



**PATIENT PRESENTING CLINICAL SIGNS**

Beans Thode History: Abdominal mass with discomfort on palpation.

**SPECIES** Physical Examination: N/A.

Feline Urinalysis: N/A.

CBC: N/A.

**BREED** Serum Biochemistry: N/A.

DSH Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**MN *Urinary System***

**Age** Full urinary bladder with a normal thickness and appearance of the wall. Moderate amount of floating hyperechogenic sediment. No uroliths evident.

13 years

Normal trigone area, proximal urethra (0.2 cm), and iliac blood vessels.

**WEIGHT** Normal iliac lymph nodes. Ureters not visualized.

Left kidney – enlarged (4.8 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule.

**INTERPRETED BY**

Right kidney – small (2.5 cm) with a hyperechogenic appearance, loss of corticomedullary distinction, pyelectasia (0.2 cm), and irregular capsule.

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***Reproductive System***

N/A.

**IMAGING PERFORMED BY**

Sonya Myers, DVM

***Adrenal Glands***

**HOSPITAL NAME** Normal position, echogenic appearance, shape, and size. Left 0.32 cm, right 0.37 cm.

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***Spleen***

**REFERRING VET**

Enlarged (1.7 cm) with a mottled echogenic appearance and irregular capsule, and normal vasculature.

Dr Lesmes

***Liver***

**INVOICE**

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. Multiple mottled echogenic poorly defined parenchymal masses up to 3 x 5.1 cm in size. Full gall bladder containing normal anechoic bile. Thickened and hyperechogenic appearance of the gall bladder wall. Normal size of the bile duct (0.3 cm) with thickened appearance of the walls.

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**PATIENT** *Gastrointestinal*

Beans Thode Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.22 cm, duodenum 0.26 cm, jejunum 0.22 cm, colon 0.23 cm) and peristaltic activity, and no distension of the lumen.

**SPECIES**

Feline

*Pancreas*

**BREED**

DSH

Normal size (right 0.5 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SEX**

MN

**Age**

13 years

No mesenteric lymphadenomegaly.  
Large irregular mottled echogenic mid-abdominal mass (3.5 x 5 cm).  
Multiple irregular hypoechogetic mesenteric nodules and masses of varying sizes.  
Hyperechogetic appearance of the mesentery.  
Small amount of ascites.

*Thorax*

**WEIGHT**

Normal appearance of the heart.  
No pleural or pericardial fluid accumulation.

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**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

- Splenic pathology.
- Mesenteric masses.
- Hepatic masses.
- Ascites.

Secondary Findings:

- Renal changes.
- Previous cholecystitis
- Urinary bladder sediment.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The appearance of the spleen, liver, ascites, and mesentery is consistent with abdominal carcinomatosis/metastatic neoplasia with granulomatous disease an unlikely differential diagnosis.

The most likely etiology for the right kidney would be previous obstructive uropathy and for the left kidney, age-related change and compensatory hypertrophy.

Further assessment would be FNA cytology of the mesenteric masses, spleen, and hepatic masses.

Specific therapy would be dependent on an etiological diagnosis, although at this point palliative therapy would be indicated.

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**HOSPITAL NAME**

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**REFERRING VET**

Dr Lesmes

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**PATIENT IMAGES**

Beans Thode

**Mesentery**

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

13 years

**WEIGHT**

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**PATIENT** Liver

Beans Thode

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

13 years

**WEIGHT**



**Spleen**

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**HOSPITAL NAME**

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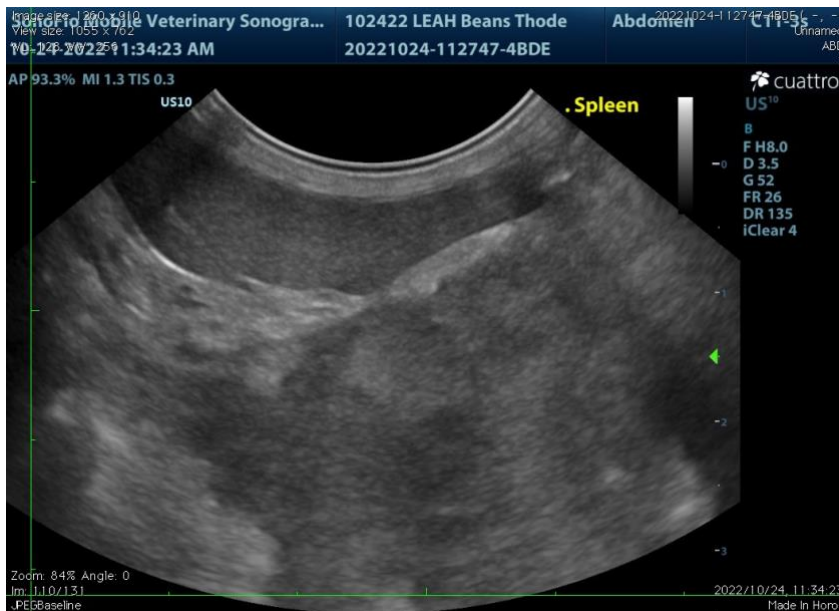
Dr Lesmes

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**PATIENT**

Beans Thode

**Right kidney**

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

13 years

**WEIGHT**



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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.**

**IMAGING PERFORMED BY**

Sonya Myers, DVM

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.

**HOSPITAL NAME**

Lake Emma Animal  
 Hospital

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
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Dr Lesmes

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