

PATIENT

Peggy Starke

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

3Y

WEIGHT

2.3kg

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

73241

DATE

1-8-26

PRESENTING CLINICAL SIGNS

Pet presented for lethargy, vomiting and diarrhea. Radiograph findings: scant peritoneal effusion around liver and cranial GI tract.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Plain and post contrast studies of the abdomen are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Mild peritoneal effusion is present predominantly in the cranial abdomen and portal hilus region.

A small amount of mineral attenuating material is seen on bilateral renal papillae without evidence of obstruction or pyelectasia.

The adrenal glands are within normal limits for size, shape and organ architecture.

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The intra- and extra-hepatic bile ducts are markedly dilated. The gallbladder is severely distended. Multiple intraluminal calculi are seen within the dilated ducts and within the gallbladder. No definitive obstructive calculus is currently visualized in the common bile duct, however, intermittent passage of calculi is suspected.

Mild generalized enlargement of the liver lobes is noted.

The pancreas presents mild generalized enlargement with a dilated pancreatic duct.

No significant lymphadenopathy is identified.

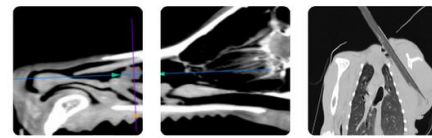
The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe hepatobiliary obstruction with multiple calculi affecting the intra- and extra-hepatic bile ducts and gallbladder.
- Mild peritoneal effusion likely secondary to biliary congestion.
- Pancreatic enlargement and ductal dilation suggestive of secondary pancreatitis or secondary obstructive changes.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with obstructive cholelithiasis with intermittent passage of calculi. The pancreatic changes likely reflect secondary inflammation or early pancreatitis. Cats with this degree of ductal obstruction are unlikely to clear calculi naturally and conservative management may be ineffective. Surgical consultation for biliary decompression +/- cholecystectomy can be considered. If surgery is not immediately undertaken, close monitoring with supportive care, ultrasound follow up, and medical management may be considered. Clinical monitoring for worsening jaundice, lethargy, or vomiting is crucial. Laboratory monitoring of bilirubin, liver enzymes, as well as pancreatic parameters is advised.



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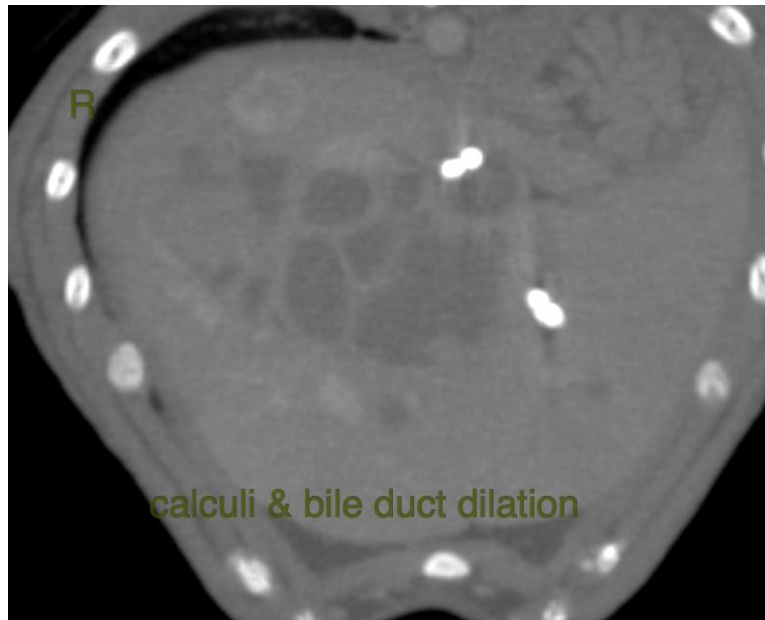
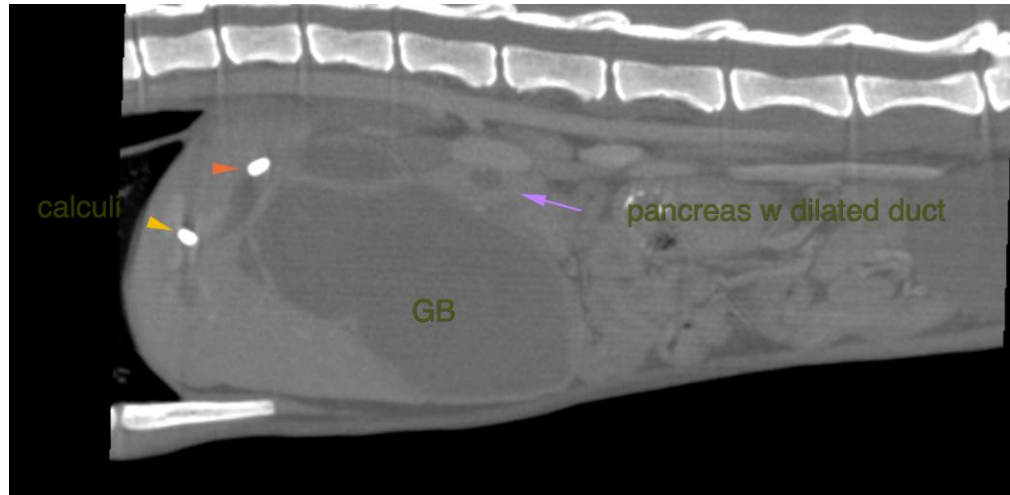
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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