

PATIENT

Piggy C2803 Animals
in Distress

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

15 years

WEIGHT

10 lbs

INTERPRETED BY

Dr. Alicia Angosto
Guerrero

IMAGING PERFORMED BY

Pamela Bay

HOSPITAL NAME

For Cats Only VC

REFERRING VET

Dr. Bay

INVOICE

71746

DATE

2/19/26

PRESENTING CLINICAL SIGNS

Chronic diarrhea, intermittent vomiting, decreased appetite

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is mildly turbid with a few suspended echoes. Normal appearance of the bladder neck and proximal urethra. There are no calculi and no ultrasonographic evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 3.90×2.48 cm, and the thickness of the cortex is 0.42 cm in the sagittal plane. Renal length is within normal limits for an adult cat (approximately 3.0–4.5 cm). The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. Doppler color shows a normal vascular pattern.

The right kidney is normal in shape and size: 4.08×2.50 cm. Cortical thickness is not provided. Renal length is within normal limits. The cortex is isoechoic compared 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

The adrenal glands are not visualized.

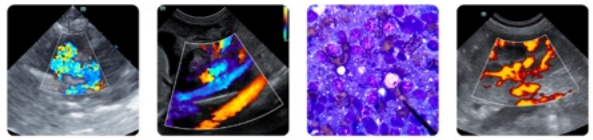
Spleen

Splenic thickness is 0.88 cm, which is within normal limits for an adult cat. The parenchyma demonstrates normal echogenicity and fine homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The liver parenchyma appears uniform and isoechoic compared to the falciform fat, with a normal echotexture. No focal lesions or hepatic lymphadenopathy are observed.

The gallbladder lumen is normally distended. The wall is thin and the contents are primarily anechoic with a very small amount of biliary sludge. The common bile duct measures 2.64–3.08 mm.



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Gastrointestinal

The stomach is empty and folded, with mural thickness measuring 1.51 mm and preserved wall layering. This is within normal limits for a non-distended feline stomach. The pylorus measures 3.95 mm. Duodenum: 1.86 mm (within normal limits; ≤ 2.7 mm).

Jejunum: 2.61 mm total thickness. Mucosa: 1.44 mm. Submucosa: 0.62 mm. Muscularis propria: 0.48 mm. The muscularis-to-mucosa ratio is approximately 0.33, which is within normal limits (< 0.5).

Ileum: 2.74 mm total thickness. Mucosa: 0.53 mm. Submucosa: 0.75 mm. Muscularis propria: 0.93 mm. Wall layering is preserved. The muscularis-to-mucosa ratio is approximately 1.75, which is markedly increased. There is diffuse thickening of the muscularis layer throughout the ileum.

The ileocecal junction measures 3.96 mm, with muscularis thickness of 1.60 mm, indicating muscularis-predominant thickening.

Colon: 1.08 mm, with scant luminal content. Wall layering preserved.

Pancreas

The evaluated pancreatic regions do not show evidence of overt inflammation.

Peritoneal Cavity

No abdominal effusion or peritonitis is observed. Cranial mesenteric and ileocecal lymph nodes are not visualized; the surrounding mesentery appears unremarkable. The iliac trifurcation is normal.

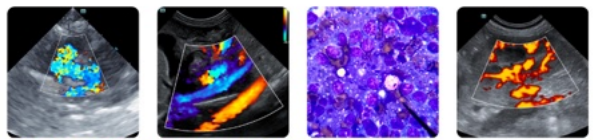
ULTRASONOGRAPHIC FINDINGS

- Diffuse ileal muscularis thickening with markedly increased muscularis-to-mucosa ratio (~1.75).
- Muscularis-predominant thickening at the ileocecal junction.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most significant finding is diffuse muscularis-predominant thickening of the ileum and ileocecal junction, with a markedly increased muscularis-to-mucosa ratio (~1.75 in the ileum). In cats, a ratio greater than 0.5 is abnormal and is most commonly associated with chronic inflammatory enteropathy or small cell lymphoma. Total ileal wall thickness (2.74 mm) is at the upper limit of normal to mildly increased (reference ≤ 2.7 mm), but the disproportionate muscularis thickening is clearly abnormal and clinically meaningful. The jejunum and duodenum remain within normal limits, indicating segmental ileal involvement rather than diffuse small intestinal disease.

No significant mesenteric lymphadenopathy or abdominal effusion is identified.



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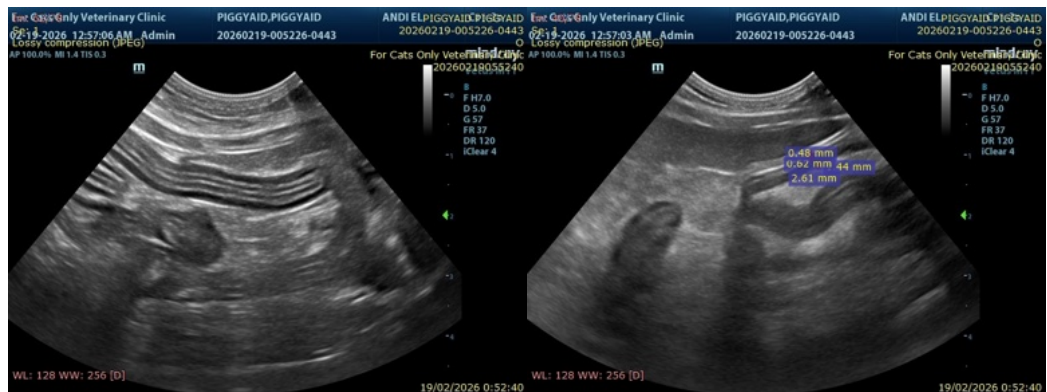
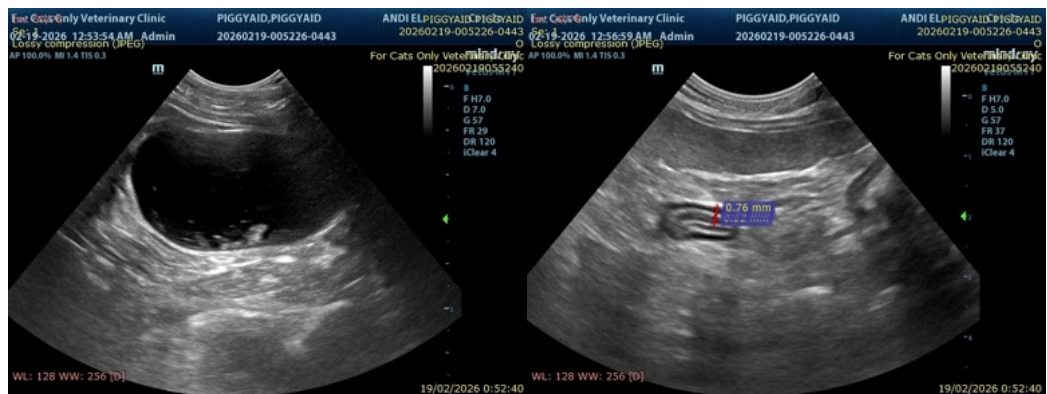
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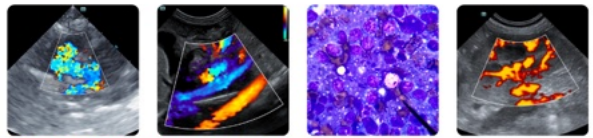
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Overall, the imaging findings are most consistent with chronic ileal enteropathy, with primary differentials including small cell lymphoma and severe inflammatory bowel disease. Ultrasound cannot reliably differentiate between these entities in this pattern.

Recommendations

- Serum cobalamin measurement is recommended given ileal involvement; supplementation should be initiated if low or borderline.
- Consider Spec fPL testing if clinical signs suggest possible concurrent pancreatic involvement.
- Intestinal biopsy (endoscopic or full-thickness) should be considered to differentiate inflammatory bowel disease from small cell lymphoma.
- If biopsy is declined, therapeutic management should be determined at the discretion of the attending clinician. A strict elimination or hydrolyzed diet trial and/or immunosuppressive therapy (such as corticosteroids) may be considered based on clinical judgment, patient stability, and response to conservative measures.





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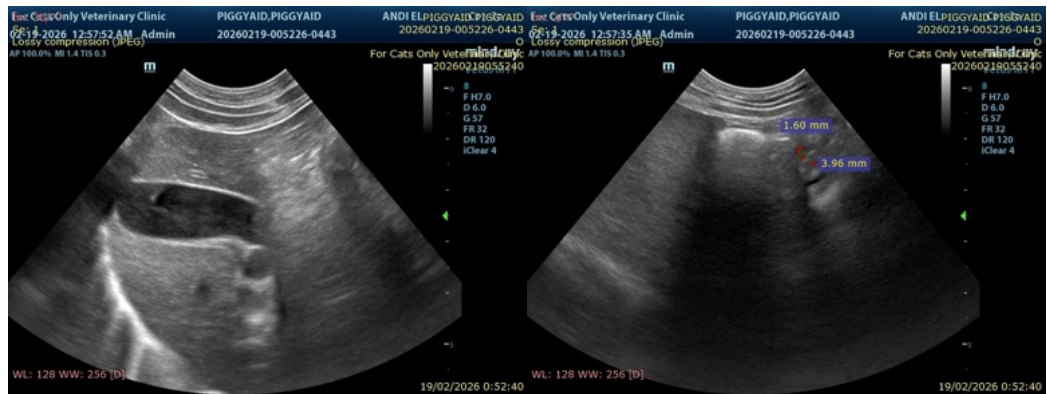
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

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