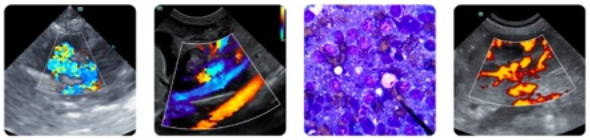


PATIENT

Tap Broadway Baby Keenan

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

15 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Sorbo

HOSPITAL NAME

JM Pet Resort & Veterinary Clinic

REFERRING VET

Dr. Shetty

INVOICE

75546

DATE

5/14/26

PRESENTING CLINICAL SIGNS

History: Presented for general wellness with no specific concerns except for moderately overweight.
Abnormal PE/Chem/CBC/UA Results: Presented for general wellness with no specific concerns except for moderately overweight.

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. Normal appearance of the bladder neck and proximal urethra. There are no calculi and no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 3.52×1.99 cm, and the thickness of the cortex is 0.34 cm in the sagittal plane. The right kidney is normal in shape and size: 3.97×2.37 cm, and the thickness of the cortex is 0.32 cm in the sagittal plane. Both kidneys: The renal cortices are isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis. Color Doppler demonstrates a normal vascular pattern.

Adrenal Glands

Both adrenal glands show normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane: The left adrenal gland measures 0.35 cm at the cranial pole and 0.32 cm at the caudal pole. The right adrenal gland measures 0.37 cm at the cranial pole and 0.33 cm at the caudal pole.

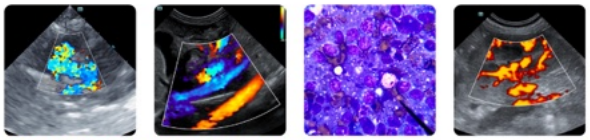
Spleen

Splenic thickness is 0.87 cm. The parenchyma demonstrates normal echogenicity and 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 liver parenchyma looks uniform and isoechoic compared to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The wall is thin and smooth, and the contents are primarily anechoic. No cholelithiasis or biliary sludge is identified. The cystic duct and common bile duct are not abnormally dilated, with the common bile duct measuring 2.47 mm.



PATIENT

Tap Broadway Baby Keenan

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

15 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Sorbo

HOSPITAL NAME

JM Pet Resort & Veterinary Clinic

REFERRING VET

Dr. Shetty

INVOICE

75546

DATE

5/14/26

Gastrointestinal

The stomach is empty and folded, with mural thickness measuring 1.47 mm and preserved wall layering.

The pylorus is partially visualized without evident mural abnormality. The duodenum measures 1.51 mm in thickness. The jejunum measures 2.14 mm, with the following wall layer measurements: mucosa 0.93 mm, submucosa 0.44 mm, and muscularis propria 0.53 mm. The muscularis-to-mucosa ratio is approximately 0.57.

The ileum measures 1.73 mm, with the following wall layer measurements: mucosa 0.66 mm, submucosa 0.81 mm, and muscularis propria 0.28 mm. Normal wall layering is preserved. The muscularis-to-mucosa ratio is approximately 0.42.

The ileocecal junction measures 2.59 mm in thickness, with the muscularis measuring 0.47 mm. No focal loss of wall layering, obstructive pattern, regional steatitis, or discrete mass lesion is identified.

No sonographic evidence of gastrointestinal ileus, mechanical obstruction, or foreign material is identified.

The colon measures 1.17 mm in thickness and contains formed fecal material within the descending segment.

Pancreas

The evaluated pancreatic regions do not show evidence of overt inflammation or neoplastic disease.

Free Abdomen

No sonographic evidence of abdominal effusion, peritonitis, or lymphadenomegaly is identified. The iliac trifurcation is normal.

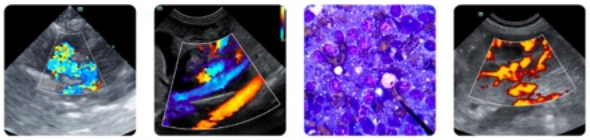
PRIMARY FINDINGS

- Mild relative thickening of the jejunal muscularis layer, with a jejunal muscularis-to-mucosa ratio of approximately 0.57.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Mild diffuse prominence of the jejunal muscularis layer, with preserved wall layering and no associated obstructive pattern, focal mass, mesenteric inflammatory change, or abdominal lymphadenopathy. In cats, this appearance may be seen with mild chronic enteropathy or low-grade chronic inflammatory change; however, mild muscularis prominence can also represent an incidental or clinically insignificant finding, particularly in overweight or otherwise asymptomatic cats.

The relatively mild degree of change, preserved intestinal architecture, absence of associated secondary abnormalities, and lack of gastrointestinal clinical signs make clinically significant infiltrative disease poorly supported ultrasonographically in this case.



PATIENT

Tap Broadway Baby Keenan

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

15 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Sorbo

HOSPITAL NAME

JM Pet Resort & Veterinary Clinic

REFERRING VET

Dr. Shetty

INVOICE

75546

DATE

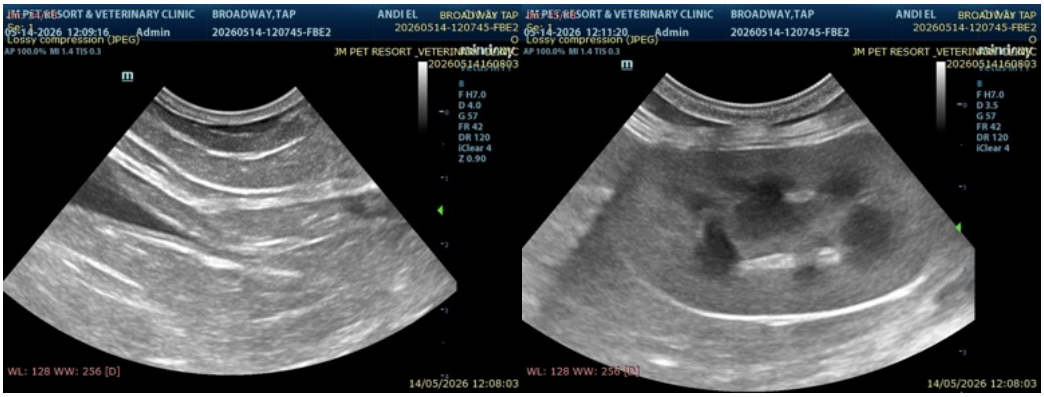
5/14/26

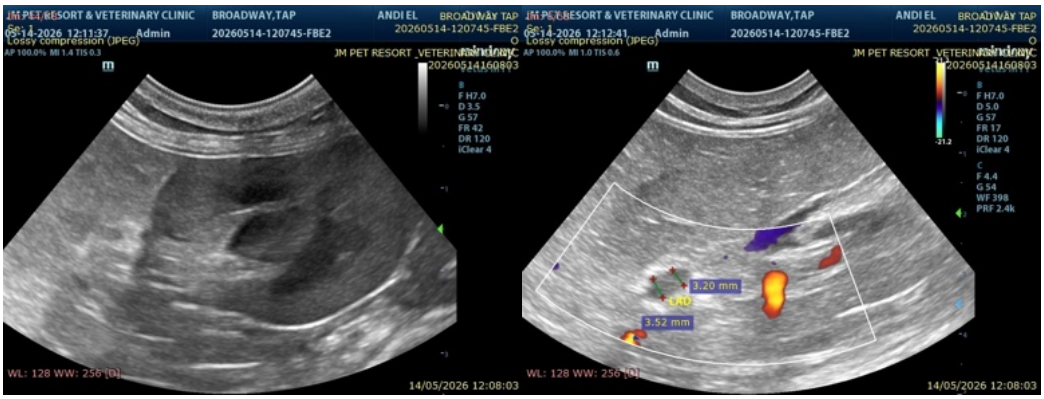
The remainder of the abdominal ultrasound examination is unremarkable.

Recommendations

- Correlation with clinical signs, body condition, appetite history, stool quality, and laboratory findings is recommended, as mild chronic intestinal ultrasonographic changes may be incidental in some clinically stable cats.
- If gastrointestinal signs develop or progress over time, consideration could be given to serum cobalamin/folate testing, fecal evaluation, diet trial, and repeat abdominal ultrasound monitoring.
- At this stage, invasive gastrointestinal sampling does not appear strongly indicated based on the ultrasonographic findings alone unless clinically warranted by future progression or additional abnormalities.

Final diagnostic and therapeutic decisions should be made by the attending veterinarian, who can best integrate these findings with the patient's clinical status.





PATIENT

Tap Broadway Baby Keenan

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

15 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Sorbo

HOSPITAL NAME

JM Pet Resort & Veterinary Clinic

REFERRING VET

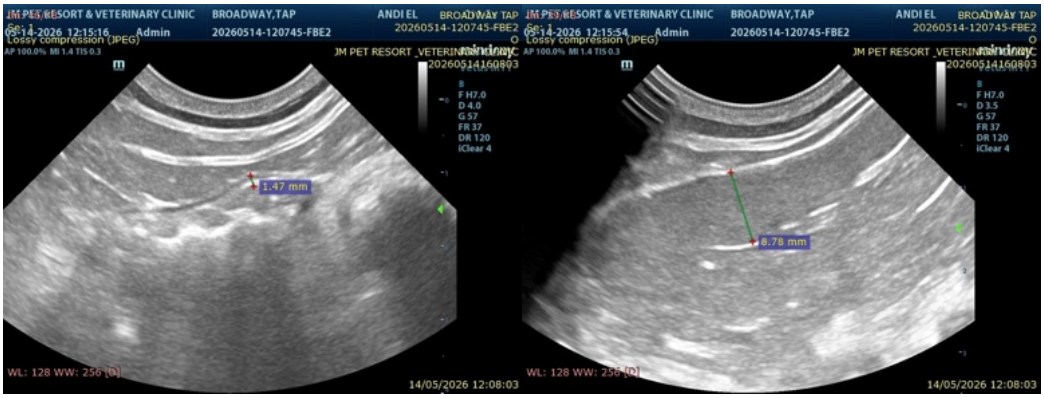
Dr. Shetty

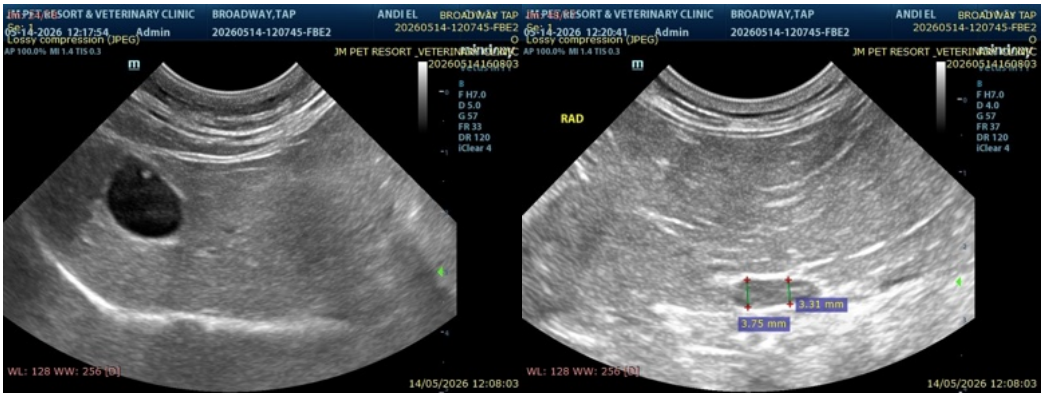
INVOICE

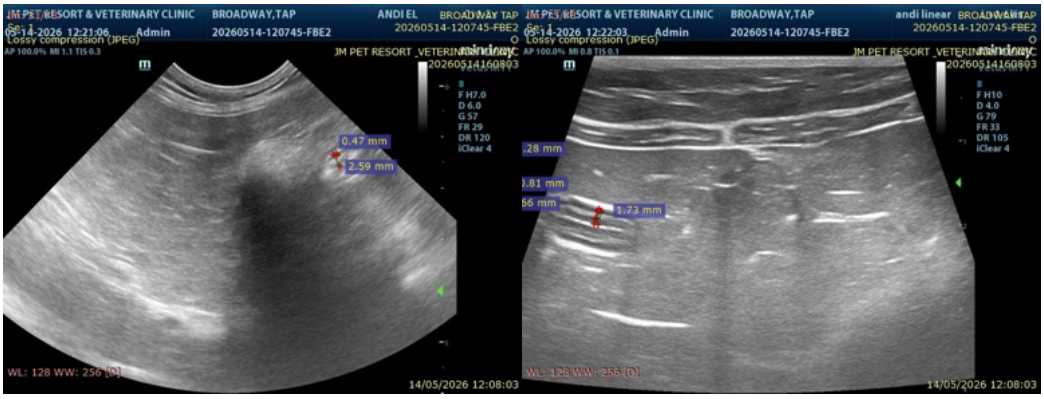
75546

DATE

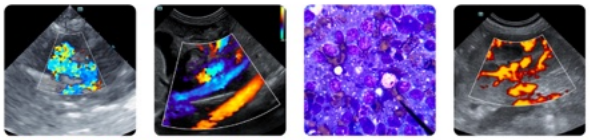
5/14/26







SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Tap Broadway Baby Keenan

SPECIES

Feline

BREED

Domestic Longhair

SEX

Spayed female

AGE

8 years

WEIGHT

15 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Sorbo

HOSPITAL NAME

JM Pet Resort & Veterinary Clinic

REFERRING VET

Dr. Shetty

INVOICE

75546

DATE

5/14/26

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.

info@SonoPath.com