



PATIENT PRESENTING CLINICAL SIGNS

CAMINO PAPA
SPECIES History: Was diagnosed with IBD (U/S and biopsy) in 2017. Has done well with hypoallergenic diet. Recently seems to be vomiting more frequently, a few times a week. Appetite has decreased slightly. No diarrhea.

FELINE
BREED Abnormal PE/Chem/CBC/UA Results: Resorptive tooth lesion 104. Weight loss 1# in 4 months. Bloodwork and urinalysis are normal. Pending urine culture (after seeing echogenic debris in urinary bladder).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

DSH

SEX *Urinary System*

Neutered Male The urinary bladder is full with a normal thickness and smooth appearance of the wall. Moderate amount of floating hyperechoic sediment sediment present. No uroliths evident.

AGE

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

12 years

WEIGHT

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

11.3 lbs

INTERPRETED BY

Normal renal size (left kidney 3.40 cm) (right kidney 3.30 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.

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

Adrenal Glands

Poorly visualized but appear to be of normal shape, echogenic appearance and size.

IMAGING PERFORMED BY

Spleen

Normal size (measuring 0.80 cm) 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.

Devon Papa, CVT

HOSPITAL NAME

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

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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.

Michelle Bartus

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. Prominent hypoechogenic appearance of the submucosal layer with an increased ratio of the muscularis: mucosa ratio, with normal wall thickness, no loss of layering, normal peristaltic activity and no distention of the lumen.

INVOICE

13923

DATE

Pancreas

Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

8.2.23

Free Abdomen

Normal mesenteric lymph nodes.



PATIENT

No ascites evident.

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Enteropathy

Secondary Findings

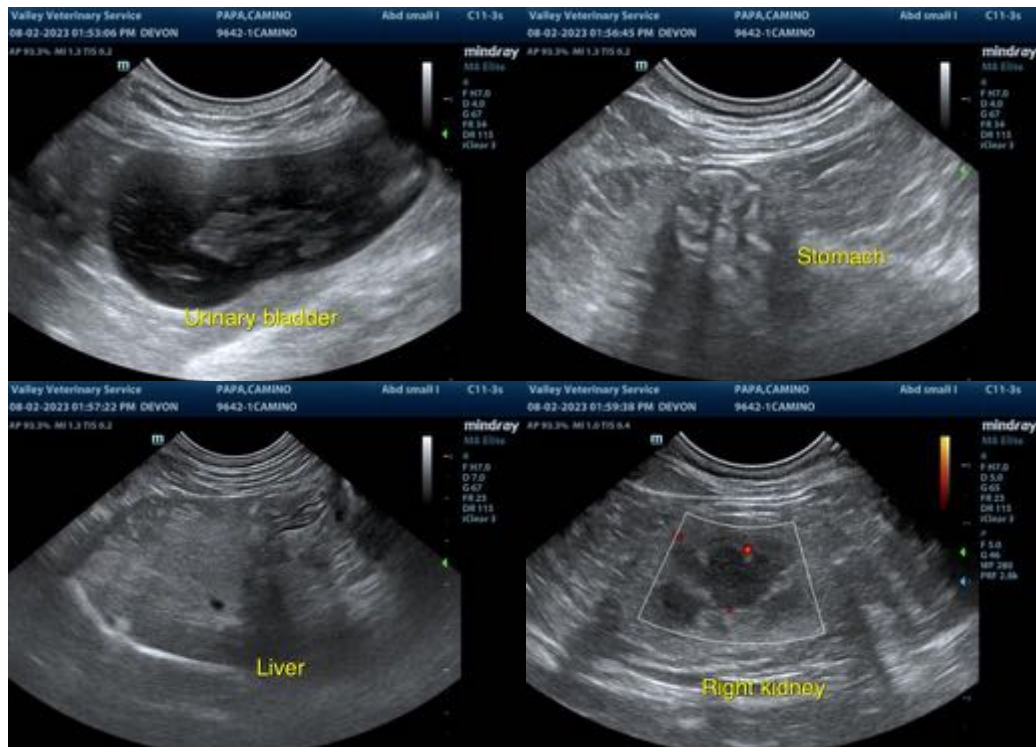
- Urinary bladder sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the small intestine is consistent with inflammatory bowel disease, as with the previous diagnosis, with parasitic enteritis a differential diagnosis, and emerging lymphoma or granulomatous enteritis, highly unlikely differential diagnoses.

Further assessment would be fecal endoscopy and cobalamin assay. Endoscopy of the upper GI tract with biopsies could be considered.

Specific therapy would be dependent on an etiological diagnosis. Ongoing management would be to continue with a hypoallergenic diet, cobalamin supplementation, course of Fenbendazole, and possibly prednisolone.





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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