



PATIENT

Bella Patrick

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

7.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ginny Dodd, DVM

HOSPITAL NAME

City Vet Marvin

REFERRING VET

Dr. Moore

INVOICE

71284

DATE

2/5/26

PRESENTING CLINICAL SIGNS

- Weight loss, chronic watery diarrhea for past 6 months, compliance on hypoallergenic diets has been poor, no improvement on 5 mg Prednisone daily
- PE: no palpable abdominal masses Sedation with Torb/Ace, then Alfaxzone CBC/Superchem14/T4 WNL, fecal-neg

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 is noted.

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 3.1 cm, right measured 3.4 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 1.0 cm in length x 0.25 cm and 0.42 cm in width. The right adrenal gland measured 1.2 cm in length x 0.36 cm and 0.36 cm in width.

Spleen

The spleen is diffusely enlarged measuring 1.6 cm in width with a hypoechogenic appearance, but maintained a smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident.

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, 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. Normal thickness of the small intestine (up to 0.28 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. The stomach measured 0.54 cm, duodenum measured 0.35 cm, colon measured 0.2 cm.

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. The left pancreas measured 0.6 cm in width.

Free Abdomen

Prominent mesenteric lymph nodes measuring up to 0.4 x 0.7 cm in size with a hypoechogenic appearance and a rounded shape.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Splenomegaly.
- Mesenteric lymphadenomegaly.
- Enteropathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

With the splenomegaly, lymphadenomegaly and enteropathy, the most likely diagnosis would be lymphoma with granulomatous disease a less likely differential diagnosis.

Further assessment would be FNA cytology of the spleen and the lymph nodes.

Specific therapy would be dependent on an etiological diagnosis.



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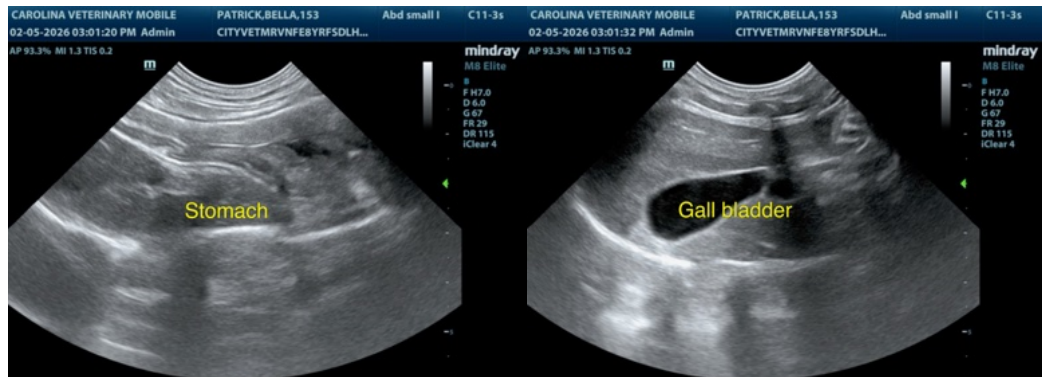
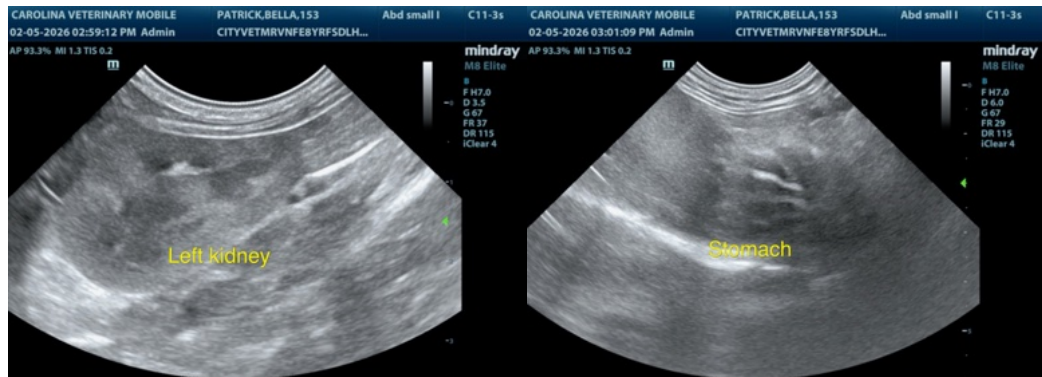
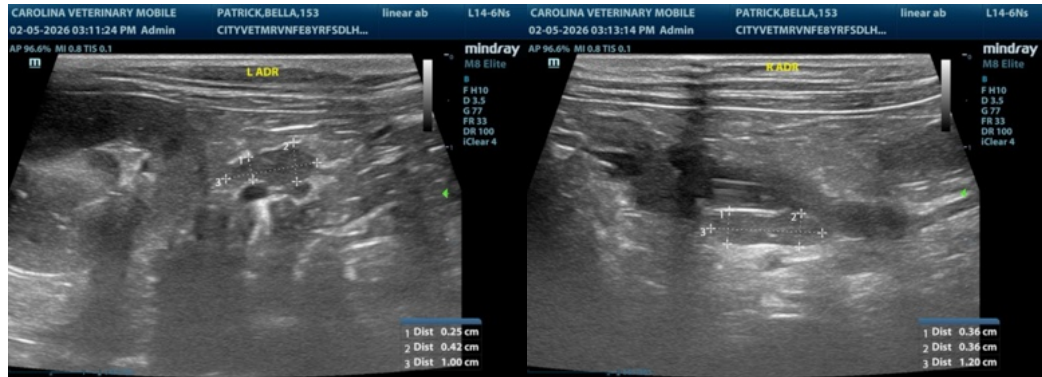
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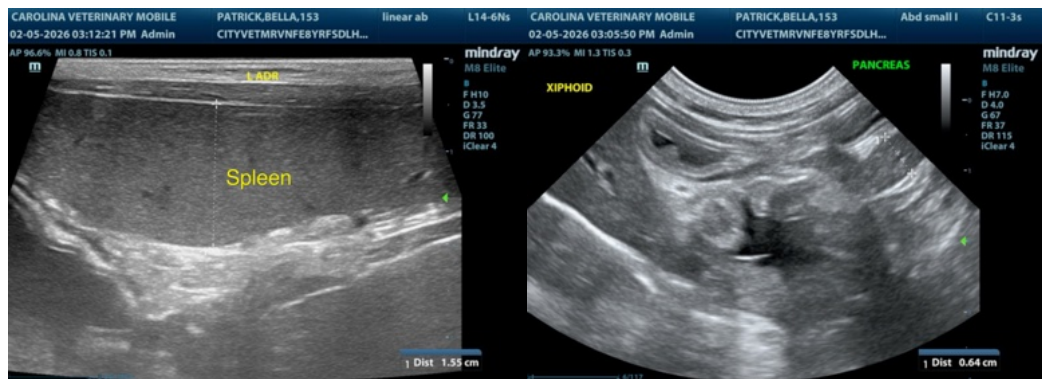
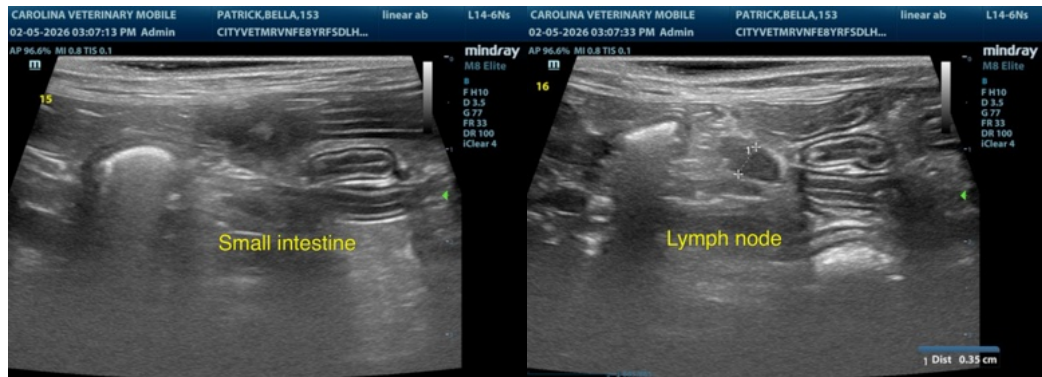
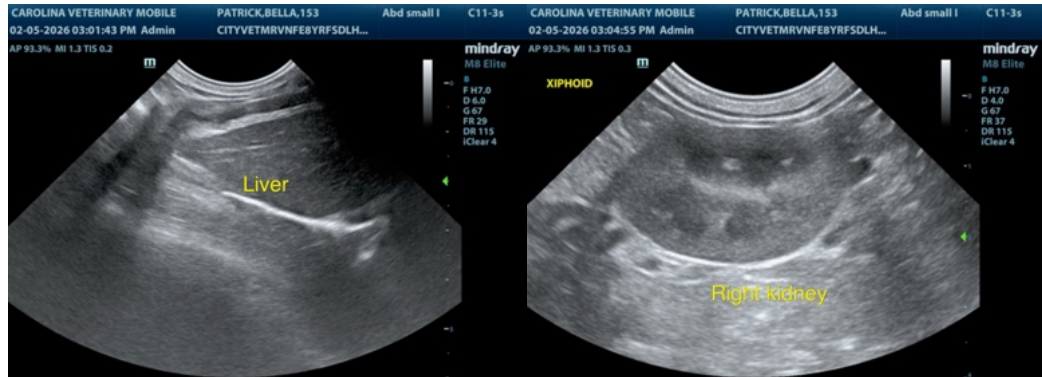
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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