



PATIENT PRESENTING CLINICAL SIGNS

Sky Proodian History: Weight loss, heart murmur, normal previous blood work (10/22)

SPECIES Physical Examination: N/A.

Feline Urinalysis: N/A

CBC: N/A.

BREED Serum Biochemistry: N/A.

DMH Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

FS **Urinary System**

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

14 years Normal trigone area, proximal urethra (0.3 cm), and iliac blood vessels.

WEIGHT Normal iliac lymph nodes. Ureters not visualized.

6 # Normal renal size (left 3.9 cm, right 3.3 cm), with increased echogenic appearance, some loss of cortico-medullary differentiation, pyelectasia (left 0.3 cm, right 0.5 cm), and normal capsule.

INTERPRETED BY **Reproductive System**

Remo Lobetti, BVSc,
MMedVet (Med), PhD, Dipl.
ECVIM N/A.

Adrenal Glands

IMAGING PERFORMED BY Normal position, echogenic appearance, shape, and size. Left 0.34 cm, right 0.4 cm.

Sonya Myers, DVM

Spleen

HOSPITAL NAME Normal size (0.8 cm) and echogenic appearance. Smooth homogenous parenchyma, regular curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

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Hospital

REFERRING VET **Liver**

Dr Crainick Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Thickened and hyperechogenic appearance of the gall bladder wall. Normal bile duct (0.3 cm).

INVOICE **Gastrointestinal**

303876

DATE Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.25 cm, duodenum 0.17 cm, colon 0.18 cm) and peristaltic activity.

2/9/23


PATIENT *Pancreas*

Sky Proodian

Enlarged (left 1.1 cm, right 0.5 cm) with a hypoechogenic appearance and irregular capsule. Hypoechogenic parenchymal nodule (0.6 x 1.2 cm) in the proximal left lobe. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES

Feline

Free Abdomen
BREED

Normal mesenteric lymph nodes (0.8 cm).
No ascites.

DMH

ULTRASONOGRAPHIC FINDINGS
SEX

Primary Findings:

FS

- Pancreatitis.
- Pancreatic nodule.
- Renal disease.

Age

14 years

Secondary Findings:

WEIGHT

- Previous cholecystitis.

6 #

INTERPRETED BY
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the pancreatic nodule would be reactive, hyperplasia, granuloma, and neoplasia.

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

Etiologies for the kidneys would be chronic kidney disease, pyelonephritis, bacterial nephritis, and hypertensive nephropathy.

IMAGING PERFORMED BY

Further assessment would be urine analysis, urine culture, UPC (if culture and sediment negative), blood pressure, renal function (urea, creatinine, SDMA), fPL/PSL assay, and possibly FNA cytology of the pancreatic nodule and echocardiography.

Sonya Myers, DVM

HOSPITAL NAME

Specific therapy would be dependent on an etiological diagnosis.

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Dr Crainick

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DATE

2/9/23



PATIENT

Sky Proodian

SPECIES

Feline

BREED

DMH

SEX

FS

Age

14 years

WEIGHT

6 #

IMAGES

Pancreas



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IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

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PATIENT

Right kidney

Sky Proodian

SPECIES

Feline

BREED

DMH

SEX

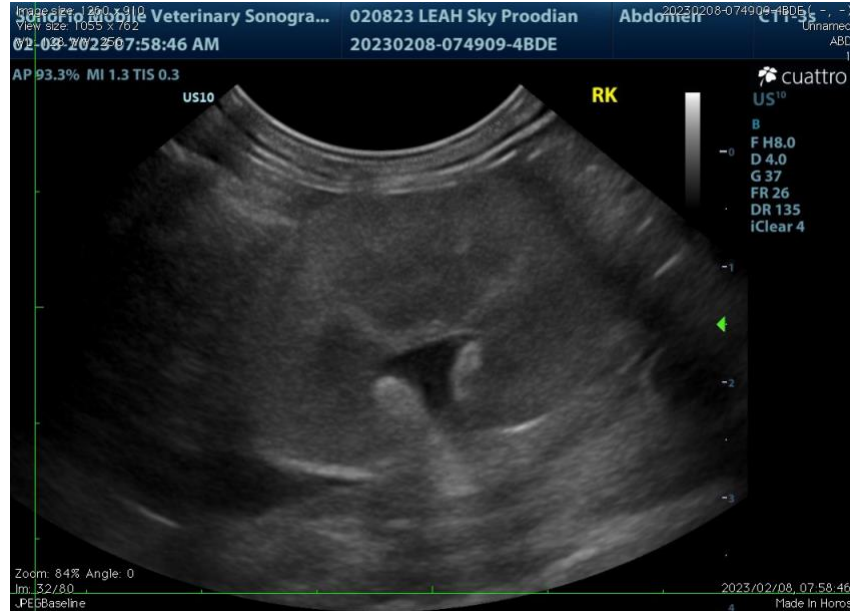
FS

Age

14 years

WEIGHT

6 #



INTERPRETED BY

Remo Lobetti, BVSc,
 MMedVet (Med), PhD, 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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)
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IMAGING PERFORMED BY

Sonya Myers, DVM

HOSPITAL NAME

Lake Emma Animal
 Hospital

REFERRING VET

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