

PATIENT

Richard Royster

SPECIES

Feline

BREED

Maine Coon

SEX

MN

AGE

2 years

WEIGHT

7 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Sonya Myers, DVM

HOSPITAL NAME

Treasure Coast
Animal Emergency

REFERRING VET

Dr Cail

INVOICE

302855

DATE

3/319/22

PRESENTING CLINICAL SIGNS

History: 4-day duration of anorexia and lethargy.

Physical Examination: N/A.

Urinalysis: N/A.

CBC: N/A.

Serum Biochemistry: N/A.

Radiographic Findings: N/A.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3.5 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

N/A.

Adrenal Glands

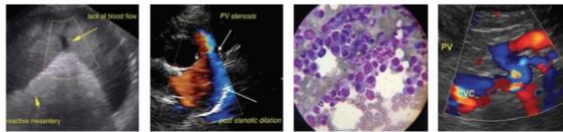
Normal shape, echogenic appearance, size, and position. Left 0.37 cm.

Spleen

Enlarged (1.1 cm) with normal echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. Diffuse small/pinpoint hypoechoic parenchymal nodules. FNA taken with no obvious aspirate hemorrhage.

Liver

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



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Gastrointestinal

Normal appearance of the gastro-esophageal junction, stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.14 cm, jejunum 0.22 cm) and peristalsis, and no distension of the lumen.

Pancreas

Normal size (right 0.6 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Mesenteric lymphadenomegaly (1.2 x 1.7 cm) with a rounded shape and hypoechogenic appearance. FNA taken with no obvious aspirate hemorrhage.

No ascites.

ULTRASONOGRAPHIC FINDINGS

Primary findings:

- Nodular splenomegaly.
- Mesenteric lymphadenomegaly.

Secondary findings:

- Thickened gall bladder wall.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the splenic pathology would be reactive, hyperplasia, splenitis, abscessation, granulomatous disease, and infiltrative neoplasia.

Etiologies for the mesenteric lymph nodes would be reactive, lymphadenitis, abscessation, granulomatous disease, and infiltrative neoplasia.

With the appearance of the spleen and lymph nodes, lymphoma would be an important consideration.

The appearance of the gall bladder wall is most likely from a previous episode of cholecystitis.

Further assessment/therapy would be dependent on the results of the FNA cytology.



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IMAGES

Spleen



Mesenteric lymph node



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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.

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