

PATIENT PRESENTING CLINICAL SIGNS

Correa Cameron History: Progressive vomiting.

SPECIES Physical Examination: Thickened GI loops, mesenteric lymphadenopathy.

Feline Urinalysis: N/A.

BREED CBC: Mild neutropenia.

Calico Serum Biochemistry: Normal, FIV/FelV negative.

Radiographic Findings: N/A.

SEX

Intact Female

AGE

14 years

WEIGHT

8.6 #

INTERPRETED BY

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

IMAGING PERFORMED BY

Denise Bruno LVT, RDMS

HOSPITAL NAME

Veterinary House Calls

REFERRING VET

Dr Lowenstein

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DATE

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ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

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

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3 cm, right 3.4 cm) with increased echogenic appearance, some loss of cortico-medullary differentiation, and normal blood flow, pelvis and capsule.

Reproductive System

Dilated uterine body and horns (right 1.6 x 4.6 cm, left 1.8 x 4.7 cm) containing mottled echogenic fluid/hyperechogenic adherent material. Right ovarian cyst (0.8 x 1 cm).

Adrenal Glands

Normal shape, echogenic appearance, position, and size. Left 0.7 x 0.3 cm, right 0.9 x 0.4/0.3 cm.

Spleen

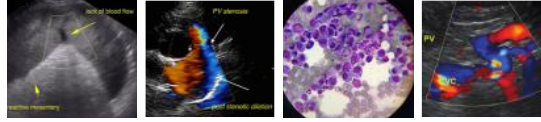
Normal size and echogenic appearance. Irregular capsule, smooth homogenous parenchyma, regular and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size, echogenic appearance, prominent portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness (0.1 cm) and echogenic appearance of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (small intestine 0.23 cm) and peristalsis, and no distension of the lumen.



PATIENT *Pancreas*

Correa Cameron Normal size (0.4 cm) with a hypoechogenic appearance and faint small hypoechogenic parenchymal nodules. Visible pancreatic duct (0.1 cm). Regular capsule. Mild hyperechogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES

Feline *Free Abdomen*

BREED

Calico

Mesenteric lymphadenomegaly (0.4 x 1 cm) with normal shape and increased echogenic appearance.
No ascites.

SEX

Intact Female

ULTRASONOGRAPHIC FINDINGS

Primary findings:

AGE

14 years

- Uterine pathology.
- Right ovarian cyst.
- Mesenteric lymphadenomegaly.
- Pancreatitis.

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Secondary findings:

- Age-related renal changes.
- Previous cholangio-hepatitis.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the uterine pathology would be pyometria, endometritis, and neoplasia.

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The most likely etiology for the lymph nodes would be reactive with lymphadenitis a differential diagnosis.

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The appearance of the pancreas is consistent with chronic pancreatitis.

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Further assessment would be 3 view thoracic radiographs, fPL/PSL assay, and laparotomy; he latter being potentially both diagnostic and therapeutic.

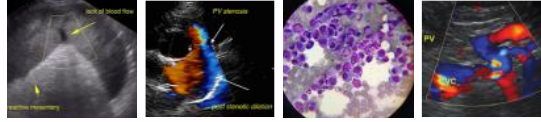
Specific therapy would be dependent on an etiological diagnosis.

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PATIENT IMAGES

Correa Cameron **Uterus**

SPECIES

Feline

BREED

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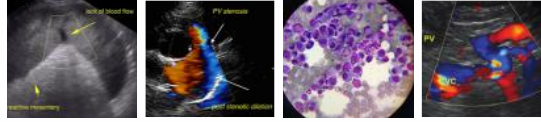
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PATIENT Right ovary

Correa Cameron

SPECIES

Feline

BREED

Calico

SEX

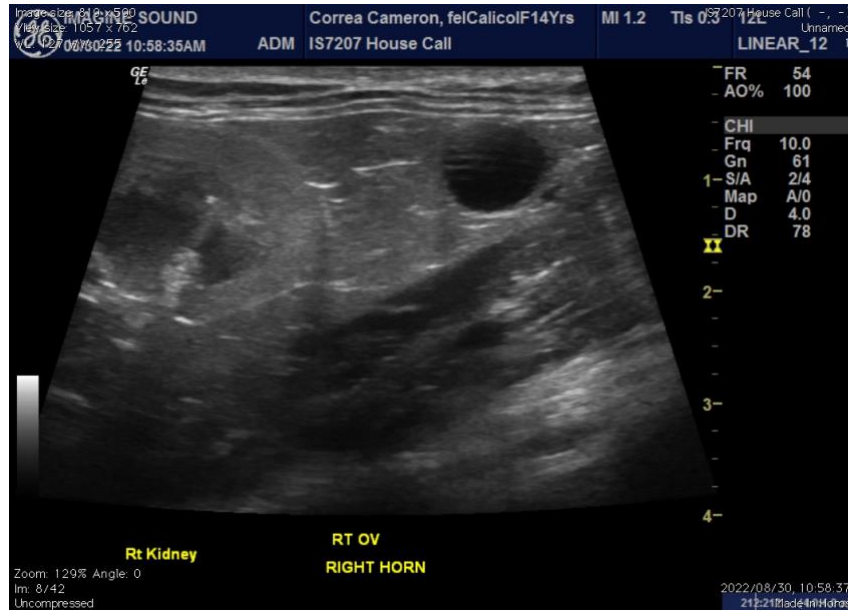
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Mesenteric lymph node

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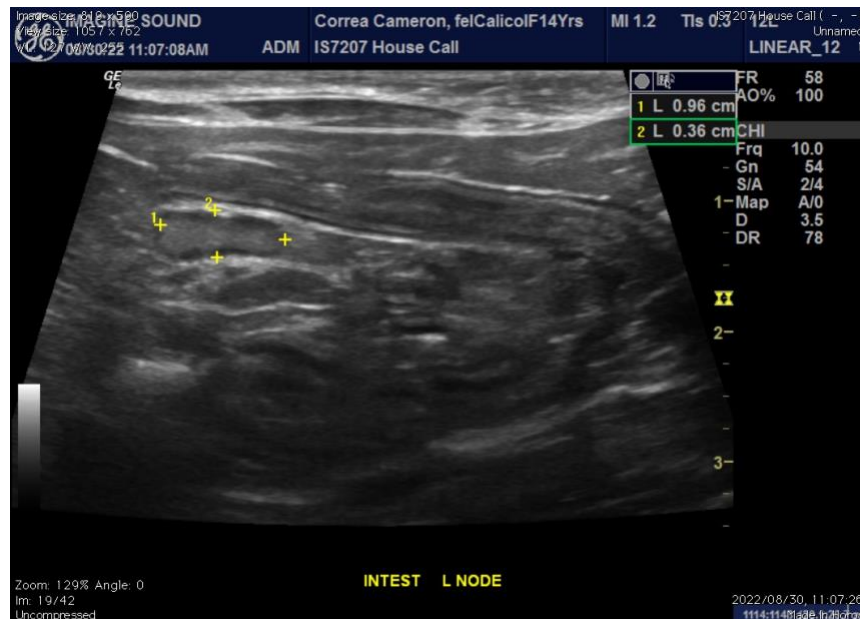
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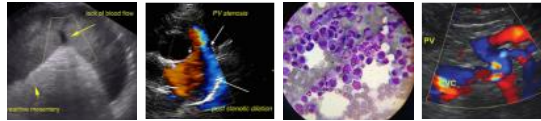
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PATIENT Pancreas

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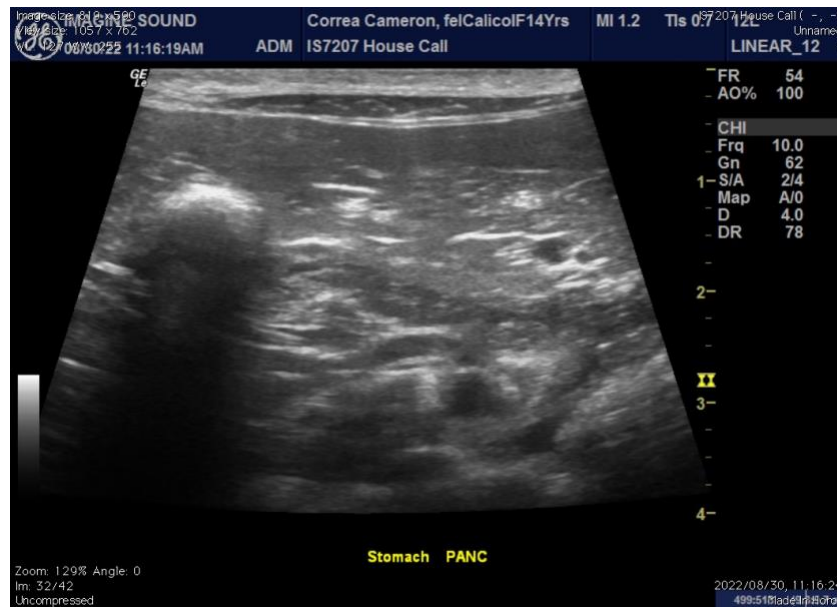
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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