

**Table S2. Clinical characteristics of cats enrolled in the study**

Diagnosis	No. (%) of cats	Medical history and clinical presentation	Laboratory and image diagnostic tests
Healthy	11 (22.4)	No clinical signs.	Complete blood cell count and clinical chemistry within reference intervals.
Diabetes mellitus (DM)	9 (18.4)	Ongoing glargine therapy and no clinical signs at presentation.  DM diagnosed at least 1 month before based on polyuria and polydipsia and glycosuria and fructosamine concentration > 400 $\mu\text{mol/L}$	Complete blood cell count and clinical chemistry within reference intervals and fructosamine concentration < 450 $\mu\text{mol/L}$ at presentation.
Pancreatitis (FP)	10 (20.4)	Apathy and anorexia present from less than 3 days; vomiting (in 2 cats), diarrhea (in 1 cat).	fPLI >5.3 $\mu\text{g/L}$ .  No other diseases which could account for cats' condition.  Concurrent DM in 6 cats.
Acute kidney injury (AKI)	5 (10.2)	Apathy and anorexia; vomiting.	Creatinine >2.5 mg/dL.  Concurrent DM in 2 cats.  Concurrent FP (fPLI >5.3 $\mu\text{g/L}$ ) in 4 cats.
Neoplastic disease: 2 liver tumors, 1 pancreatic tumor and 1 adrenal gland tumor	4 (8.2)	Apathy and anorexia; emaciation.	Histopathology from the exploratory surgery (2 cats) or autopsy (2 cats).

			<p>Concurrent AKI (creatinine = 8 mg/dL), DM, and FP (fPLI = 22.7 µg/L) in a cat with adrenal gland tumor.</p> <p>Concurrent DM in 1 cat with hepatic tumor and 1 cat with pancreatic tumor.</p>
Acute cholangiohepatitis	2 (4.1)	Apathy and anorexia; vomiting; jaundice (1 cat).	<p>ALT &gt;200 and ALP &gt;300 (2 cats); total bilirubin &gt;1 mg/dL (in 1 cat).</p> <p>Ultrasonographic features of the liver inflammation (2 cats).</p>
Undefined general infection	2 (4.1)	Apathy and anorexia; fever >39.5°C.	<p>WBC &gt;19 G/L and fPLI &lt;5.3 µg/L</p> <p>No other diseases which could account for cat's condition.</p>
Immune-mediated hemolytic anemia (IMHA)	1 (2.0)	Apathy and anorexia; jaundice.	<p>Severe anemia (Ht = 21%) and hyperbilirubinemia (21.3 mg/dL).</p> <p>AKI (creatinine = 3.4 mg/dL).</p> <p>FP (fPLI = 23.8 µg/L).</p>
Hyperthyroidism	1 (2.0)	Anorexia, vomiting, diarrhea, emaciation.	Total thyroxine concentration >65 nmol/L.
Aortic thromboembolism	1 (2.0)	Shock, no pulse palpable on both femoral arteries.	<p>Increased CPK (59700 U/L) and LDH (2830 U/L).</p> <p>Hypertrophic cardiomyopathy in the echocardiography.</p>
High-rise syndrome (HRS)	1 (2.0)	Fall from the 5 <sup>th</sup> floor.	Concurrent FP (fPLI = 6.8 µg/L; hemorrhagic pancreas in the autopsy).

Panleukopenia	1 (2.0)	No anti-FPV vaccination in medical history; apathy and anorexia; vomiting, hemorrhagic diarrhea.	Leukopenia (WBC = 0.6 G/L), neutropenia (neutrophil count = 0.2 G/L), lymphopenia (lymphocyte count = 0.4 G/L). Positive in-clinic FPV test. Concurrent FP (fPLI = 14.8 µg/L).
Feline infectious peritonitis (FIP)	1 (2.0)	Ascites. Thick, sticky, yellowish fluid obtained by the abdominocentesis.	High protein concentration in the abdominal fluid. Positive RT-PCR for feline coronavirus in the fluid.