); normal shape and architecture with smooth peripheral margins. 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.

**WEIGHT**

9.1 lbs.

*Adrenal Glands*

The left adrenal gland is normal in size (0.43 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.

**INTERPRETED BY**

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

*Spleen*

The spleen is normal in size (0.52 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**

Shari Reffi CVT

*Liver*

The liver is subjectively enlarged with swollen peripheral contours. The parenchyma is hyperechoic relative to the spleen and attenuating. No 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 scant amount of echogenic debris is suspended within the lumen. The cystic and common bile ducts are normal.

**HOSPITAL NAME**

Newton VH

**REFERRING VET**

Dr. Barron

*Gastrointestinal*

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. 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. There is no evidence of an obstructive pattern.

**INVOICE**

14719

**DATE**

3/8/23



## PATIENT

*Pancreas*

Lalo Massey

The left limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is slightly hypoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is not overtly dilated.

## SPECIES

Feline

*Free Abdomen*

A moderate amount of echogenic free fluid is present. The abdominal lymph nodes are normal/not visible.

## BREED

Domestic shorthair

## SEX

Female, spayed

## Primary Findings:

- Hepatic changes are non-specific and could be consistent with hepatic lipidosis, inflammatory/infectious disease, infiltrative neoplasia, hepatotoxicity, or other hepatopathy.
- Ascites.

## AGE

3 Yrs.

## Secondary Findings:

- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended.

## WEIGHT

9.1 lbs.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If the patient's abdominal fluid cytology is inconclusive, consider a fine needle aspirate of the liver, if clotting status is appropriate. A 25-gauge needle should be used.
- While awaiting test results, empirical treatment for bacterial cholangiohepatitis/hepatic lipidosis is recommended, including broad spectrum antibiotics, hepatic antioxidants, nutritional support (i.e., via temporary feeding tube) and symptomatic care.
- Three-view thoracic radiographs are recommended to assess cardiopulmonary status.

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Lalo Massey

## SPECIES

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## BREED

Domestic shorthair

## SEX

Female, spayed

## AGE

3 Yrs.

## WEIGHT

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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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