



**PATIENT PRESENTING CLINICAL SIGNS**

Ollie Lesne History: Acute onset vomiting.

**SPECIES** Physical Examination: N/A.

Feline Urinalysis: N/A.

CBC: N/A.

**BREED** Serum Biochemistry: Elevated GGT activity.

DSH Radiographic Findings: N/A.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**MN** *Urinary System*

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

5 years

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

**WEIGHT** Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 3.9 cm right 3.8 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

**INTERPRETED BY** *Reproductive System*

N/A.

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*Adrenal Glands*

Normal shape, echogenic appearance, position, and size. Left 0.39 cm, right 0.33 cm.

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*Spleen*

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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*Liver*

Normal size with a diffuse hypoechogenic appearance, prominent portal markings, and regular curvilinear capsule. No nodules or masses evident. Small gall bladder containing normal anechoic bile. Thickened and hyperechogenic appearance of the gall bladder wall. Normal bile duct (0.2 cm).

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*Gastrointestinal*

**DATE**

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Normal appearance of the duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (duodenum 0.21 cm, jejunum 0.25 cm) and peristaltic activity, and no distension of the lumen. Segmental thickening of the stomach (0.56 cm) with no loss of layering. Small amount of gas within the stomach.

**PATIENT** *Pancreas*

Ollie Lesne Enlarged (right 0.9 cm) with a hypoechogenic appearance and irregular capsule. Hyperechogenic echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Feline Normal mesenteric lymph nodes (0.5 cm).  
No ascites.

**BREED** **ULTRASONOGRAPHIC FINDINGS**

DSH

Primary Findings:

**SEX**

- Pancreatitis.
- Gastritis.
- Hepatopathy.

MN

**Age**

5 years

Secondary Findings:

- Previous cholecystitis.

**WEIGHT****INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The appearance of the pancreas is consistent with pancreatitis and could account for the hepatopathy and gastric thickening.

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Other etiologies for the hepatopathy would be reactive, cholangio-hepatitis complex, early lipidosis, and infiltrative neoplasia.

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Other etiologies for the gastritis would be non-specific (viral, toxins, dietary indiscretion), *Helicobacter* gastritis, ulcerative disease, and inflammatory bowel disease.

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Further assessment would be fPL/PSL assay and possibly FNA cytology of the liver and gastroscopy with biopsies.

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**HOSPITAL NAME**

Specific therapy would be dependent on an etiological diagnosis. Management of the pancreatitis would be fluid therapy as needed, low-fat intestinal diet, anti-emetics, gastric protectants, and analgesics.

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**PATIENT**

Ollie Lesne

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

5 years

**WEIGHT**

**IMAGES**

**Liver**



**Gall bladder**



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**PATIENT** Pancreas

Ollie Lesne

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**Age**

5 years

**WEIGHT**



**Stomach**

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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.

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