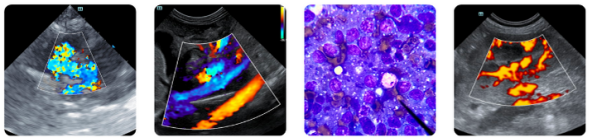


PATIENT

Binx Leitem

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

7.4 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Kimberly Morgan

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Morgan

INVOICE

69426

DATE

12/18/25

PRESENTING CLINICAL SIGNS

History: History of IBD and on topical prednisolone for it; hyperthyroid and hypertensive. Recent weight loss and decreased appetite
Abnormal PE/Chem/CBC/UA Results: BP 130, T4 2.0, Alb 4.1, USG 1.057

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder lumen is normally distended, and the bladder wall appears thin and smooth. The urine is turbid, containing floating mineral sediment. The bladder neck and proximal urethra appear normal. No uroliths are identified, and there is no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size, measuring 3.19 × 2.00 cm, with a cortical thickness of 0.26 cm in the sagittal plane. The right kidney is normal in shape and size, measuring 3.62 × 2.14 cm, with a cortical thickness of 0.25 cm in the sagittal plane. In both kidneys, the renal cortices are isoechoic relative to the liver parenchyma. The corticomedullary ratio is normal, and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

Adrenal Glands

Both adrenal glands demonstrate normal shape and echogenicity. The left adrenal gland measures 0.21 cm at the cranial pole and 0.20 cm at the caudal pole. The right adrenal gland measures 0.19 cm at the cranial pole and 0.22 cm at the caudal pole.

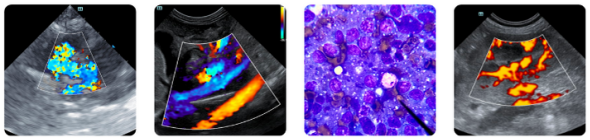
Spleen

Splenic thickness measures 0.62 cm. The splenic parenchyma demonstrates normal echogenicity and a fine, homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp margins and a regular contour. The hepatic parenchyma appears uniform and isoechoic relative to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The gallbladder wall is thin, and the contents are primarily anechoic. No dilation of the cystic duct or common bile duct is observed.



PATIENT

Binx Leitem

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

7.4 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Kimberly Morgan

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Morgan

INVOICE

69426

DATE

12/18/25

Gastrointestinal

The stomach is empty and folded, with a gas pattern. Gastric mural thickness measures approximately 2.30 mm, with preserved wall layering. The pylorus measures approximately 3.35 mm and contains fluid.

Duodenum measures 1.63 mm. Jejunum measures 2.35 mm, with mucosa 0.91 mm, submucosa 0.76 mm, and muscularis propria 0.56 mm. Ileum measures 2.20 mm, with mucosa 0.65 mm, submucosa 0.62 mm, and muscularis propria 0.71 mm. The ileocecal junction measures approximately 2.60 mm, with muscularis measuring up to 1.16 mm. Overall wall layering is preserved. No evidence of obstruction, ileus, or foreign material is identified.

The colon measures approximately 1.15 mm in the ascending segment and 0.95 mm distally, with formed fecal material in the descending segment.

Pancreas

The pancreas measures approximately 5.70–6.36 mm in thickness. The pancreatic parenchyma appears mildly hypoechoic relative to the adjacent omental fat. The pancreatic duct measures approximately 0.46–1.49 mm. No ultrasonographic evidence of active inflammation or neoplastic disease is identified.

Peritoneal Cavity

No abdominal effusion or signs of peritonitis are observed. A thin-walled cystic lesion measuring approximately 1.42 × 2.37 cm is identified caudal and lateral to the left kidney. The lesion contains anechoic fluid, and a definitive organ of origin cannot be determined.

Ileocecal lymph nodes are mildly enlarged, rounded, and hypoechoic, measuring approximately 2.80–3.47 mm in thickness. Pancreaticoduodenal lymph nodes measure approximately 2.5 mm in thickness and maintain normal shape and echogenicity. Cranial mesenteric lymph nodes are not visualized. The iliac trifurcation appears normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Mild thickening of the ileocecal junction, predominantly affecting the muscularis layer.
- Mildly enlarged, rounded, hypoechoic ileocecal lymph nodes.
- Mildly hypoechoic pancreatic parenchyma.
- Thin-walled cystic lesion caudal and lateral to the left kidney, of uncertain organ origin.

SECONDARY FINDINGS

- Turbid urine with floating mineral sediment.

PATIENT

Binx Leitem

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

7.4 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Kimberly Morgan

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Morgan

INVOICE

69426

DATE

12/18/25

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

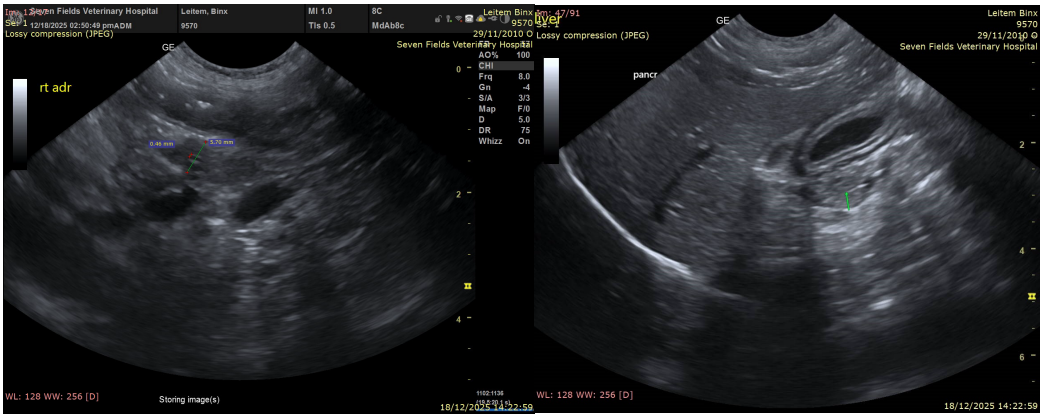
The mild thickening of the ileocecal junction, with relative prominence of the muscularis layer, together with mildly enlarged, rounded, hypoechoic ileocecal lymph nodes, is compatible with chronic enteropathy, such as inflammatory bowel disease. Given the patient's age, clinical history, and weight loss, early or low-grade alimentary lymphoma cannot be excluded, and differentiation between inflammatory and neoplastic disease cannot be made based on ultrasonography alone.

The pancreas appears mildly hypoechoic, without peripancreatic fat inflammation, which may represent chronic or low-grade pancreatic involvement, a common concurrent finding in cats with chronic enteropathy and systemic disease.

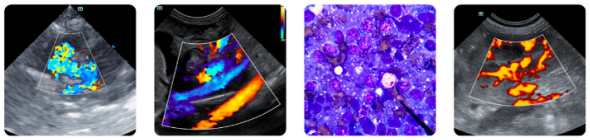
The thin-walled, anechoic cystic structure identified caudal and medial to the left kidney—based on its location and ultrasonographic appearance—is most consistent with a benign mesenteric cyst. A pancreatic origin is considered unlikely given the typical anatomic distribution of the feline pancreas.

Recommendations

- Correlation with gastrointestinal diagnostics, such as serum cobalamin/folate and consideration of intestinal sampling, is recommended to further characterize the underlying enteropathy.
- Given the patient's age and clinical progression, differentiation between inflammatory bowel disease and low-grade alimentary lymphoma should be considered.
- Given the persistence of gastrointestinal clinical signs despite corticosteroid therapy and the absence of ultrasonographic features of overt high-grade lymphoma, escalation of medical management may be considered. In cats with chronic enteropathy, adjunctive immunomodulatory therapy (chlorambucil) is commonly employed to address refractory inflammatory disease and to therapeutically cover the spectrum of low-grade alimentary lymphoma. Supportive measures, including cobalamin supplementation and strict dietary management, may further improve clinical response.
- Follow-up ultrasonography may be considered to monitor the ileocecal region, lymph nodes, pancreatic appearance, and cystic lesion for interval change.
- Urinalysis may be considered to monitor sediment and urine characteristics.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Binx Leitem

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

7.4 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Kimberly Morgan

HOSPITAL NAME

Seven Fields VH

REFERRING VET

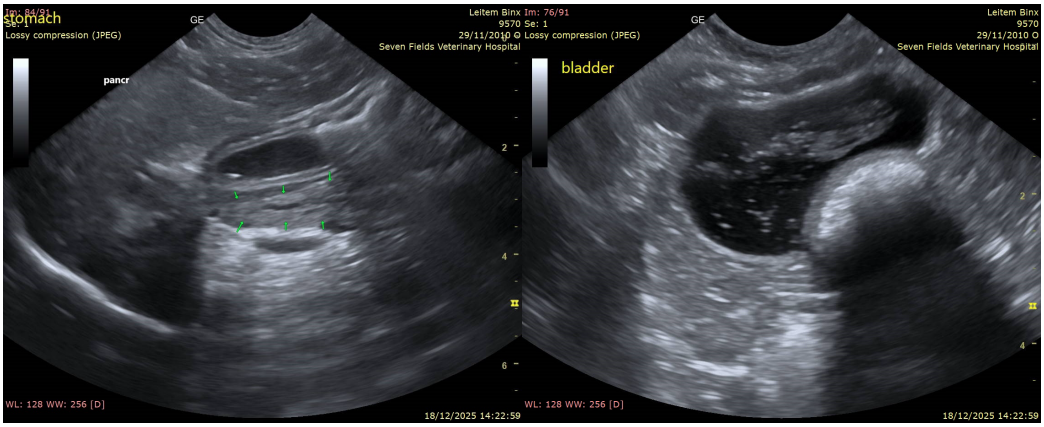
Dr. Morgan

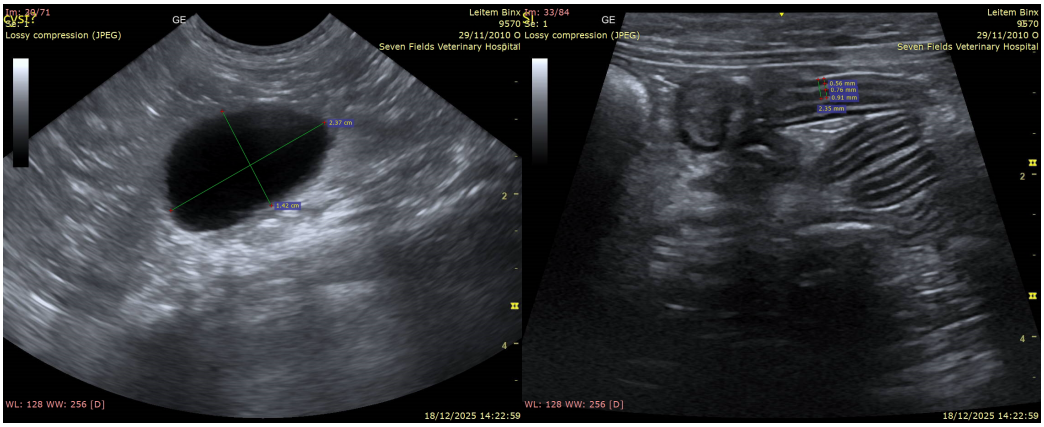
INVOICE

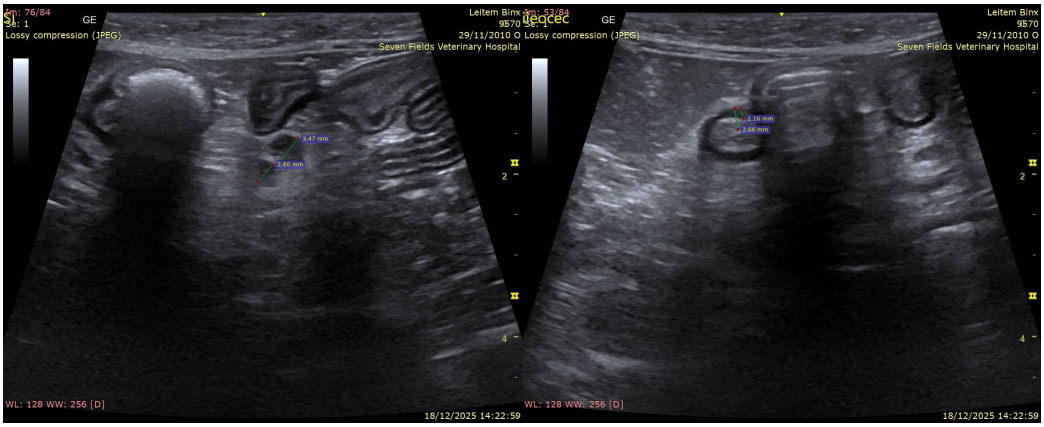
69426

DATE

12/18/25

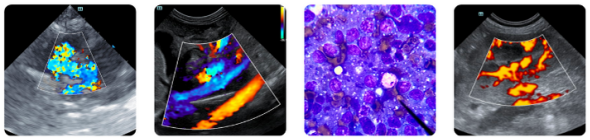






The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



PATIENT

Binx Leitem

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

7.4 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Kimberly Morgan

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Morgan

INVOICE

69426

DATE

12/18/25

can be of any further assistance please contact me.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

info@SonoPath.com