



PATIENT **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Izzy Prough History: History of vomiting several times/day since January. Has been hungry and had weight loss. Large volume of feces during defecation. On transdermal thyroid medication. Has not been grooming as well. System examined: PE fairly unremarkable with exception of suspected FORL left lower arcade. MM pink, reasonable hydration. Mild seborrhea diffusely.

SPECIES

Feline Abnormal PE/Chem/CBC/UA Results: Chem 17 - no longer azotemic with normal Phos. normoglycemia present as well. ALT and ALKP elevated (not previously elevated)

BREED *Urinary System*

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

SEX

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Spayed Female

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

AGE

12 years

Normal renal size (left 3.80 cm / right 3.70 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.

WEIGHT

10.92 lbs

Adrenal Glands

Poorly 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.

INTERPRETED BY

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

Liver

Enlarged with rounded edges, diffuse echogenic appearance, loss of portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature. Focal parenchymal cyst (1.80 cm) containing small amount of hyperechogenic sediment.

IMAGING PERFORMED BY

Chaley Hunt, LVT

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.

HOSPITAL NAME

Columbia AC

Gastrointestinal

Normal appearance of the stomach, duodenum, jejunum 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.

REFERRING VET

Dr. Susan Sayles

Pancreas

Normal size with a diffused increased echogenic appearance and regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

INVOICE

13342

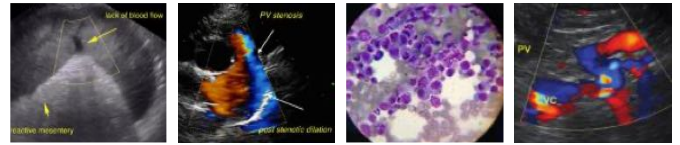
Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

DATE

6.14.23



PATIENT

Izzy Prough

ULTRASONOGRAPHIC FINDINGS

Primary Findings

SPECIES

Feline

- Hepatopathy
- Pancreatic fibrosis versus chronic pancreatitis

BREED

DSH

Primary Findings

- Hepatic cysts.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Spayed Female

Etiologies for the hepatopathy would be cholangiohepatitis complex, lipidosis, metabolic disease secondary to the hyperthyroidism, granulomatous, hepatitis, and infiltrative neoplasia.

AGE

12 years

Further assessment would be fPLI/PSL assay and FNA cytology of the liver. Percutaneous drainage of the cysts can also be considered and submitted for cytology and culture.

WEIGHT

10.92 lbs

Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be Ursodiol.

INTERPRETED BY

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

IMAGING PERFORMED BY

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

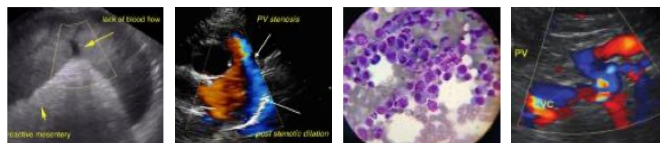
Dr. Susan Sayles

INVOICE

13342

DATE

6.14.23



PATIENT

Izzy Prough

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 years

WEIGHT

10.92 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

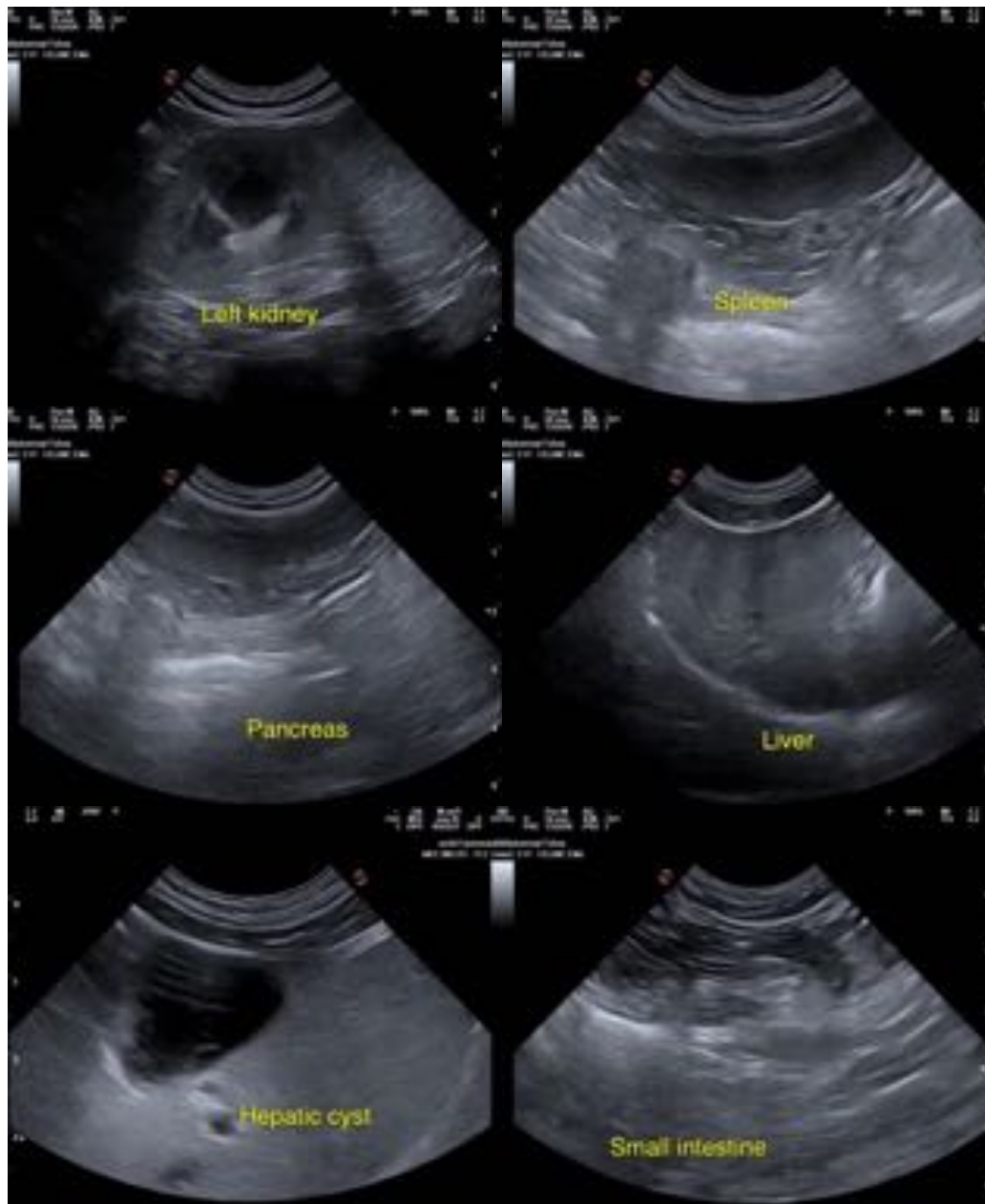
Dr. Susan Sayles

INVOICE

13342

DATE

6.14.23



The information and recommendations provided are based on the images presented by the referring veterinarian. 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