



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Misty Weise History: Weight loss, newly diagnosed diabetes.

SPECIES Feline Physical Examination: N/A.

Urinalysis: SG 1.032, pH 5, glucosuria, pyuria. *Enterococcus* on culture.

BREED DSH CBC: Normal

Serum Biochemistry: Elevated glucose, low sodium, acidotic.

DSH Radiographic Findings: N/A.

SEX

FS

AGE

12 years

WEIGHT

9 #

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. No sediment or uroliths evident.

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

Iliac lymph nodes and ureters not visualized.

Normal renal size (left kidney 3.9 cm, right 3.6 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal capsule, and blood flow. Bilateral pyelectasia (left 0.4 cm, right 0.3 cm) and cortical infarcts.

Reproductive System

N/A.

Adrenal Glands

Normal shape, echogenic appearance, size, and position. Left 0.8 x 0.42 cm, right 0.66 x 0.42 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, smooth curvi-linear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, and portal markings. No nodules or masses evident. Full gall bladder containing small amount of hyperechogenic sediment. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.24 cm).

Gastrointestinal

Normal appearance of the stomach, duodenum, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristalsis, and no distension of the lumen. Segmental thickening of the small intestine (up to 0.38 cm) with a prominent hypoechoic appearance of the submucosal layer but no loss of layering or distension of the lumen.

INTERPRETED BY

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

IMAGING PERFORMED BY

Denise Bruno LVT, RDMS

HOSPITAL NAME

Vetcierge

REFERRING VET

Dr Lavine

INVOICE

302802

DATE

3/8/22



PATIENT *Pancreas*

Misty Weise Enlarged (1 cm) with a diffuse hypoechogenic appearance and irregular capsule. Multiple small parenchymal hypoechogenic nodules. Visible pancreatic duct (0.2 cm). Hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES

Feline *Free Abdomen*

BREED

No mesenteric lymphadenopathy.
No ascites.

DSH

ULTRASONOGRAPHIC FINDINGS

SEX

Primary findings:

FS

- Pancreatitis.
- Enteropathy.

AGE

12 years

Secondary findings:

WEIGHT

- Age-related renal changes.
- Gall bladder sediment.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the appearance of the pancreas would be chronic pancreatitis, with neoplasia, a differential diagnosis. This could also account for the diabetic state.

IMAGING PERFORMED BY

Etiologies for the enteropathy would be inflammatory bowel disease, dietary hypersensitivity, parasitic enteritis, and granulomatous disease.

Denise Bruno LVT, RDMS

Further assessment would be fecal analysis, fPL/PSL, cobalamin assay, FNA cytology of the liver and pancreas and possibly endoscopy of the upper GI tract with biopsies.

HOSPITAL NAME

Specific therapy would be dependent on an etiological diagnosis.

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PATIENT IMAGES

Misty Weise **Small intestine**

SPECIES

Feline

BREED

DSH

SEX

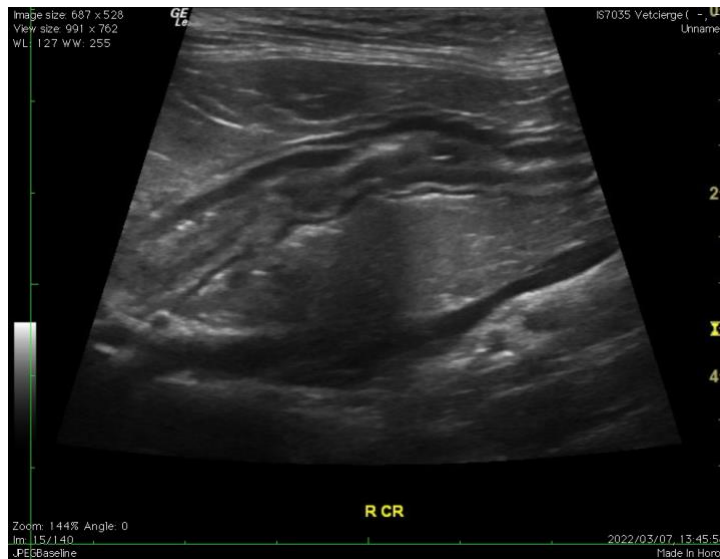
FS

AGE

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Pancreas

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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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