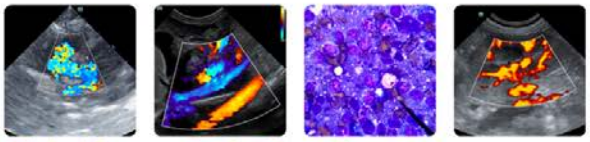


PATIENT

Tigger DeoReo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julia Bakker, DVM

HOSPITAL NAME

Orange Blossom Veterinary Imaging

REFERRING VET

Zachary Pearl, DVM

INVOICE

71881

DATE

11/17/25

PRESENTING CLINICAL SIGNS

Tigger is a 12-year-old female cat presenting for a history of weight loss and chronic loose stool/diarrhea over the last couple of months. The owner reports a decrease in energy levels. Appetite is difficult to assess, as the owner is unsure if the cat is eating less or if the weight loss is secondary to the diarrhea. The owner has tried offering various foods, including human foods, which the cat eats readily, but the loose stool has not resolved. The cat reportedly dislikes commercial wet food. Urination habits are considered normal. No vomiting, blood, or mucus in the stool has been observed.

CBC/Chem/UA/T4/Fecal performed and results attached. FNA of mesenteric lymph node performed, cytology pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder containing a scant amount of floating hyperechogenic sediment, with a normal thickness and smooth appearance of the wall.

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, architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Left kidney measures 3.2 cm. Right kidney measures 3.7 cm. Normal color flow pattern evident in both kidneys.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left measures 1.14 cm in length x 0.35 cm and 0.33 cm in width. Right measures 0.87 cm in length x 0.31 cm and 0.23 cm in width.

Spleen

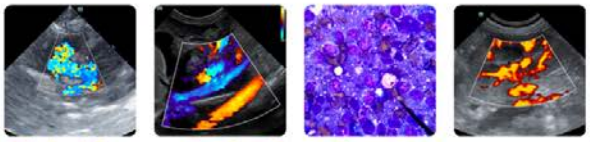
Normal size (0.70 cm in width) and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident.

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

Full containing a small amount of non-adhered hyperechogenic sediment. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.



PATIENT

Tigger DeoReo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julia Bakker, DVM

HOSPITAL NAME

Orange Blossom Veterinary Imaging

REFERRING VET

Zachary Pearl, DVM

INVOICE

71881

DATE

11/17/25

Gastrointestinal

Normal thickness of the small intestine (up to 0.25 cm) with no loss of layering, but with an increase in the muscularis to mucosa ratio, normal peristaltic activity, and no distention of the lumen.

Normal appearance of the stomach, duodenum, 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

Visible sections present normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Enlarged mesenteric lymph nodes, measuring up to 0.60 cm x 1.4 cm in size with a hypoechogenic appearance but maintaining a normal shape.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Enteropathy.
- Mesenteric lymphadenomegaly.
- Gallbladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the enteropathy would be dietary hypersensitivity, inflammatory bowel disease, and possibly emerging lymphoma.

Etiologies for the mesenteric lymphadenomegaly would be reactive hyperplasia, lymphadenitis, and possibly infiltrative neoplasia.

The gallbladder sediment is most likely an incidental finding.

Further assessment needs to be based on the pending results, but could include cobalamin, folate, and TLI assay, and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

Symptomatic management that could be considered would be feeding a novel protein/hypoallergenic diet, cobalamin supplementation, and if there is still not a satisfactory improvement, then a course of Prednisolone would then be indicated.

PATIENT

Tigger DeoReo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julia Bakker, DVM

HOSPITAL NAME

Orange Blossom Veterinary Imaging

REFERRING VET

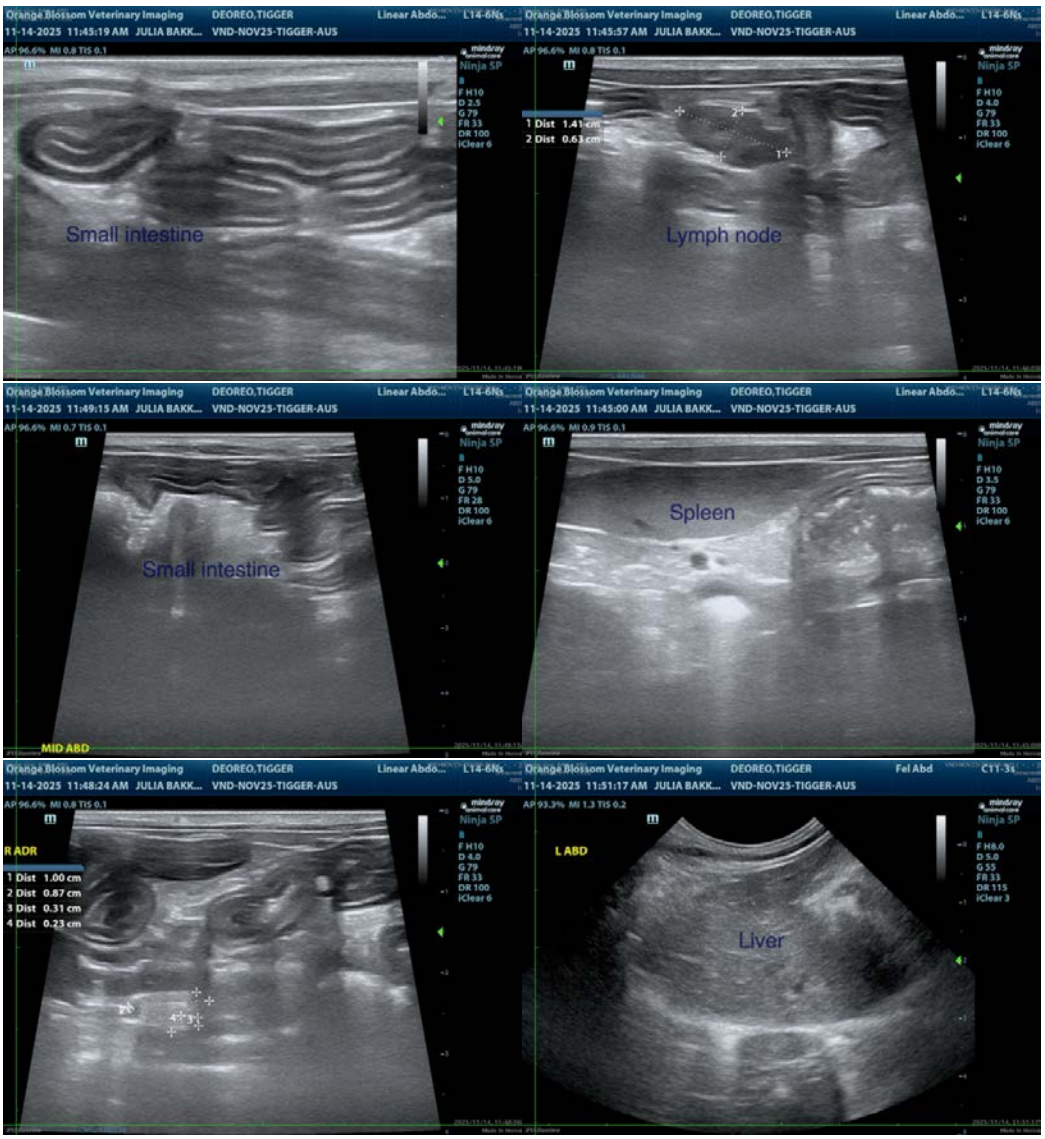
Zachary Pearl, DVM

INVOICE

71881

DATE

11/17/25



PATIENT

Tigger DeoReo

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julia Bakker, DVM

HOSPITAL NAME

Orange Blossom Veterinary Imaging

REFERRING VET

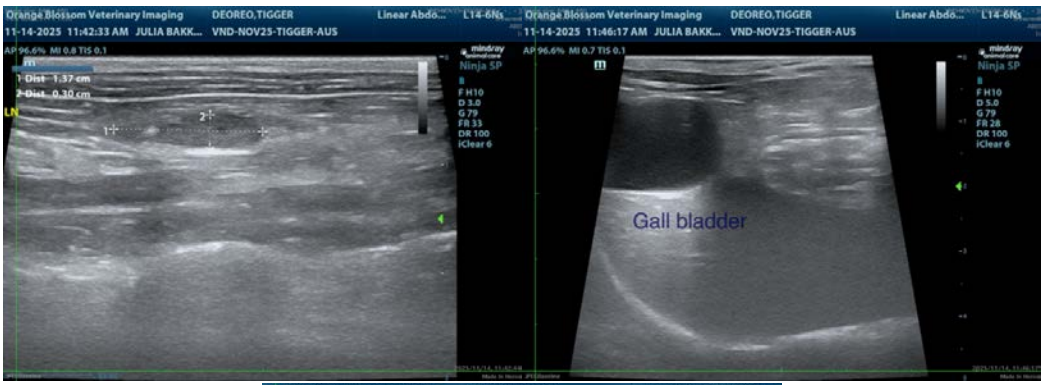
Zachary Pearl, DVM

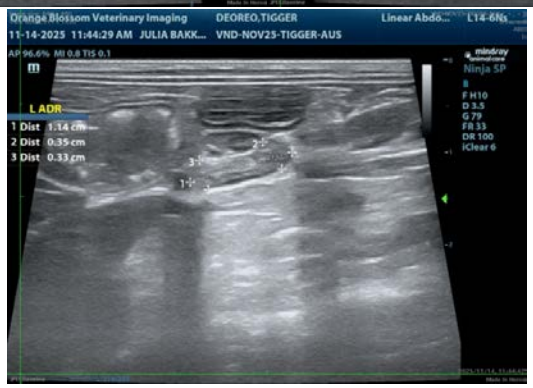
INVOICE

71881

DATE

11/17/25





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)

info@sonopath.com