



PATIENT

Poe Lebahn

SPECIES

Feline

BREED

Dometic Shorthair

SEX

Neutered male

AGE

16 years

WEIGHT

11.69 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Harbord

HOSPITAL NAME

Animal Care Center VC

REFERRING VET

Dr. Harbord

INVOICE

73785

DATE

3/24/26

PRESENTING CLINICAL SIGNS

- PATIENT PRESENTS FOR: 2 week hx of v/d
- Current Medications: Cosequin SID, Gabapentin 50mg BID (PRN for arthritis pain)
- Diet: Hills SD, no changes / Appetite: wnl
- Progressive weight loss w/ muscle atrophy (3/24/26 #11.69, 2/13/26 #12.38, 11/11/24 #14.81)
- Abdomen: pendulous, doughy abdomen. does not appreciate palpation.
- Oral: pale/pink m.m / tacky
- Heart: newly noted HM- 3/6 L systolic heart murmur. tachycardic
- GI: O brought in soft-formed stool sample. no digital rectal performed. initially diarrhea but over the last 48 hours, has become more normal according to O. Vomiting episodes continuing, 1-2x / day for the last 1-2 weeks.
- 3/24/25- Senior BW and Fecal O/P - pending (collected today) 2/13/26: SDMA 22[^] 11/4/25: Senior Profile: CBC wnl / Chem SDMA 19[^], BUN 32 (wnl), Crea 1.6 (wnl) / USG 1.015 / T4 3 (wnl)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

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 3.8 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** 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 0.7 cm in width.



PATIENT

Poe Lebahn

SPECIES

Feline

BREED

Dometic Shorthair

SEX

Neutered male

AGE

16 years

WEIGHT

11.69 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Harbord

HOSPITAL NAME

Animal Care Center VC

REFERRING VET

Dr. Harbord

INVOICE

73785

DATE

3/24/26

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.

Gastrointestinal

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. Thickening of the small intestine (up to 0.4 cm) with no loss of layering, but with an increase in the muscularis to mucosa ratio, normal 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

Enlarged mesenteric lymph nodes measuring up to 1.3 x 2.9 cm in size with a hypoechoic appearance and an irregular shape.

Hyperechoic appearance of the mesentery surrounding the lymph nodes. .

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Enteropathy.
- Mesenteric lymphadenomegaly.
- Age related renal changes versus early chronic kidney disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the enteropathy would be parasitic enteritis, dietary hypersensitivity and inflammatory bowel disease with lymphoma an important differential diagnosis.

Etiologies for the mesenteric lymphadenomegaly would be reactive hyperplasia, lymphadenitis with infiltrative neoplasia an important differential diagnosis.



PATIENT

Poe Lebahn

SPECIES

Feline

BREED

Dometic Shorthair

SEX

Neutered male

AGE

16 years

WEIGHT

11.69 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Harbord

HOSPITAL NAME

Animal Care Center VC

REFERRING VET

Dr. Harbord

INVOICE

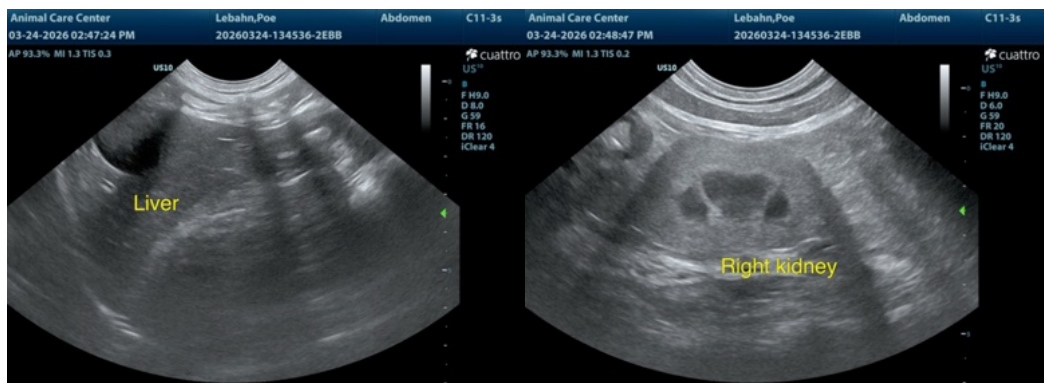
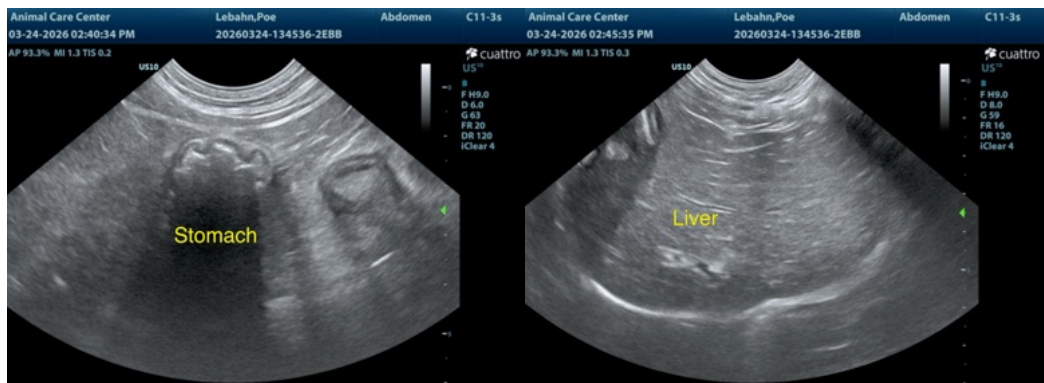
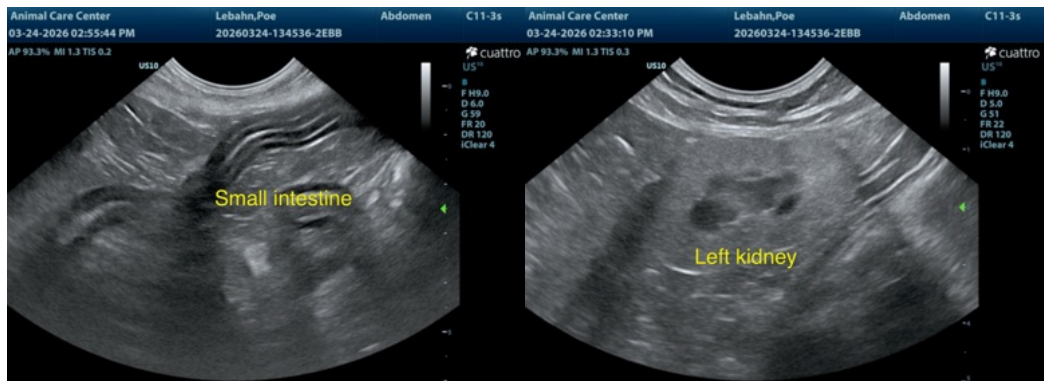
73785

DATE

3/24/26

Initial further assessment would be FNA cytology of the mesenteric lymph nodes with additional diagnostics that can be considered cobalamin and folate assay and endoscopy of the upper GI tract with biopsies.

Specific therapy would be dependent on an etiological diagnosis.





PATIENT

Poe Lebahn

SPECIES

Feline

BREED

Dometic Shorthair

SEX

Neutered male

AGE

16 years

WEIGHT

11.69 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Harbord

HOSPITAL NAME

Animal Care Center VC

REFERRING VET

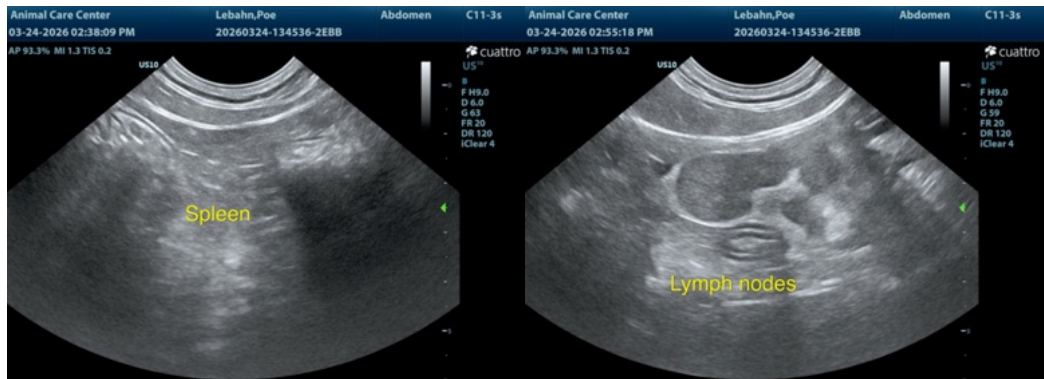
Dr. Harbord

INVOICE

73785

DATE

3/24/26



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