



## PATIENT

Mango Kelly

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Neutered male

## AGE

15 years

## WEIGHT

11 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Pamela Bay

## HOSPITAL NAME

For Cats Only VC

## REFERRING VET

Dr. Pamela Bay

## INVOICE

70997

## DATE

1/27/26

## PRESENTING CLINICAL SIGNS

- Weight loss, anorexia.
- Hx of GI disease- currently on Prednisolone 5mg QD
- CBC: HCT 20.6% (L), WBC 1.76 (L), neut 1.19 (L), lymph 0.29 (L), PLT 28 (L) Chem/lytes: SDMA 15 (H), chol 53 (L)

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder is full with a normal thickness and smooth appearance of the wall. A large amount of floating, hyperechogenic sediment is noted.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 3.5 cm, right measured 4.0 cm), increased echogenic appearance, some loss of cortico-medullary differentiation, and normal pelvis and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

### *Adrenal Glands*

The adrenal glands are not clearly visualized, but appear to be of normal shape, echogenic appearance and size.

### *Spleen*

The spleen is enlarged (1.2 cm in width) maintaining a normal echogenic appearance and a smooth homogenous parenchyma. The capsule was scalloped.

### *Liver*

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

### *Gallbladder*

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.



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## ***Gastrointestinal***

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen.

## ***Pancreas***

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

## ***Free Abdomen***

Normal mesenteric lymph nodes.

No ascites evident.

## **ULTRASONOGRAPHIC FINDINGS**

- Splenomegaly.
- Urinary bladder sediment.
- Age related renal changes versus early chronic kidney disease.

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

Etiologies for the splenomegaly would be reactive hyperplasia (secondary to the GI tract disease) with splenitis and infiltrative neoplasia a less likely differential diagnosis.

Etiologies for the urinary bladder sediment would be incidental debris, crystalluria and possibly bacterial cystitis.

Further assessment would be urinalysis, possibly urine culture and FNA cytology of the spleen.

With the history of GI tract disease and the weight loss, further assessment (if not already done) would be fecal analysis, cobalamin and folate assay and endoscopy of the upper GI tract with biopsies.

Further specific therapy would be dependent on an etiological diagnosis.



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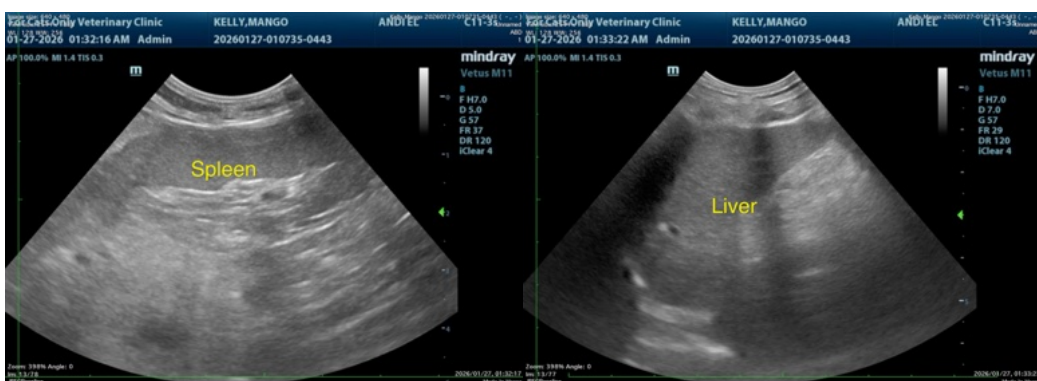
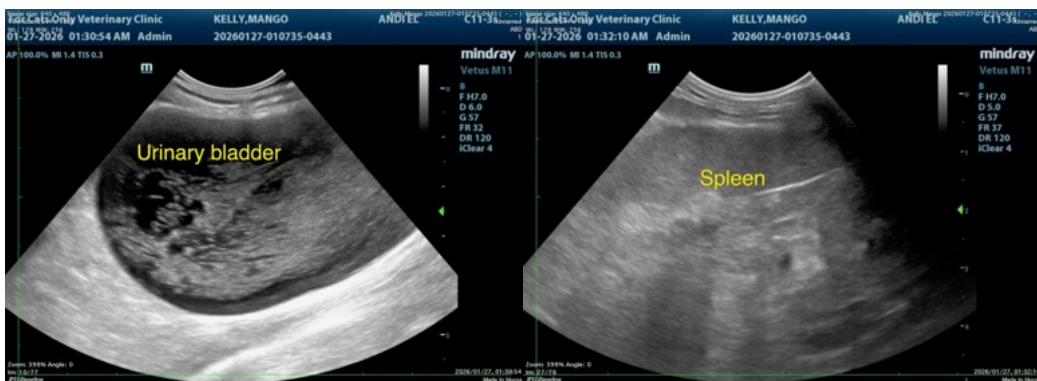
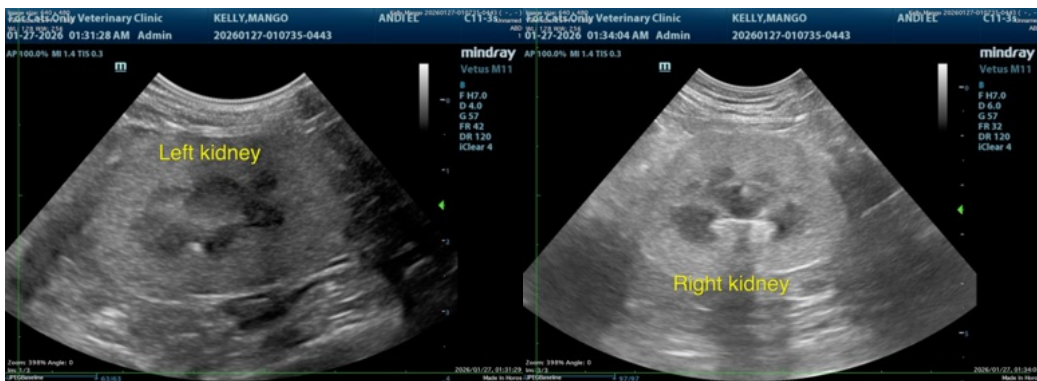
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

[info@sonopath.com](mailto:info@sonopath.com)