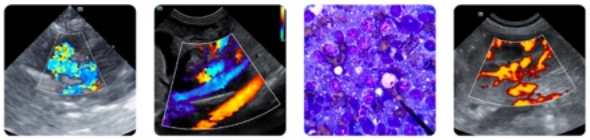


PATIENT

Ashe Corbett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

3 years

WEIGHT

11 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Christina Miller, DVM

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Miller

INVOICE

72269

DATE

3/5/26

PRESENTING CLINICAL SIGNS

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is predominantly anechoic with scant suspended echoes. The bladder neck and proximal urethra appear normal. There are no calculi and no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 3.52×2.28 cm, and the thickness of the cortex is 0.37 cm in the sagittal plane.

The right kidney is normal in shape and size: 3.37×2.46 cm, and the thickness of the cortex is 0.33 cm in the sagittal plane.

Both: The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. A mild medullary rim sign is present. There is no evidence of pyelectasia, nephroliths, or hydronephrosis.

Adrenal Glands

Both adrenal glands show normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane are within normal limits. The left adrenal gland measures 0.22 cm at the cranial pole and 0.25 cm at the caudal pole. The right adrenal gland measures 0.26 cm at the cranial pole and 0.27 cm at the caudal pole.

Spleen

Splenic thickness measures 0.64 cm. The parenchyma demonstrates normal echogenicity and a fine homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

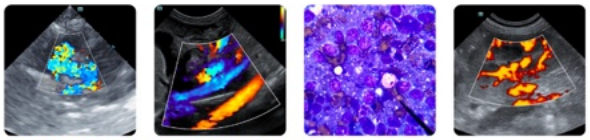
Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The hepatic parenchyma appears uniform and isoechoic relative to the falciform fat, with normal echotexture. No focal hepatic lesions are identified. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The wall is thin and the contents are primarily anechoic. No dilation of the cystic duct or common bile duct is observed.

Gastrointestinal

The stomach is mildly distended with residual ingesta and a small amount of fluid. Gastric wall thickness measures 1.43 mm with preserved wall layering.



PATIENT

Ashe Corbett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

3 years

WEIGHT

11 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Christina Miller, DVM

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Miller

INVOICE

72269

DATE

3/5/26

The duodenum measures 1.22 mm, the jejunum 1.21 mm, and the ileum 1.31 mm. Wall layering is preserved throughout the evaluated small intestinal segments.

The ileocecal junction was not visualized.

All evaluated small intestinal segments contain a mild amount of intraluminal fluid without evidence of obstruction, foreign material, or ileus. Intestinal peristalsis appears mildly increased.

The colon measures 0.88 mm. A small amount of fecal material is present in the descending colon, while the remaining colonic segments appear largely empty.

Pancreas

The evaluated pancreatic regions do not show ultrasonographic evidence of inflammation or focal pancreatic lesions.

Peritoneal Cavity

No abdominal effusion or ultrasonographic evidence of peritonitis is observed. Cranial mesenteric lymph nodes measure 4.04–6.32 mm. Ileocecal lymph nodes are not clearly visualized, although the surrounding region appears unremarkable. The iliac trifurcation appears normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Mild gastric and small intestinal fluid content with mildly increased peristalsis

SECONDARY FINDINGS

- Mild medullary rim sign.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gastrointestinal tract demonstrates mild intraluminal fluid within the small intestine with mildly increased peristalsis. This pattern is most consistent with mild gastrointestinal upset or acute enteritis. No ultrasonographic evidence of gastrointestinal obstruction, linear foreign body, or focal intestinal disease is identified.

The pancreas appears within normal ultrasonographic limits, with no findings supportive of pancreatitis.

The urinary bladder contains mild suspended echogenic material, which may represent benign urinary sediment or concentrated urine.

The remaining abdominal organs are unremarkable.

Overall, the examination is most compatible with mild, likely self-limiting gastrointestinal disease.

PATIENT

Ashe Corbett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

3 years

WEIGHT

11 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Christina Miller, DVM

HOSPITAL NAME

Seven Fields VH

REFERRING VET

Dr. Miller

INVOICE

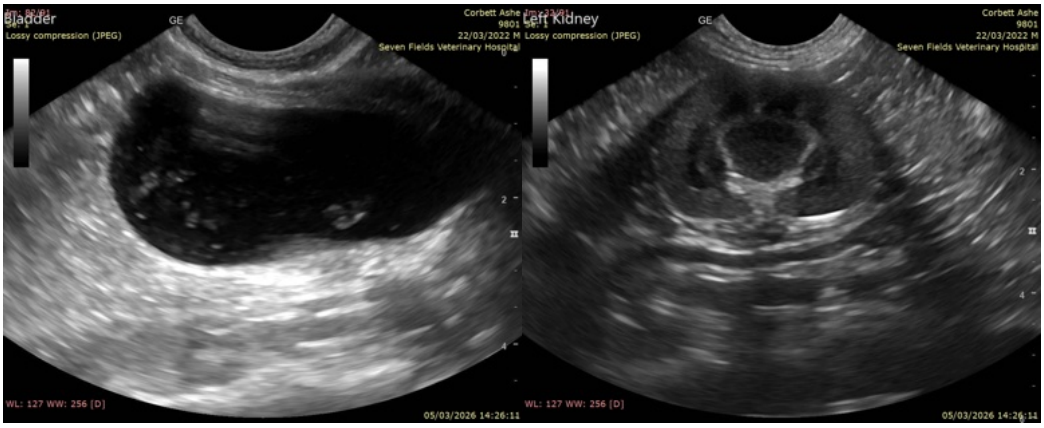
72269

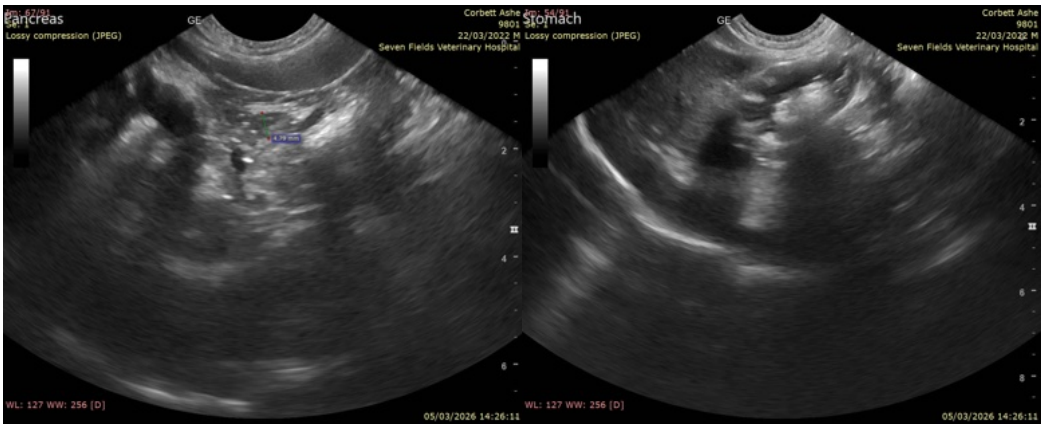
DATE

3/5/26

Recommendations

- Correlation with clinical signs is recommended, as the findings may be compatible with mild acute gastroenteritis.
- Symptomatic medical management and clinical monitoring may be considered at the discretion of the attending veterinarian.
- If clinical suspicion for pancreatitis persists, measurement of feline pancreatic lipase (fPL) may be considered, as ultrasonography can have limited sensitivity for detecting mild or early pancreatitis in cats.





PATIENT

Ashe Corbett

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

3 years

WEIGHT

11 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Christina Miller, DVM

HOSPITAL NAME

Seven Fields VH

REFERRING VET

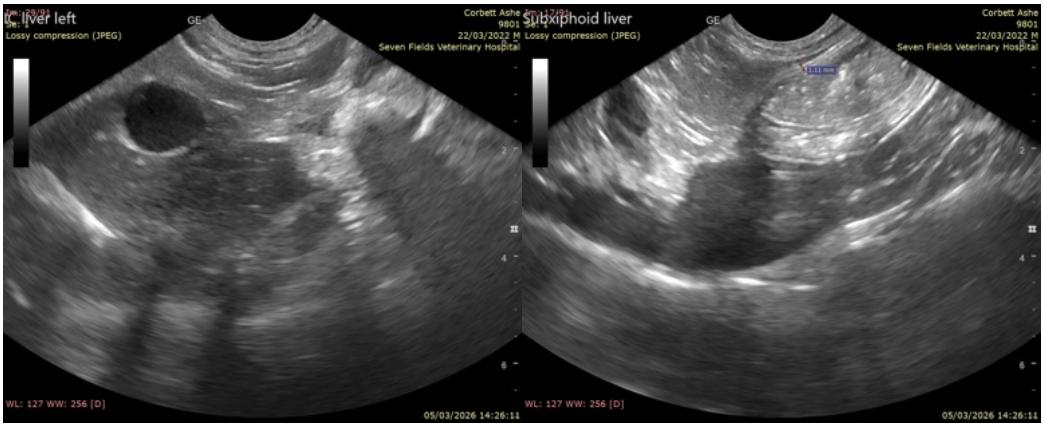
Dr. Miller

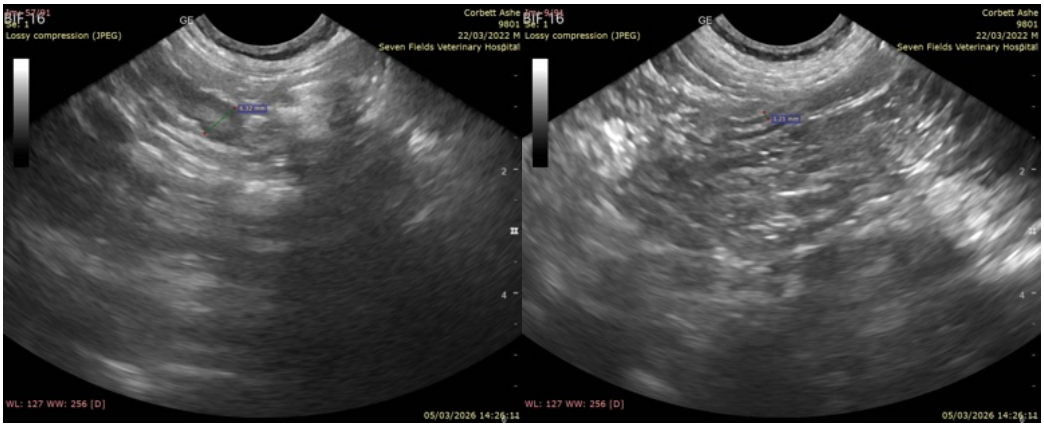
INVOICE

72269

DATE

3/5/26





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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

info@SonoPath.com