



PATIENT PRESENTING CLINICAL SIGNS

Lizzy Coombs History: Inappetence, vomiting, lethargy, suspected gastric foreign body obstruction.

SPECIES Physical Examination: N/A.

Feline Urinalysis: N/A.

CBC: N/A.

BREED Serum Biochemistry: N/A.

Sphynx Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Female **Urinary System**

Age Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

4 months Normal trigone area, proximal urethra (0.3 cm), and iliac blood vessels.

WEIGHT Iliac lymphadenomegaly (1.4 cm) with normal shape and echogenic appearance. Ureters not visualized.

3.5 #

INTERPRETED BY Normal renal size (left 3.2 cm, right 3.3 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

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MMedVet (Med), PhD,
Dipl. ECVIM

Reproductive System

N/A.

IMAGING PERFORMED BY **Adrenal Glands**

Sonya Myers, DVM Normal position, shape, echogenic appearance, and size. Left 0.32 cm, right 0.36 cm.

HOSPITAL NAME **Spleen**

Oviedo Veterinary Care and Emergency Normal size (0.5 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

REFERRING VET **Liver**

Dr Clark Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and echogenic appearance of the gall bladder wall. Normal bile duct (0.2 cm).

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PATIENT
Gastrointestinal

Lizzy Coombs

Normal appearance of the stomach, duodenum, jejunum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.22 cm, jejunum 0.16, colon 0.16 cm) and peristaltic activity, and no distension of the lumen. Hyperechogenic non-shadowing material within the small intestine with mild segmental dilation of the lumen but with no obvious evidence of an obstruction.

SPECIES

Feline

BREED
Pancreas

Sphynx

Normal size (right 0.8 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SEX
Free Abdomen

Female

Mesenteric lymphadenomegaly (0.8 x 1.3 cm). with normal shape and echogenic appearance
No ascites.

Age

4 months

ULTRASONOGRAPHIC FINDINGS
WEIGHT

Primary Findings:

3.5 #

- Enteritis.
- Mesenteric lymphadenomegaly.

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Secondary Findings:

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- Urinary bladder sediment.

IMAGING PERFORMED BY
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonya Myers, DVM

The most likely etiology for the enteritis would be secondary to dietary indiscretion with non-specific enteritis (viral, bacterial, protozoa, helminths, toxins), a differential diagnosis.

HOSPITAL NAME

Etiologies for the lymph nodes would be age-related change and reactive secondary to the enteritis with lymphadenitis, an unlikely differential diagnosis.

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and Emergency

Further assessment would be fecal analysis.

REFERRING VET

Specific therapy would be dependent on an etiological diagnosis. Symptomatic therapy would be anti-emetics and an intestinal diet. Follow up ultrasound or radiographs should be considered if there is not a satisfactory improvement.

Dr Clark

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PATIENT

Lizzy Coombs

SPECIES

Feline

BREED

Sphynx

SEX

Female

Age

4 months

WEIGHT

3.5 #

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IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

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IMAGES

Small intestine





PATIENT

Mesenteric lymph nodes

Lizzy Coombs

SPECIES

Feline

BREED

Sphynx

SEX

Female

Age

4 months

WEIGHT

3.5 #



INTERPRETED BY

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 Dipl. ECVIM

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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IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

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REFERRING VET

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