



## PATIENT

Beretta Herman

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

10 years

## WEIGHT

9.1 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Mark Reser

## HOSPITAL NAME

Harvest Hills VH

## REFERRING VET

Dr. Miller

## INVOICE

68284

## DATE

11/3/25

## PRESENTING CLINICAL SIGNS

History: Weight loss and decreased appetite recently noted by owner, no vomiting or diarrhea, owners were concerned about dental disease

Abnormal PE/Chem/CBC/UA Results: Icteric sclera and pinnae; gingival recession and mobile canine tooth Mild neutropenia, mild hypoalbuminemia (2.5 g/dL), increased liver enzymes (ALT 178, ALP 441), well concentrated urine (USG 1.054) with bilirubinuria (3+), euthyroid (1.7)

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder is small with a normal thickness and smooth appearance of the wall. A scant 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 3.8 cm, right measured 4.0 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident.

### *Adrenal Glands*

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.41 cm in width. The right adrenal gland measured 0.39 cm in width.

### *Spleen*

Normal size 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. The spleen measured 0.9 cm in width.

### *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 small 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. A small amount of ingesta is present in the stomach. This is consistent with a recent meal.

**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**

Enlarged mesenteric lymph node measuring 0.9 x 3.0 cm in size with a mottled echogenic appearance and a hyperechogenic appearance of the surrounding mesentery. The rest of the mesenteric lymph nodes are of normal size and appearance.

No ascites evident.

**ULTRASONOGRAPHIC FINDINGS**

- Focal, mesenteric lymphadenomegaly.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The likely etiologies for the mesenteric lymphadenomegaly would be lymphadenitis and infiltrative neoplasia with reactive hyperplasia a less likely differential diagnosis.

Further assessment would be three view thoracic radiographs and FNA cytology of the lymph node and liver.

Specific therapy would be dependent on an etiological diagnosis.





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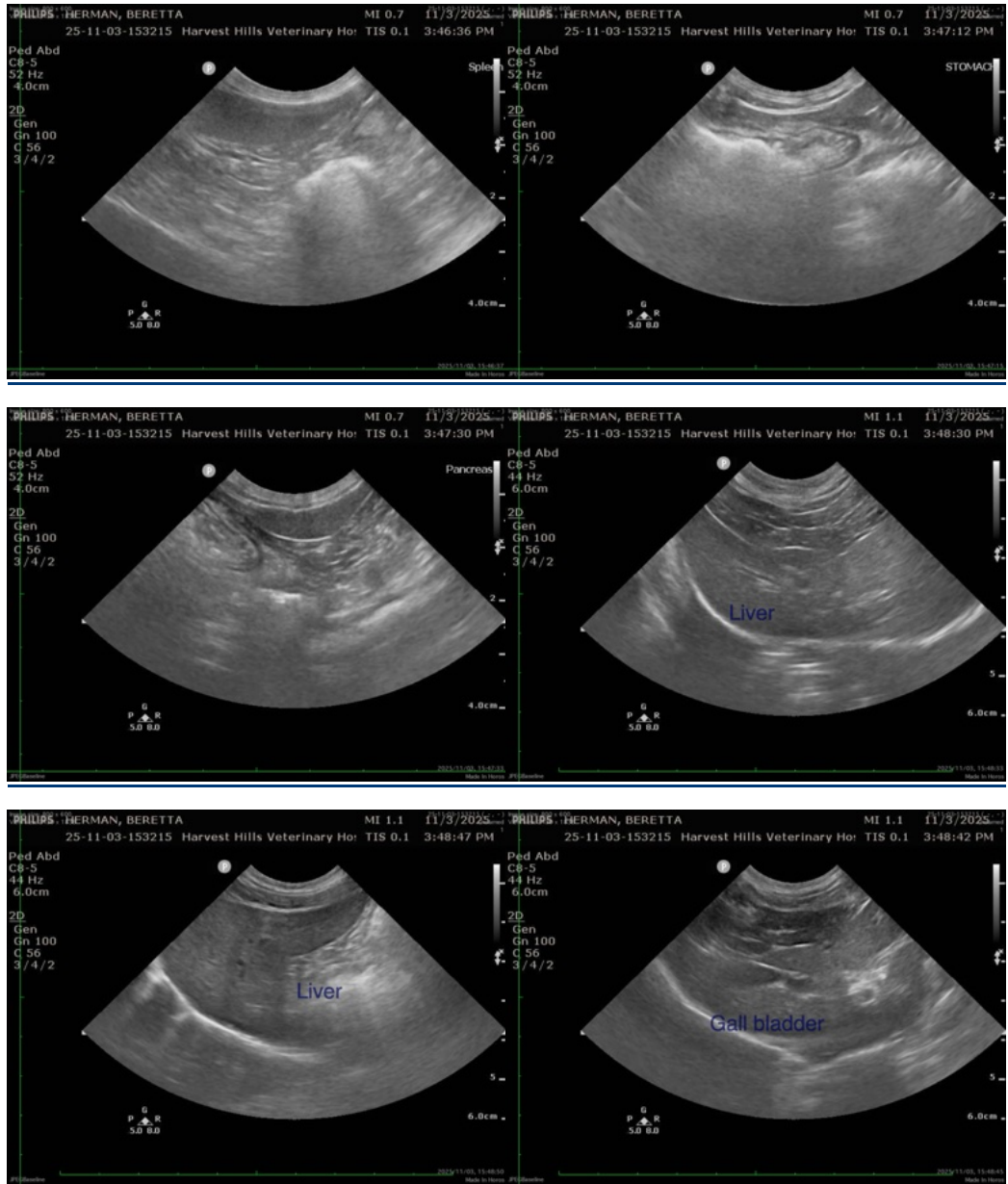
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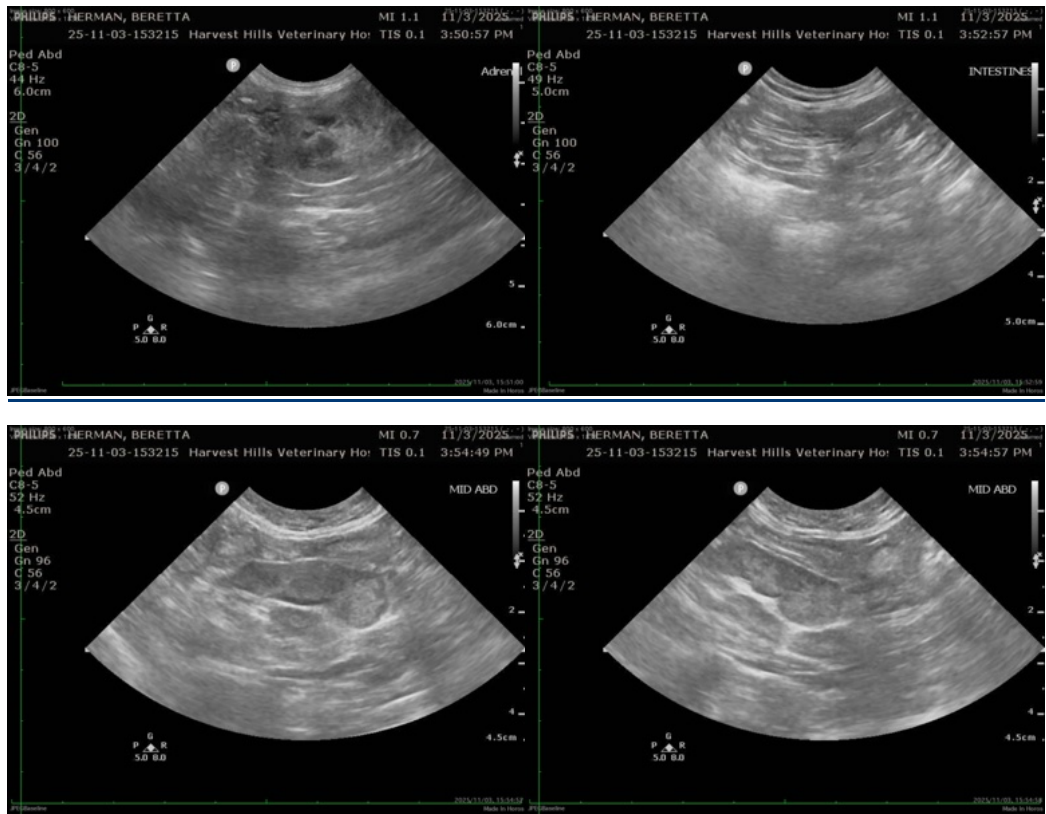
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)