



**PATIENT PRESENTING CLINICAL SIGNS**

**Betta Hillegass** History: Inappetence and vomiting that improved on medication.

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

Feline Urinalysis: N/A.

**BREED** Previous CBC: Normal.

DSH Radiographic Findings: N/A.

**SEX**

MIN

**AGE** *Urinary System*

4 years Full urinary bladder with a normal thickness and appearance of the wall. Small amount of hyperechogenic sediment/small calculi (1.2 cm). No uroliths evident.

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

14.6 # Normal iliac lymph nodes. Ureters not visualized.

**INTERPRETED BY** Renomegaly (left 4 cm, right 4.2 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and blood flow. Irregular capsules as a result of cortical infarcts.

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**Reproductive System**

**IMAGING PERFORMED BY** N/A.

**Adrenal Glands**

Denise Bruno LVT, RDMS

Normal shape, echogenic appearance, size, and position. Left 0.96 x 0.31 cm, right 1.03 x 0.33 cm.

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**Spleen**

Normal size (1.1 cm) and echogenic appearance. Smooth homogenous parenchyma, scalloped appearance of the capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

**REFERRING VET**

Dr Thomson

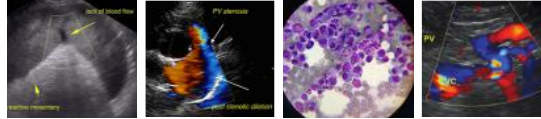
**Liver**

**INVOICE** Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct.

302752

**DATE**

2/16/22



**PATIENT**

Betta Hillegass

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

4 years

**WEIGHT**

14.6 #

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***Gastrointestinal***

Normal appearance of the stomach, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Segmental thickening of the duodenum and small intestine (up to 0.27 cm) with a prominent hypoechoic appearance of the submucosal layer and mucosal stippling but no loss of layering or distension of the lumen.

***Pancreas***

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

***Free Abdomen***

No mesenteric lymphadenopathy.  
No ascites.

**ULTRASONOGRAPHIC FINDINGS**

Primary findings:

- Enteropathy
- Renal disease.

Secondary findings:

- Urinary bladder sediment.

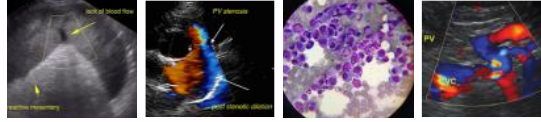
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the enteropathy would be inflammatory bowel disease, parasitic enteritis, and dietary hypersensitivity; with lymphoma a far less likely differential diagnosis.

Etiologies for the renal disease would be acute kidney injury, early chronic kidney disease, and bacterial nephritis.

Further assessment would be urine and fecal analyses, serum biochemistry, cobalamin assay, and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be feeding a novel protein/hypoallergenic diet, cobalamin supplementation, course of fenbendazole and/or metronidazole, and possibly prednisolone.



**PATIENT IMAGES**

Betta Hillegass

**Urinary bladder**

**SPECIES**

Feline

**BREED**

DSH

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**AGE**

4 years

**WEIGHT**

14.6 #

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**IMAGING PERFORMED BY**

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**HOSPITAL NAME**

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 Veterinary Hospital

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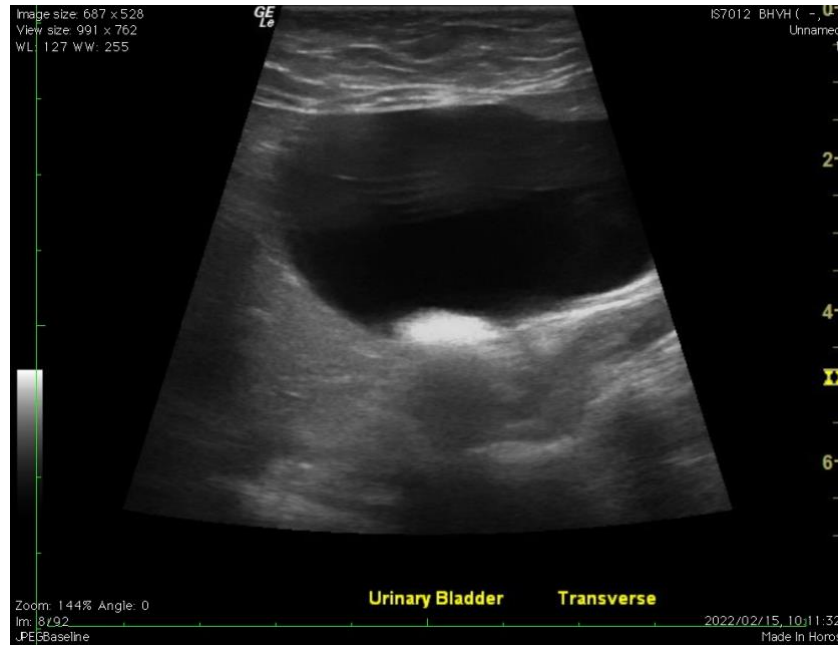
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**Kidney**





**PATIENT Small Intestine**

**Betta Hillegass**

**SPECIES**

Feline

**BREED**

DSH

**SEX**

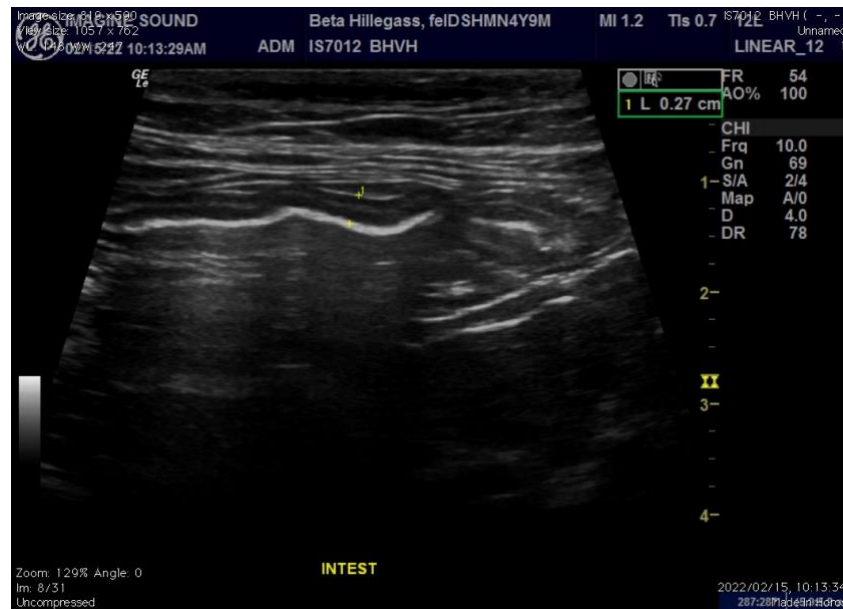
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**AGE**

4 years

**WEIGHT**

14.6 #



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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.

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