



PATIENT

Biscotti Chaplin

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

4 years

WEIGHT

6.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Schiess

INVOICE

69340

DATE

12/5/25

PRESENTING CLINICAL SIGNS

History: persistent elevated calcium secondary to renal dz vs idiopathic vs underlying neoplasia
Current meds Azodyl Benazepril P lyte K/D diet Cat was not fasted for scan
Abnormal PE/Chem/CBC/UA Results: HCT 28% WBC 19K Lymph 9.3K Creat 1.7 BUN 37 Ca 12.6
remainder WNL U/A Ph 5.5 no protein or WBC or infection USG 1.020

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. A small 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 left renal size (left measured 3.2 cm), small right kidney (right measured 2.7 cm), with both kidneys showing increased echogenic appearance, decreased cortico-medullary differentiation and normal pelvis and capsule. Mild, bilateral infarcts and mineralization evident. No renoliths present. Normal color flow pattern is noted in both kidneys.

Adrenal Glands

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

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 0.6 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 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

- Renal disease.
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the kidneys is most consistent with chronic kidney disease and in line with the patient's history.

The most likely etiology for the urinary bladder sediment would be incidental debris with crystalluria and bacterial cystitis, an unlikely differential diagnosis.

The two most likely differential diagnosis for the hypercalcemia would be secondary to the renal disease and idiopathic hypercalcemia. Hypercalcemia of malignancy and primary hyperparathyroidism would be less likely differential diagnosis.

Further assessment that can be considered for the hypercalcemia would be PTH and PTHrP assay with additional diagnostics being three view thoracic radiographs and ultrasound of the thyroid glands.

Further specific therapy would be dependent on an etiological diagnosis.



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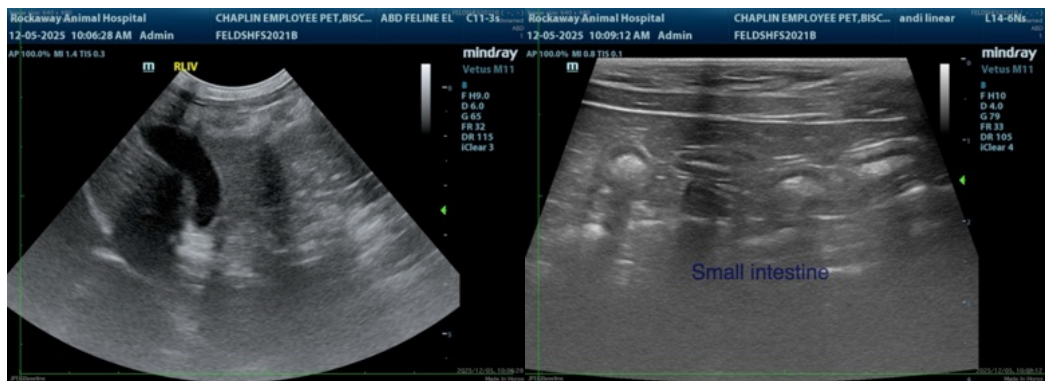
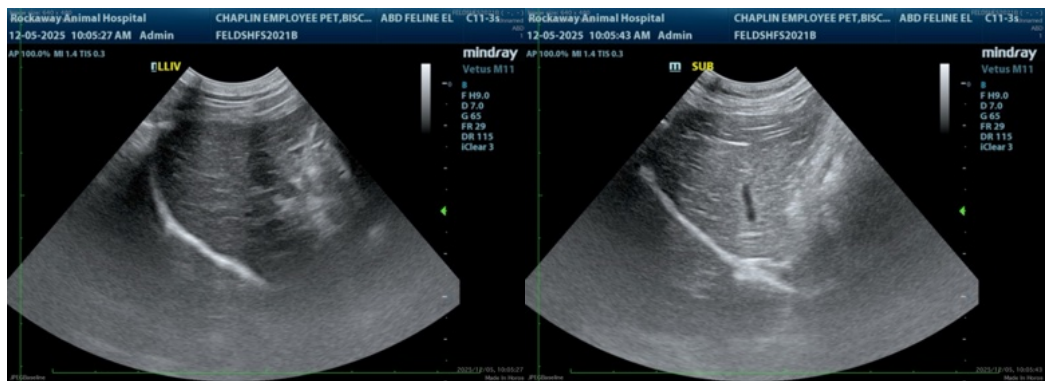
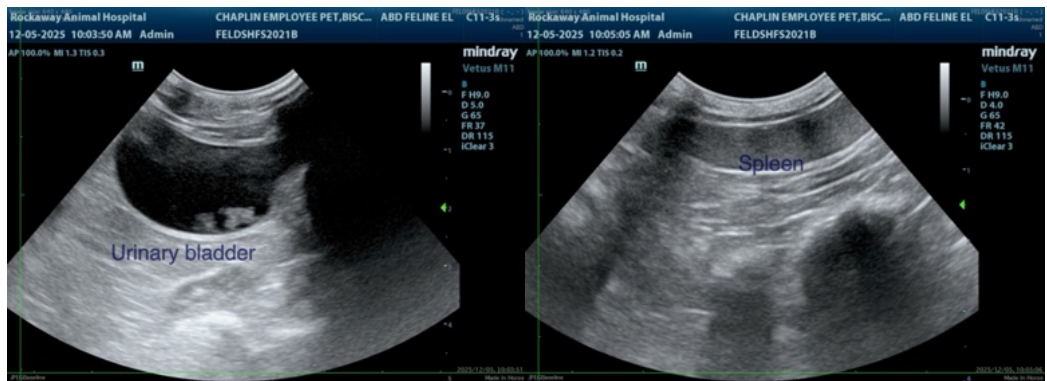
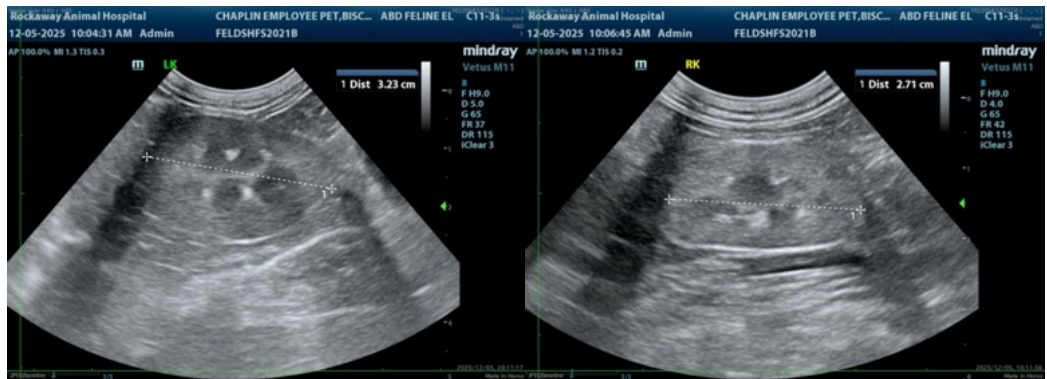
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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