



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Lucy Cataldo	History: History of megacolon. Abnormal PE/Chem/CBC/UA Results: Glucose 205, ALT 114, CBC - WNL, FPL - normal, T4 2.4.
<b>SPECIES</b>	
Feline	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>	<b>Urinary System</b>
Domestic Shorthair	Urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.
<b>SEX</b>	
Spayed female	Left kidney is normal is size (3.33 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
<b>AGE</b>	
13 years	Right kidney is normal is size (3.87 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
<b>WEIGHT</b>	
10.45 lbs	<b>Adrenal Glands</b>
<b>INTERPRETED BY</b>	Left adrenal gland is normal in size (0.31 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
Beth Johnson, DVM DACVIM	Right adrenal gland is normal in size (0.52 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Kelly Vazquez, CVT	Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.
<b>HOSPITAL NAME</b>	
Animal Paradise Hospital	<b>Liver</b>
<b>REFERRING VET</b>	Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.
Dr. ElShafie	
<b>INVOICE</b>	Gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.
39994	
<b>DATE</b>	
10/10/22	



**PATIENT**

**Gastrointestinal**

Lucy Cataldo

The visible stomach wall is normal in thickness and layering. The stomach is moderately distended with echogenic fluid and non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. However, given the reported history of fasting, delayed gastric emptying could be considered. Soft (cloth) fluid absorbing foreign material is considered less likely but cannot be definitively ruled out. If clinical signs are consistent (vomiting, etc.), recommendations include supportive medical care, 24 hours fasting and re-image.

**SPECIES**

Feline

**BREED**

Domestic Shorthair

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

**SEX**

Spayed female

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

**AGE**

13 years

**Pancreas**

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

**WEIGHT**

10.45 lbs

**Free Abdomen**

There is no evidence of peritoneal effusion or apparent lymphadenopathy noted in these images.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**ULTRASONOGRAPHIC FINDINGS**

Moderately echogenic, fluid distended stomach, consistent with likely normal ingesta given the lack of clinical signs; however, if gastrointestinal signs are present or develop then recheck imaging of an empty/fasted stomach is recommended.

**IMAGING PERFORMED BY**

Kelly Vazquez, CVT

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Animal Paradise  
Hospital

Given the patient's reportedly, mildly increased ALT combined with the distended stomach, which could indicated some mild PU/PD or polyphagia that is not overtly clinical yet. Recommendations include testing for hypothyroidism with T4 and free T4. Given the lack of clinical concern at this time a course of hepatic nutraceuticals +/- antibiotics can be considered with monitoring of ALT for improvement versus progression with recheck imaging recommended for potential liver sampling of a FNA if the liver enzymes progress.

**REFERRING VET**

Dr. ElShafie

**INVOICE**

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**PATIENT**

Lucy Cataldo

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

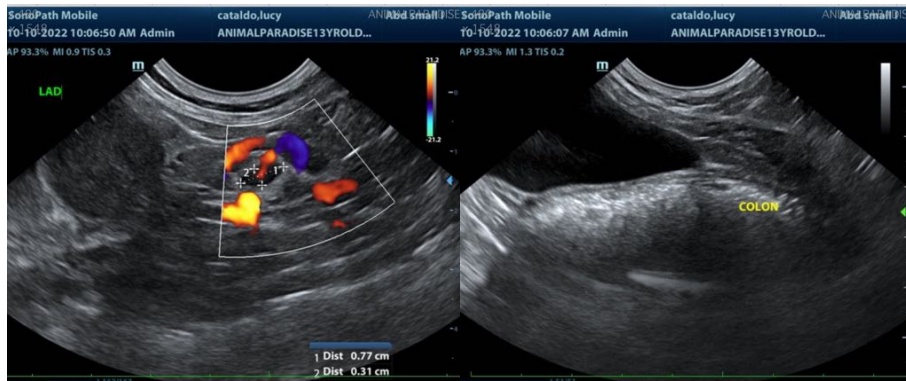
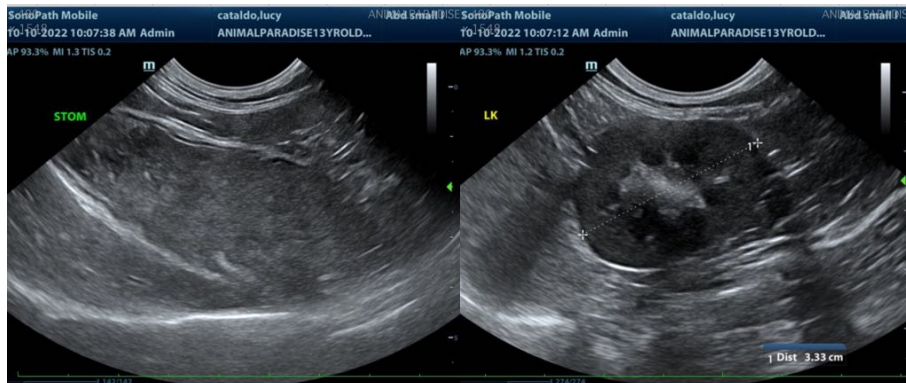
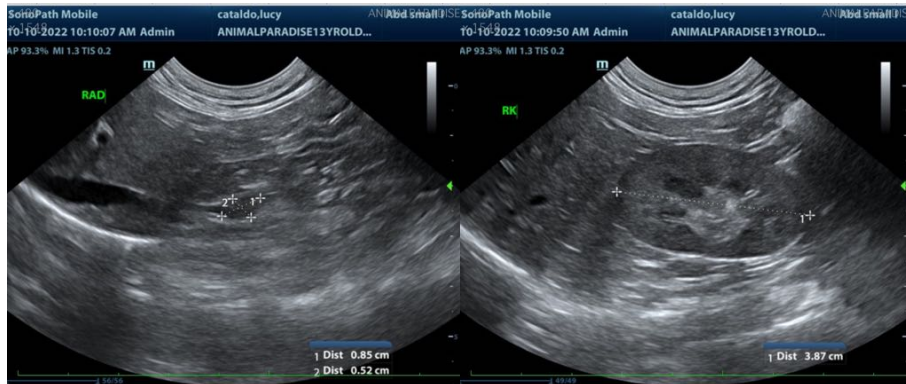
Spayed female

**AGE**

13 years

**WEIGHT**

10.45 lbs



**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

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Dr. ElShafie

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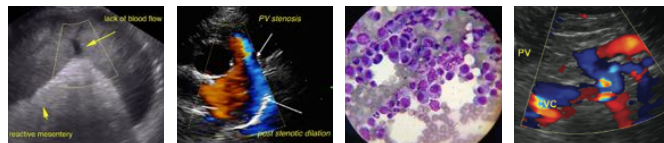
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Beth Johnson, DVM DACVIM**

Beth.Johnson@SonoPath.com



**PATIENT**

Lucy Cataldo

**SPECIES**

Feline

**BREED**

Domestic Shorthair

**SEX**

Spayed female

**AGE**

13 years

**WEIGHT**

10.45 lbs

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