



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Dale Baumgarth  
History: Previously diagnosed with pancreatitis (8/18) that appeared to have resolved with therapy. Acute onset anorexia, loose feces, and vomiting.

**SPECIES** Feline  
Physical Examination: N/A.

**BREED** DSH  
Urinalysis: N/A.

**SEX** MN  
CBC: Pending.

**AGE** 13 years  
Serum Biochemistry: Pending.

**WEIGHT** 7.7 #  
Radiographic Findings: N/A.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

Empty urinary bladder with a normal thickness and appearance of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal capsule and pelvis.

**Adrenal Glands**

Normal size, shape, position, and echogenic appearance.

**Spleen**

Normal size and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

**Liver**

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

**Gastrointestinal**

Normal appearance of the pylorus, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and no lumen distension.

**Pancreas**

Enlarged with a hypoechogenic appearance. Irregular capsule. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

**INTERPRETED BY**

Remo Lobetti, BVSc,  
MMedVet (Med), PhD,  
Dipl. ECVIM

**IMAGING PERFORMED BY**

Dr Jo Goodman

**HOSPITAL NAME**

Evendale Blue Ash Pet  
Hospital

**REFERRING VET**

Dr Jo Goodman

**INVOICE**

302568

**DATE**

9/23/21



**PATIENT** *Free Abdomen*

Dale Baumgarth No mesenteric lymphadenomegaly.  
No ascites.

**SPECIES**

Feline

**BREED**

DSH

**SEX**

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**AGE**

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**WEIGHT**

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**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Pancreatitis.

Secondary Findings:

- Urinary bladder sediment.
- Age-related renal changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The appearance of the pancreas between the previous ultrasound and the latest one is similar and typical for pancreatitis.

The appearance of the cranial abdomen between the previous ultrasound and the latest one is similar and thus most likely from the pancreatitis and not from a foreign body reaction, granulomatous enteritis or neoplasia.

The urinary bladder sediment that was evident on the previous ultrasound appears to have improved.

From the history, the most likely diagnosis would be chronic-active pancreatitis. Initial management would be fluid therapy as needed, analgesics (opioids and NSAIDs), anti-emetics, and gastric protectants (omeprazole, sucralfate). Long-term management would be feeding a low-fat intestinal diet.



**PATIENT IMAGES**

Dale Baumgarth **Pancreas**

**SPECIES 8/18**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

13 years

**WEIGHT**

7.7 #

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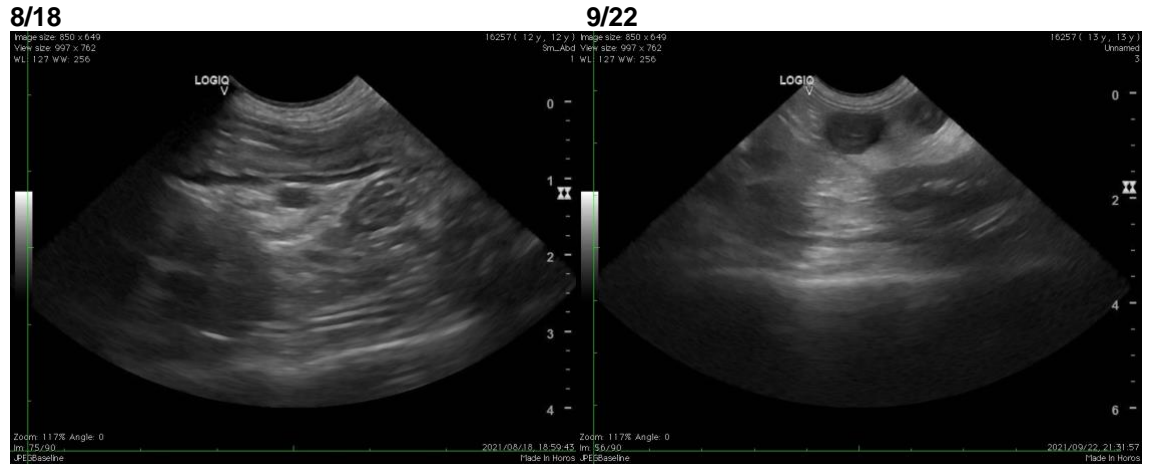
Dr Jo Goodman

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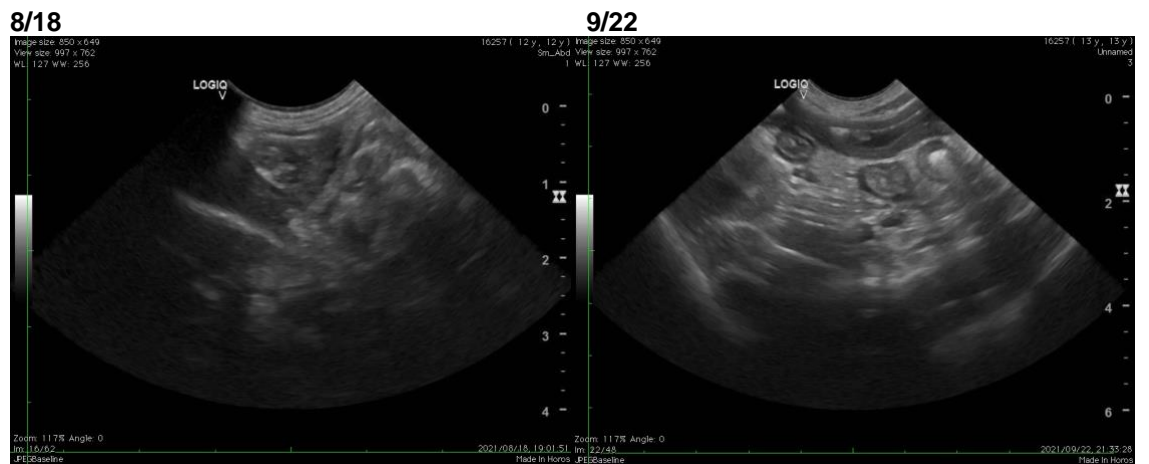
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**Cranial abdomen**



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.

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
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