


PATIENT PRESENTING CLINICAL SIGNS

Skye Yeager History: Acute onset vomiting and diarrhea, hematochezia, hyporexia.

SPECIES Physical Examination: Obese.

Feline Urinalysis: N/A.

BREED CBC: Mild inflammatory leukogram, hemoconcentration.

DLH Serum Biochemistry: N/A.

SEX

FS

Age

6 years

WEIGHT Normal trigone area, proximal urethra, and iliac blood vessels.

7.4 kg Normal iliac lymph nodes. Ureters not visualized.

INTERPRETED BY Normal renal size (left 3.6 cm, right 4 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

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Dipl. ECVIM

Reproductive System

N/A.

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Dr Sarah Barthelemy

Adrenal Glands

Normal position, echogenic appearance, shape, and size.

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Signal Hill Animal Clinic

Spleen

Enlarged (1.4 cm) with a mottled echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

REFERRING VET

Dr Cumyn

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Distended gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Dilated bile duct with no obvious evidence of obstruction.

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Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristalsis, and no distension of the lumen. Gas-filled colon.



PATIENT *Pancreas*

Skye Yeager Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Feline Normal mesenteric lymph nodes (0.4 cm).
No ascites.

BREED

DLH

ULTRASONOGRAPHIC FINDINGS

SEX

Primary Findings:

FS

- Splenomegaly.

Age

Secondary Findings:

6 years

- Distended gall and bile duct.

WEIGHT

7.4 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenomegaly would be reactive, hyperplasia, splenitis, and infiltrative neoplasia.

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Although the distended gall bladder and bile duct may merely be secondary to the GI tract signs, pancreatitis needs to be considered.

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The most likely etiology for the presenting clinical signs would be non-specific gastroenteritis – viral, bacterial, protozoa, helminths, toxins, hairballs, dietary indiscretion.

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Further assessment would be fecal analysis, fPL/PSL assay, and FNA cytology of the spleen.

Dr Sarah Barthelemy

Specific therapy would be dependent on an etiological diagnosis.

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PATIENT

Skye Yeager

SPECIES

Feline

BREED

DLH

SEX

FS

Age

6 years

WEIGHT

7.4 kg

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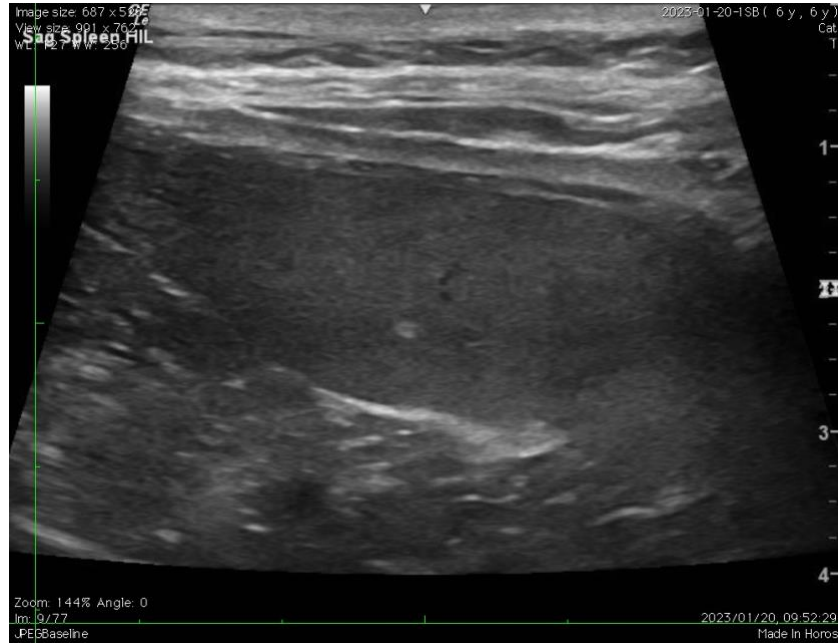
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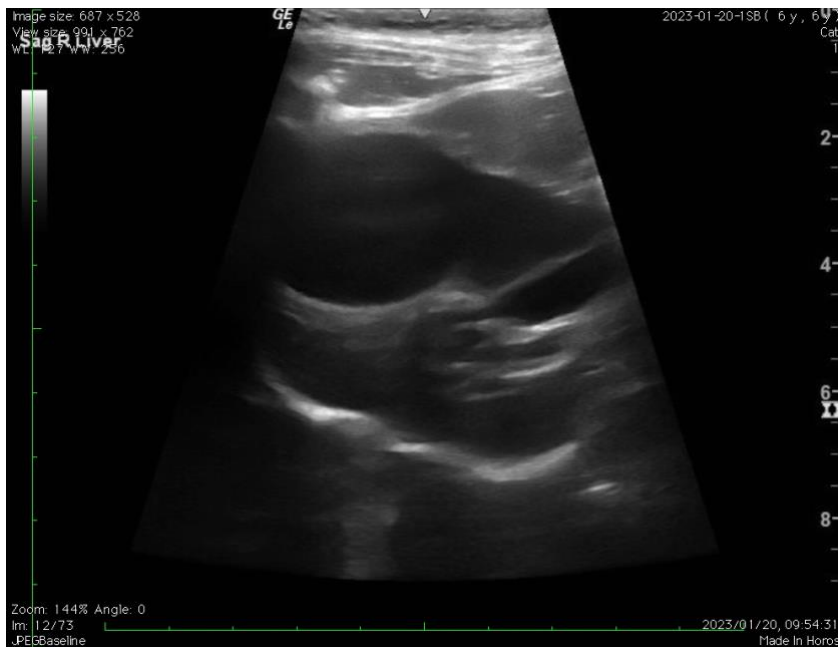
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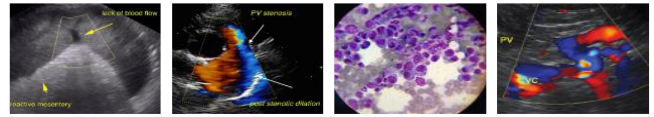
IMAGES

Spleen



Gall bladder





PATIENT

Skye Yeager

SPECIES

Feline

BREED

DLH

SEX

FS

Age

6 years

WEIGHT

7.4 kg

Bile duct



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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.

IMAGING PERFORMED BY

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