



PATIENT

Smokie Laplante

SPECIES

Feline

BREED

DSH x Siamese

SEX

Spayed Female

AGE

14 Years

WEIGHT

3.95 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Carlie Koltek, RVT

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

Dr. Valencia

INVOICE

72499

DATE

1/27/26

PRESENTING CLINICAL SIGNS

Smokie initially presented to clinic on Jan 6th for vomiting, significant wt loss over 6-7 mos, poor appetite, lethargy, discomfort with touching abdomen, and blood in stool.

Re-presented on Jan 21st with no resolution of symptoms following symptomatic treatment.

New Rx: Mirtazapine 15mg/mL 0.13mL PO EOD New Rx: Maropitant 10mg/mL 0.4mL PO SID Rx: Discontinue lactulose. Restoralax, 1/4 teaspoon

Abnormal PE/Chem/CBC/UA Results: PE: QAR, adequate hydration, tachycardia (HR 218bpm) with auscultated murmur and no pulse deficit, tense and painful abdomen on palpation with no masses or organomegaly noted, PLN WNL. CBC/CHEM/T4/QPLI - WNL *Three-view radiographs of the abdomen and thorax - Findings were not conclusive for an obstruction. *Barium series normal & R/O GIT FB

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The left kidney has a normal shape and size (3.45 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (3.44 cm) with mild pyelectasia at 0.28 cm. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.43 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.41 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

Spleen

The spleen is subjectively normal in size (0.75 cm), echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. There is a poorly defined hyperechoic nodule visualized near the hilus measuring 0.30 cm x 0.30 cm, most consistent with a benign myelolipoma.



PATIENT

Smokie Laplante

SPECIES

Feline

BREED

DSH x Siamese

SEX

Spayed Female

AGE

14 Years

WEIGHT

3.95 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Carlie Kolttek, RVT

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

Dr. Valencia

INVOICE

72499

DATE

1/27/26

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and likely incidental at this time. The cystic and common bile ducts are normal/not visible.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.36cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Duodenum wall measures 0.25 cm. Jejunum wall measures 0.22 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The pancreas is large and hypoechoic to surrounding mesentery. There are occasional hypoechoic nodules visualized associated with the pancreas, suggestive of possible lymphoid nodules. An example measures 0.38 cm in diameter. There is evidence of regional mesenteric inflammation. Consistent with mild to moderate pancreatitis.

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is no evidence of a significant lymphadenopathy. There are prominent lymph nodes near the ileocecal junction measuring 0.28 cm x 0.30 cm and 0.43 cm x 0.26 cm. The omentum is generally normal in echogenicity but slightly hyperechoic around the pancreas.

ULTRASONOGRAPHIC FINDINGS

- Pancreatic changes most consistent with chronic active pancreatitis and lymphoid hyperplasia. An early neoplastic process cannot be ruled out but seems less likely.
- Small, hyperechoic nodule visualized associated with the spleen. This has a somewhat benign appearance at this time, possibly most consistent with a benign myelolipoma. Recommend continued monitoring.
- Mild unilateral pyelectasia – Correlate with urinalysis +/- culture results. A focal obstruction is not visualized but continued monitoring is warranted.



PATIENT

Smokie Laplante

SPECIES

Feline

BREED

DSH x Siamese

SEX

Spayed Female

AGE

14 Years

WEIGHT

3.95 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Carlie Koltek, RVT

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

Dr. Valencia

INVOICE

72499

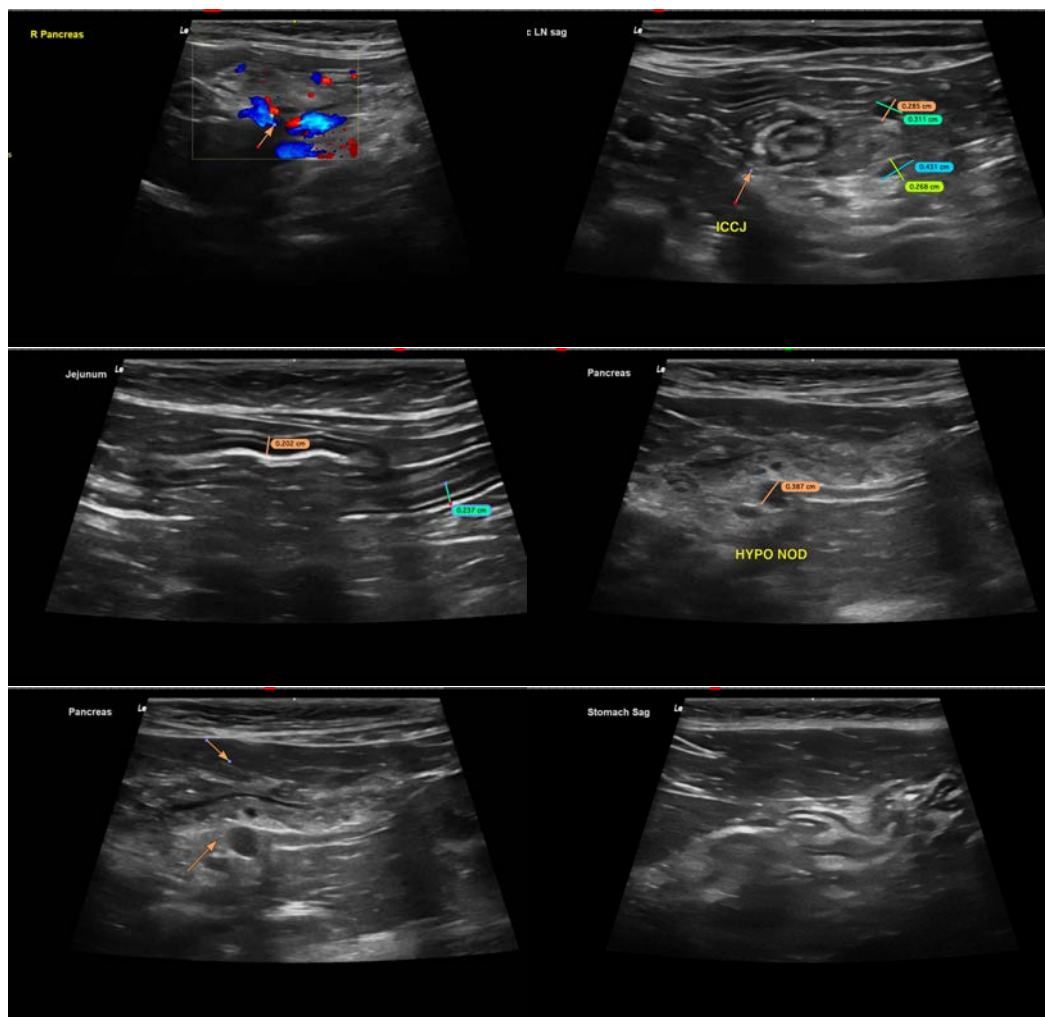
DATE

1/27/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No focal lesions are visualized associated with the GI tract. Subjectively some sections of small intestine appear somewhat “ropey”, but not definitive lesions are observed. Additionally, both limbs of the pancreas appear significantly mottled with some mild surrounding mesentery and occasional hypoechoic nodules. These changes are likely consistent with lymphoid hyperplasia and chronic active pancreatitis. Correlate with an active PLI level. Consider a GI panel to Texas A&M for a qualitative fPLI, TLI, cobalamin and folate, looking for additional evidence of possible concurrent gastrointestinal disease, as not all causes for vomiting and inappetence can be diagnosed by ultrasound alone.

Recommend empirical treatment for pancreatitis. If a concurrent enteropathy is suggested, you could consider an ultra-low-fat hydrolyzed protein prescription diet (Royal Canin). Additionally, probiotic therapy could be considered (I believe this may already be started). If symptoms are persistent, eventually biopsies of the GI tract may be warranted. Consider repeat imaging prior to this to look for possible progression of today’s lesions or the development of new lesions.





PATIENT

Smokie Laplante

SPECIES

Feline

BREED

DSH x Siamese

SEX

Spayed Female

AGE

14 Years

WEIGHT

3.95 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Carlie Kolttek, RVT

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

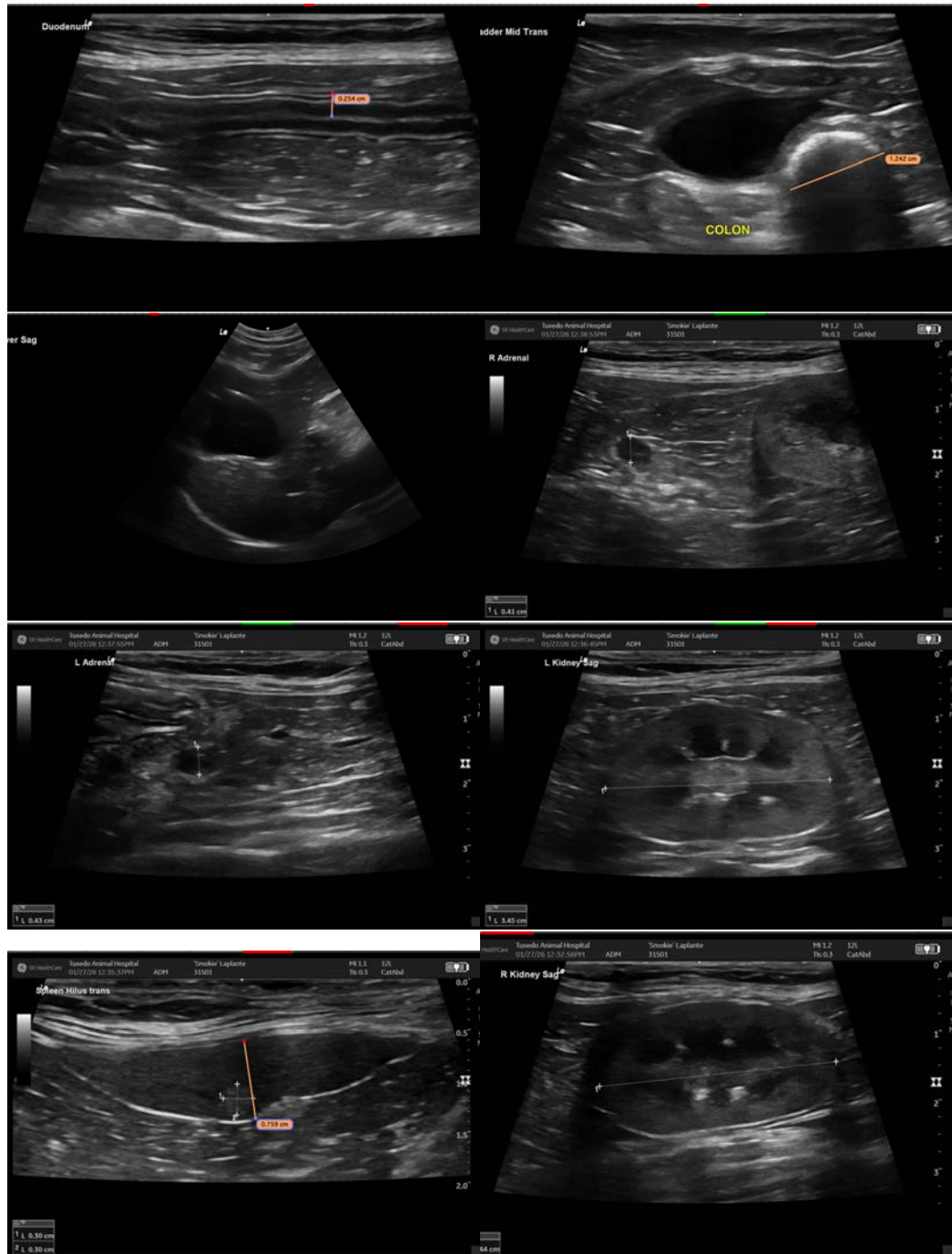
Dr. Valencia

INVOICE

72499

DATE

1/27/26





PATIENT

Smokie Laplante

SPECIES

Feline

BREED

DSH x Siamese

SEX

Spayed Female

AGE

14 Years

WEIGHT

3.95 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Carlie Koltek, RVT

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

Dr. Valencia

INVOICE

72499

DATE

1/27/26

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

info@sonopath.com