



PATIENT

Penelope Heckman

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

13 Years

WEIGHT

8.8 lbs

INTERPRETED BY

Karen Ebersole, DVM,
DABVP (Canine and
Feline)

IMAGING PERFORMED BY

Yvonna Aranda

HOSPITAL NAME

Edgewood Animal
Clinic

REFERRING VET

Dr. Kimball

INVOICE

71828

DATE

11/14/25

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: 1.6# weight loss over past 6 months Recent bout of vomiting and diarrhea
Controlled hyperthyroidism.

Abnormal PE/Chem/CBC/UA Results: ABNORMAL Labwork Values Lab work done at emergency clinic.
No significant abnormalities Current Medications 3.75mg methimazole q24h

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder was normal in size and shape. The bladder wall was normal in thickness for the volume of urine present. The bladder contents were anechoic with echogenic sediment, without visible discrete urolith formation. There was no visible inflammation in the bladder or urethra.

The urethra was visualized to a distance of 43.0 cm beyond the cystourethral junction.

The iliac trifurcation was normal in structure and volume. Normal appearing medial iliac lymph nodes. No evidence of thrombus formation on doppler exam.

Both kidneys were normal in size with a mildly irregular capsule contour. There was a mild to moderate increase in cortical echogenicity. The corticomedullary junction was mildly indistinct. There was no pelvic dilation. The left kidney measured 3.4 cm in length. The right kidney measured 3.9 cm in length.

Adrenal Glands

Both adrenal glands were normal in size and shape. The parenchyma was homogeneous. Left measures 0.26 cm. Right measures 0.37 cm.

Spleen

The spleen was mildly increased in size, potentially due to sedation, with a mildly rounded capsule contour. The spleen measured 0.80 cm in width at the hilus. The parenchyma was diffusely homogeneous and mildly hypoechoic.

Liver

The liver was normal in size and shape, with a smooth capsule contour. The hepatic parenchyma displayed normal echotexture and portal markings. The hepatic vasculature was normal in volume and structure.

The gallbladder in this cat was bi-lobed, which is a normal variant in cats. Both gallbladders were normal in size and shape, with anechoic contents. The cystic duct and common bile duct were normal in size with no evidence of inflammation or obstruction.

Gastrointestinal

The stomach was normal in size and shape, with a smooth serosal contour. The stomach wall was normal in thickness and layering. The small intestine displayed normal curvilinear patterns throughout. Subjectively normal wall thickness and layering was maintained. Duodenum wall measures 0.31 cm. Jejunum wall measures 0.24 cm. The visible colon wall was normal in thickness and layering.



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Pancreas

The pancreas was normal in size with a mildly irregular capsule contour. The parenchyma was isoechoic to heterogeneous compared to the mesentery. No signs of active inflammation or neoplasia.

Free Abdomen

Focally enlarged mesenteric lymph nodes were present. The lymph nodes were homogenous, mildly hypoechoic with a smooth capsule contour. A normal width: length ratio was maintained (<0.5). There was mild adjacent mesenteric inflammation. An example of a jejunal lymph node measured 2.3 cm x 0.75 cm.

ULTRASONOGRAPHIC FINDINGS

- Heterogeneous pancreas – suspect low-grade chronic pancreatitis versus aging changes.
- Mesenteric lymphadenopathy – most consistent with reactive pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This sonographic presentation is most consistent with Triaditis. However, given the age of the cat and reported weight loss, more significant disease such as low-grade GI lymphoma is possible, even with a largely normal sonographic appearance of the small intestines. Full thickness or endoscopic biopsies would be needed for diagnosis. A GI panel (if not already done) is recommended.

Treatment options include any or all of the following:

- GI support as needed (Cerenia, Miratzapine, etc)
- Hydrolyzed diet trial
- Cobalamin supplementation (0.25 mg/250mcg SQ q 7 days x 4 weeks)
- Prednisolone 1-2 mg/kg per day or Budesonide 0.5 - 0.75 mg/cat PO SID (not per mg/kg)
- High potency probiotics (Visbiome or Fortiflora SA).





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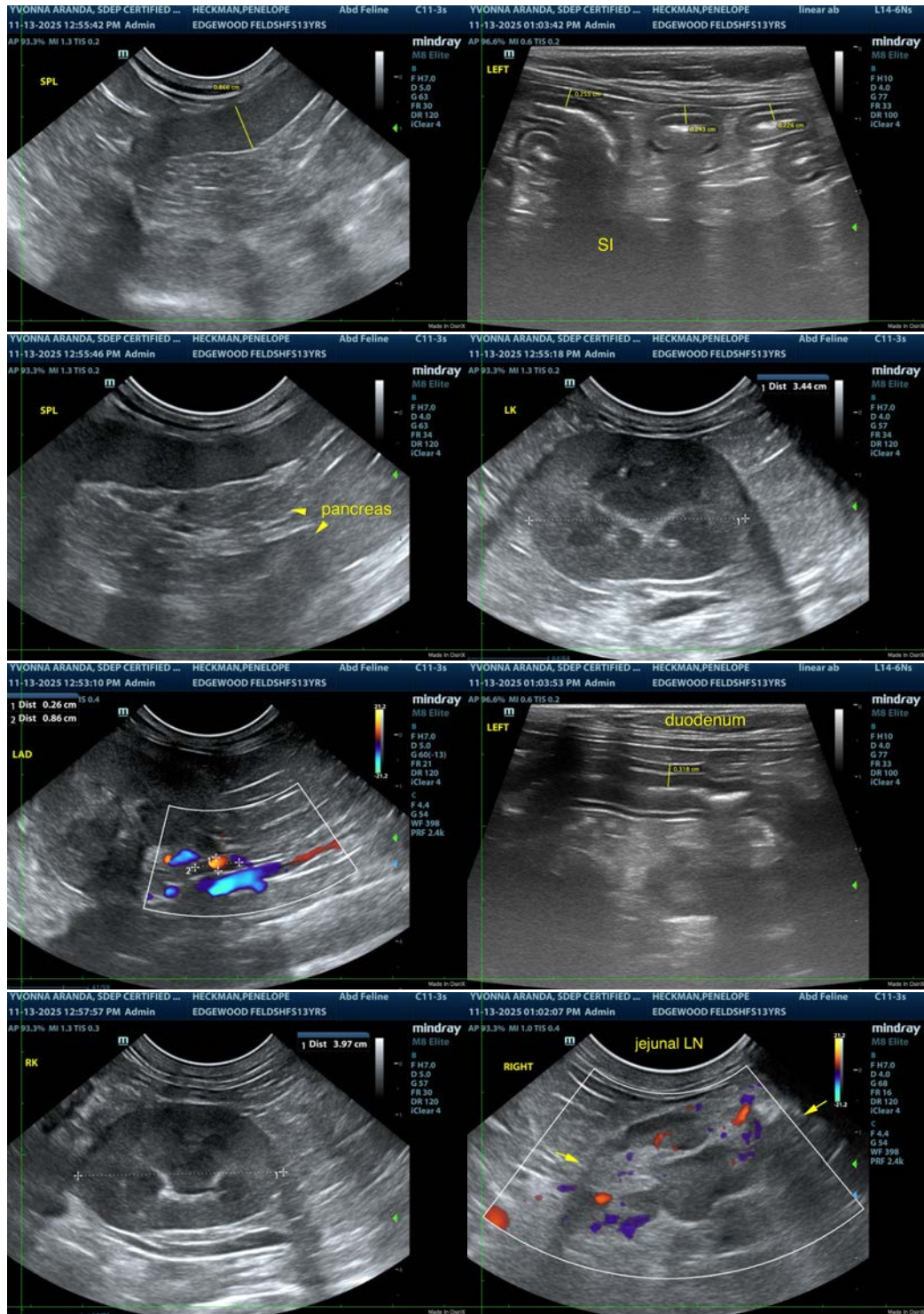
Dr. Kimball

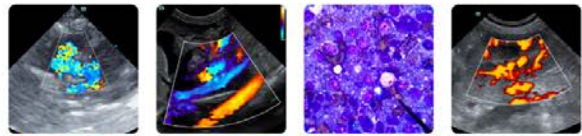
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Karen Ebersole, DVM, DABVP (Canine and Feline practice)
info@SonoPath.com