Report Requested By
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Report Provided By
Friendship Radiology
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TVC-CASE-1035949
Xander (Clesi)
Cat | simese mix | 12 years and 1 day | Male (Neutered)

Finalized : 04-18-2026
Submitted : 04-17-2026

Ultrasound consult, up to 60 (images and cineloops)

Clinical History

Number of Images Submitted

48

Anatomy/Area of Interest

abdomen

Brief History

Well managed diabetic cat with a history of chronic pancreatitis. Recently he has been nauseous and required daily mirtazapine and zofran to control his symptoms and help with his appetite. He has also had a few hairballs and smaller, harder stools. Bloodwork pending. Currently eats fancy feast low carb pate

Report

Imaging Findings

48 ultrasound images and cineloops are available for interpretation.

The liver is moderately enlarged with rounded capsular contour. The gallbladder wall is hyperechoic and mildly thickened.

A rounded, non-shadowing hyperechoic nodule is noted in the mid body of the spleen. The size and shape of the spleen are normal.

The kidneys are irregular and the renal parenchyma is hyperechoic with reduced corticomedullary distinction. The urinary bladder contains a small volume of suspended hyperechoic debris

A small multi-lobular structure, with a hyperechoic interface and strong distal acoustic shadow, is noted in the gastric lumen.

The imaged portion of the pancreas (adjacent to the gastric fundus) is inhomogeneous and subjectively hypoechoic.

Few mid and cranial abdominal lymph nodes are mildly thickened and hypoechoic. Within the caudal abdomen, lateral to the urinary bladder, there are two hypoechoic structures likely representing caudal mesenteric (left colic) lymph nodes.

The structure labeled the right adrenal gland is above normal limits for a normal adrenal gland (5mm).

The left adrenal gland and imaged small and large bowel are within normal limits.

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Imaging Diagnosis

Mild, multi-centric lymphadenopathy, which may represent a reactive vs early infiltrative process.

Moderate, generalized hepatomegaly. Differential diagnoses include: related to diabetes, chronic hepatitis/cholangiohepatitis, hepatic lipidosis, or lymphoma.

Chronic non-specific nephropathy with cortical infarctions.

Inhomogeneous and subjectively hypoechoic pancreas may represent chronic/historic pancreatitis, nodular hyperplasia, and/or normal patient variation. Mild or emerging acute pancreatitis is not excluded.

Suspect small gastric foreign body; consider a trichobezoar.

Solitary benign splenic myelolipoma.

Recommendations

A follow-up ultrasound is recommended to monitor these findings, especially the lymphadenopathy. Tissue sampling of the liver can be considered if there is concern for hepatic dysfunction. An internal medicine consultation may also be warranted.

Signed

Thank you for using Friendship Radiology. If you have any questions, please email me at elyshia@friendshipradiology.com or call 202.567.2085 (veterinarian use only).



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