



PATIENT

Riley Clinton Rice

SPECIES

Feline

BREED

Siamese Mix

SEX

Neutered male

AGE

10 years

WEIGHT

9.15 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Cameron Johnson

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr. Johnson

INVOICE

77991

DATE

5/26/26

PRESENTING CLINICAL SIGNS

History: History of decreased appetite and weight loss. incidentally found free fluid while trying to obtain cysto. O financially limited and only able to perform AUS at this time. PE unremarkable.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small 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 3.5 cm, right measured 3.5 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

The left adrenal gland is normal in shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.9 cm in length x 0.28 cm in width. The right adrenal gland was not visualized.

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.

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.

Focal, hyperechoic mass in the caudal abdomen measuring 1.0 x 2.0 cm in size. Focal, hyperechogenic and nodular appearance of the mesentery.

ULTRASONOGRAPHIC FINDINGS

- Focal mesenteric inflammation.
- Abdominal mass.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the mesenteric inflammation would be steatitis, granulomatous disease and possibly emerging neoplasia such as abdominal carcinomatosis.

The most likely etiology for the hyperechogenic caudal abdominal mass would be steatitis with neoplasia and granulomatous disease a less likely differential diagnosis.

Although the visible section of the pancreas appears ultrasonographically normal, pancreatitis should still be considered with the focal mesenteric inflammation.

Further assessment would be FPL/PSL assay and FNA cytology of the focal mesenteric inflammation and the caudal abdominal mass.

Specific therapy would be dependent on an etiological diagnosis.



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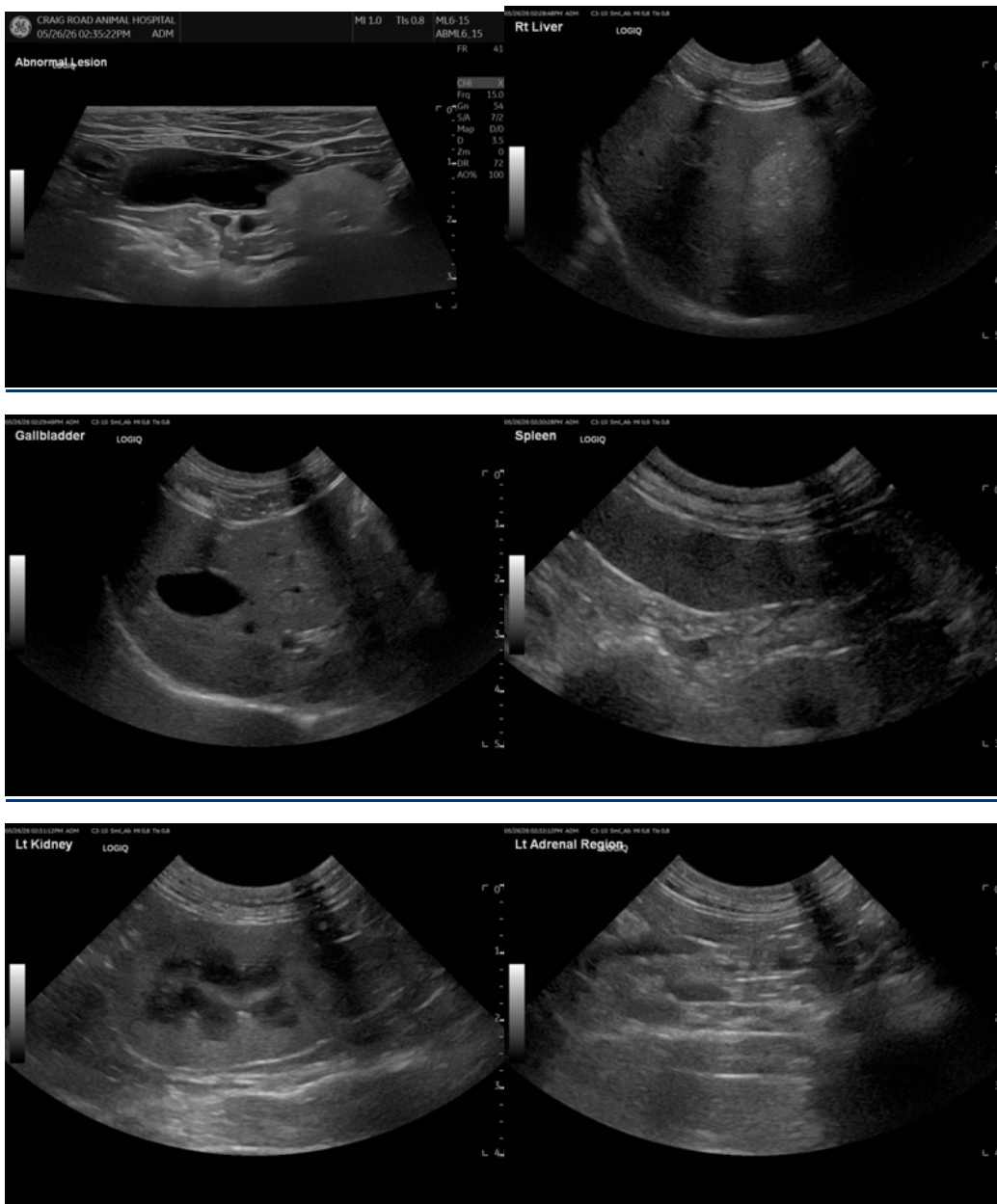
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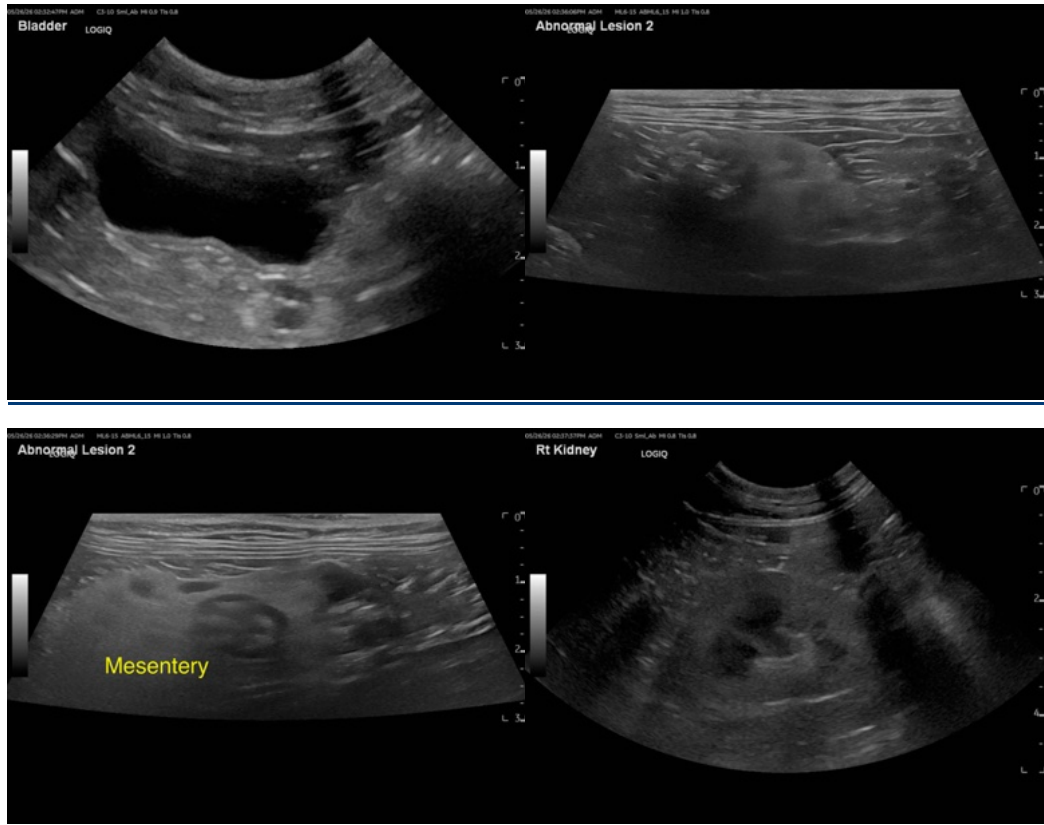
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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