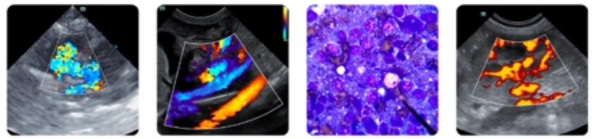


SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Kovu Eichner

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13 years

WEIGHT

13 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski, DVM, MA

HOSPITAL NAME

Western New York Vetererinay Service

REFERRING VET

Dr. Hauschildt

INVOICE

73470

DATE

3/17/26

PRESENTING CLINICAL SIGNS

- RDVM REASON FOR REFERRAL: Kovu, a nearly 14-year-old male cat, presents with ongoing GI issues and inappetence. He has a history of constipation, including an impacted bowel 8 months ago. He now has 3 weeks of chronic diarrhea and a 2-pound weight loss. Yesterday, his primary vet noted jaundice and severe dehydration (treated with saline). Kovu is currently lethargic but drinking and eating. Minimal vomiting (bile noted yesterday). He is urinating, though inappropriately at times.
- Current management includes a Royal Canin Fiber Response Diet and a probiotic, neither of which has provided relief. He is currently eating Purina Pro Plan soft food, urgent care food from Dr. Bryce, and Lickable treats.
- CLINICAL SIGNS: Jaundiced, poor appetite and extremely lethargic
- MEDICATIONS: - Miralax every other day, - Probiotic, - Royal Canin fiber response diet
- Bloodwork done 03/02/2026 RETIC 116.7 (ref 3.0 - 50.0 K/µL) HIGH MONO 0.69 (ref 0.05 - 0.67 K/µL) HIGH LIPA 2225 (ref 100 - 1400 U/L) HIGH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

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.

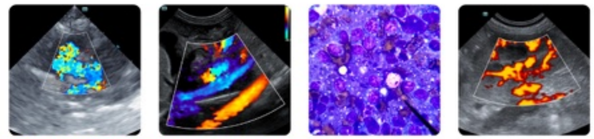
Normal renal size (left measured 3.7 cm, right measured 4.5 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident.

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 0.44 cm in width.

Spleen

The spleen is enlarged (measuring up to 1.2 cm in width) and folded on itself, but maintained a normal echogenic appearance, smooth homogenous parenchyma and a regular curvilinear capsule.



PATIENT

Kovu Eichner

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13 years

WEIGHT

13 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski, DVM, MA

HOSPITAL NAME

Western New York Vetererinay Service

REFERRING VET

Dr. Hauschildt

INVOICE

73470

DATE

3/17/26

Liver

The liver was enlarged with rounded edges, diffuse, increased echogenic and coarse appearance, decreased portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature. FNA of the liver was obtained.

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.

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

Normal size (left pancreas measured 0.6 cm in width) with a hypoechogenic appearance and an irregular capsule. Hyperechogenic appearance of the mesentery and fat surrounding the pancreas. The visible pancreatic duct measured 0.2 cm in diameter.

Free Abdomen

Normal mesenteric lymph nodes.

A moderate amount of ascites is present.

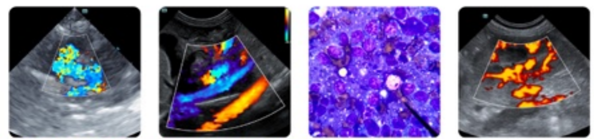
Hyperechogenic appearance of the mesentery, especially in the cranial abdomen.

Thorax

Normal appearance of the heart. No pericardial or pleural effusion evident.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy.
- Splenomegaly.
- Ascites.
- Mesenteric inflammation.
- Pancreatitis.



PATIENT
Kovu Eichner

SPECIES
Feline

BREED
Domestic Shorthair

SEX
Neutered male

AGE
13 years

WEIGHT
13 lbs

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

IMAGING PERFORMED BY
Danielle Shemanski, DVM, MA

HOSPITAL NAME
Western New York Matererinay Service

REFERRING VET
Dr. Hauschildt

INVOICE
73470

DATE
3/17/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the hepatopathy would be reactive hyperplasia, hepatitis, hepatic lipidosis and possibly infiltrative neoplasia.

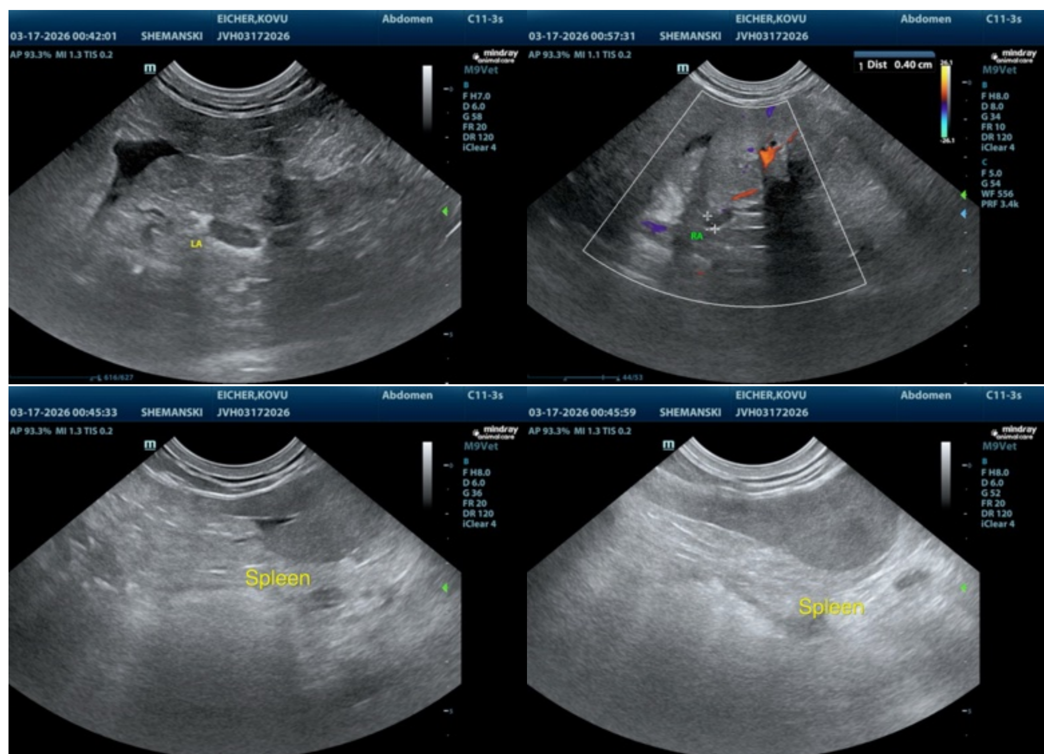
Etiologies for the splenomegaly would be reactive hyperplasia, splenitis and possibly infiltrative neoplasia.

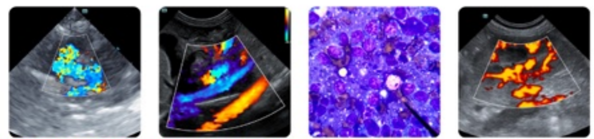
Etiologies for the mesenteric inflammation and ascites would be secondary to the hepatopathy, splenomegaly and pancreatitis with sterile or bacterial peritonitis differential diagnosis.

Further assessment would be based on the pending cytology results, but could include FPL/PSL assay, FNA cytology of the spleen and analysis of the ascitic fluid.

Specific therapy would be dependent on an etiological diagnosis.

Symptomatic management would be to continue with the current therapy.





PATIENT

Kovu Eichner

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13 years

WEIGHT

13 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski, DVM, MA

HOSPITAL NAME

Western New York Vetererinay Service

REFERRING VET

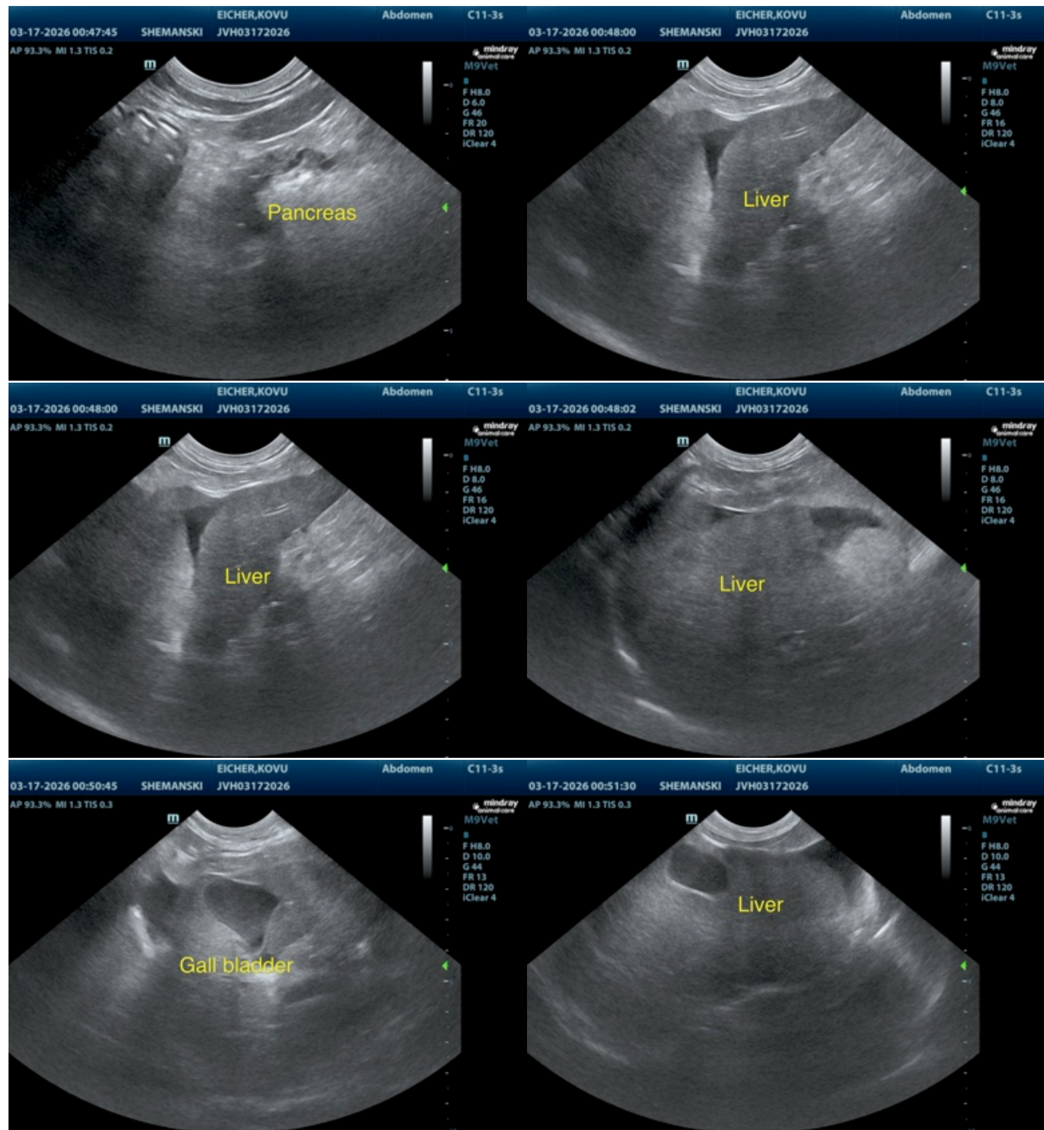
Dr. Hauschildt

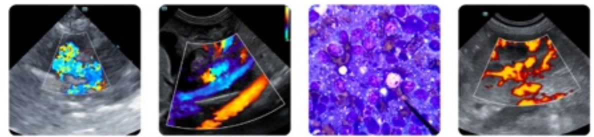
INVOICE

73470

DATE

3/17/26





PATIENT

Kovu Eichner

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

13 years

WEIGHT

13 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski, DVM, MA

HOSPITAL NAME

Western New York Vetererinay Service

REFERRING VET

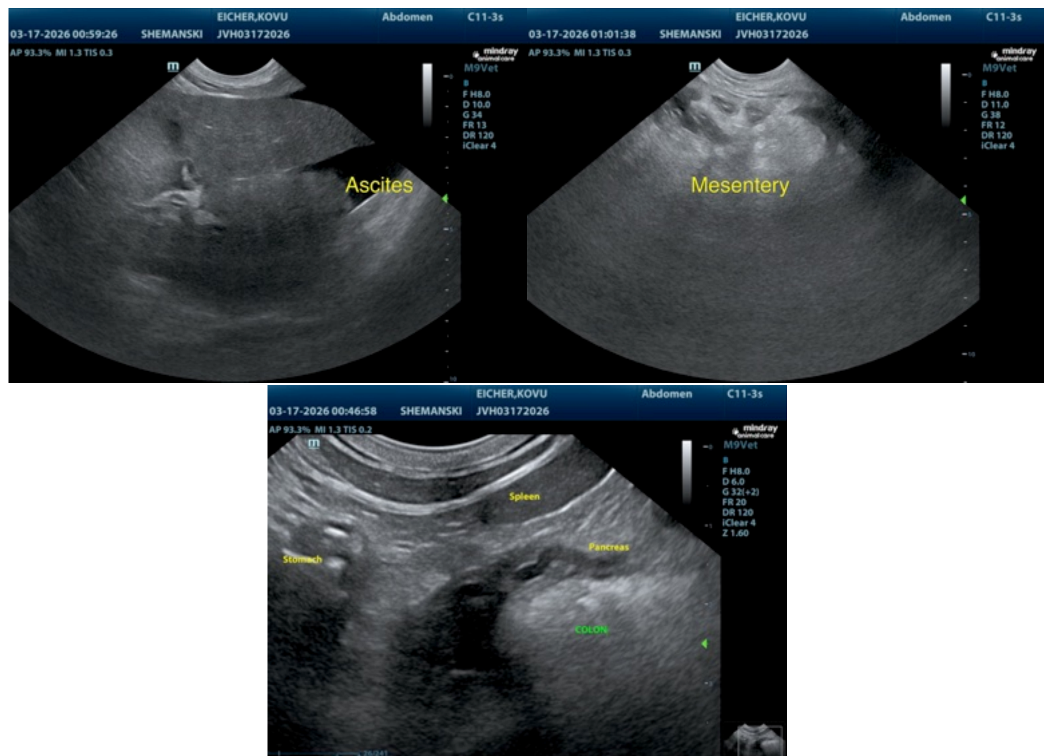
Dr. Hauschildt

INVOICE

73470

DATE

3/17/26



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