



**PATIENT PRESENTING CLINICAL SIGNS**

Hunter Storley History: Vomiting past few days, weight loss past few months.

**SPECIES** Physical Examination: Normal.

Feline Urinalysis: Hematuria.

CBC: Normal.

**BREED** Serum Biochemistry: Normal.

DSH Radiographic Findings: N/A.

**SEX**

MN

**Age**

11 years

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

Full urinary bladder with a normal thickness and appearance of the wall. Large amount of floating hyperechogenic sediment present. No sediment or uroliths evident.

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

6.3 kg Normal iliac lymph nodes. Ureters not visualized.

Normal renal size, echogenic appearance, cortico-medullary differentiation, pelvis and capsule.

**INTERPRETED BY**

**Reproductive System**

N/A.

**Adrenal Glands**

Normal shape, echogenic appearance, size, and position.

**Spleen**

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

**Liver**

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident.

**Gall bladder**

Full containing small amount of hyperechogenic sediment. Normal thickness and appearance of the wall. Normal bile duct.

**IMAGING PERFORMED BY**

Dr Jessie Evoniuk

**HOSPITAL NAME**

State Avenue Veterinary Clinic

**REFERRING VET**

Dr Jessie Evoniuk

**INVOICE**

304049

**DATE**

3/29/23


**PATIENT**
***Gastrointestinal***

Hunter Storley

Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Prominent hypoechogenic appearance of the submucosal layer of the small intestine with no loss of layering or distension of the lumen.

**SPECIES**

Feline

***Pancreas***
**BREED**

DSH

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

**SEX**

MN

***Free Abdomen***

No mesenteric lymphadenomegaly.  
 No ascites evident.

**Age**

11 years

**ULTRASONOGRAPHIC FINDINGS**

Primary Findings:

**WEIGHT**

6.3 kg

- Enteropathy?
- Urinary bladder sediment.

Secondary Findings:

- Gall bladder sediment.

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**
**IMAGING PERFORMED BY**

Dr Jessie Evoniuk

Although the appearance of the small intestine may be an incidental finding, with the presenting clinical signs inflammatory bowel disease, parasitic enteritis, and dietary hypersensitivity should be considered.

**HOSPITAL NAME**

State Avenue Veterinary  
 Clinic

Etiologies for the urinary bladder would be bacterial cystitis, sterile cystitis, hemorrhage, and crystalluria.

**REFERRING VET**

Dr Jessie Evoniuk

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

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be novel protein/hypoallergenic diet, anti-emetics, cobalamin supplementation, course of fenbendazole, and possibly prednisolone.

**INVOICE**

304049

**DATE**

3/29/23



**PATIENT**

Hunter Storley

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

11 years

**WEIGHT**

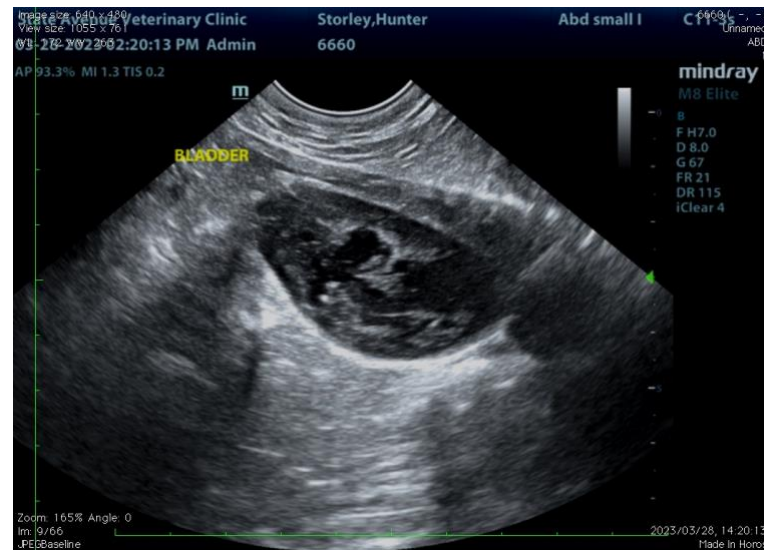
6.3 kg

**IMAGES**

**Small intestine**



**Urinary bladder**



**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Jessie Evoniuk

**HOSPITAL NAME**

State Avenue Veterinary Clinic

**REFERRING VET**

Dr Jessie Evoniuk

**INVOICE**

304049

**DATE**

3/29/23

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)**  
 remo.lobetti@sonopath.com