



PATIENT

Lilah Penera

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

15 years

WEIGHT

9.5 lbs

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Lexi Naylor

HOSPITAL NAME

Malletts Bay VH

REFERRING VET

Dr. Naylor

INVOICE

78203

DATE

6/1/26

PRESENTING CLINICAL SIGNS

History: O brought P in on 05/13 for vomiting and inappetence. renal panel/qPL checked that day WNL - gave supportive care and P returned 05/18 for same issues, seemed to have resolved after initial appt. repeated SQF and P seemed to do well, but today P came in again (urgently) since has been lethargic/yowling/hiding since last appt
Abnormal PE/Chem/CBC/UA Results: no BW/UA d/t financial constraints. prev AXR (05/18) indicated gas distension of small intestine but otherwise unremarkable

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder lumen is normally distended, and the urinary bladder wall appears thin and smooth. The urine is anechoic. Normal appearance of the bladder neck and proximal urethra. There are no calculi and no sonographic evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size, measuring 3.69×1.84 cm, with a cortical thickness of 0.36 cm in the sagittal plane. The right kidney is normal in shape and size, measuring 3.85×2.13 cm, with a cortical thickness of 0.39 cm in the sagittal plane. Both kidneys demonstrate cortical echogenicity that is isoechoic to the hepatic parenchyma. The corticomedullary ratio is normal, and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

Adrenal Glands

Both adrenal glands show normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane: The left adrenal gland measures 0.26 cm. The right adrenal gland measures 0.25 cm.

Spleen

Splenic thickness is 0.79 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 the contents are primarily anechoic. No evident dilation of the cystic duct or common bile duct is observed.



PATIENT

Lilah Penera

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

15 years

WEIGHT

9.5 lbs

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Lexi Naylor

HOSPITAL NAME

Malletts Bay VH

REFERRING VET

Dr. Naylor

INVOICE

78203

DATE

6/1/26

Gastrointestinal tract

The stomach is empty and folded, with a mural thickness of 1.48 mm and preserved wall layering.

The duodenum measures 1.65 mm, the jejunum 2.16 mm, and the ileum 2.14 mm. Wall layering is preserved throughout the examined intestinal tract. Within the jejunum, the mucosa measures 1.19 mm, the submucosa 0.41 mm, and the muscularis propria 0.19 mm. Within the ileum, the mucosa measures 0.91 mm, the submucosa 0.70 mm, and the muscularis propria 0.38 mm.

The muscularis-to-mucosa ratio is approximately 0.16 in the jejunum and 0.42 in the ileum, both within normal limits.

The ileocecolic junction could not be confidently visualized.

No sonographic evidence of gastrointestinal obstruction, ileus, foreign material, mural mass, or infiltrative intestinal disease is identified.

The colon measures 1.01 mm and contains formed fecal material within the descending colon.

Pancreas

The pancreas measures 4.43 mm in thickness. Pancreatic parenchyma is isoechoic to the adjacent omental fat. The pancreatic duct measures 0.53 mm in diameter. No peripancreatic fat hyperechogenicity, free fluid, or other sonographic evidence of pancreatitis is identified.

Free Abdomen

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

PRIMARY FINDINGS

- No sonographic evidence of gastrointestinal obstruction, infiltrative intestinal disease, pancreatitis, hepatobiliary disease, or other significant abdominal pathology is identified.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Intestinal wall thicknesses are within normal limits, wall layering is preserved, and the jejunal and ileal muscularis-to-mucosa ratios remain within normal limits. These findings do not support inflammatory bowel disease or small-cell lymphoma.

Overall, no structural ultrasonographic explanation for the patient's recurrent vomiting, inappetence, lethargy, or vocalization is identified. It should be recognized that a normal abdominal ultrasound examination does not exclude intermittent pancreatitis, functional gastrointestinal disease, nausea of nonstructural origin, or other disorders that may not produce detectable ultrasonographic abnormalities.



PATIENT

Lilah Penera

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

15 years

WEIGHT

9.5 lbs

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Lexi Naylor

HOSPITAL NAME

Malletts Bay VH

REFERRING VET

Dr. Naylor

INVOICE

78203

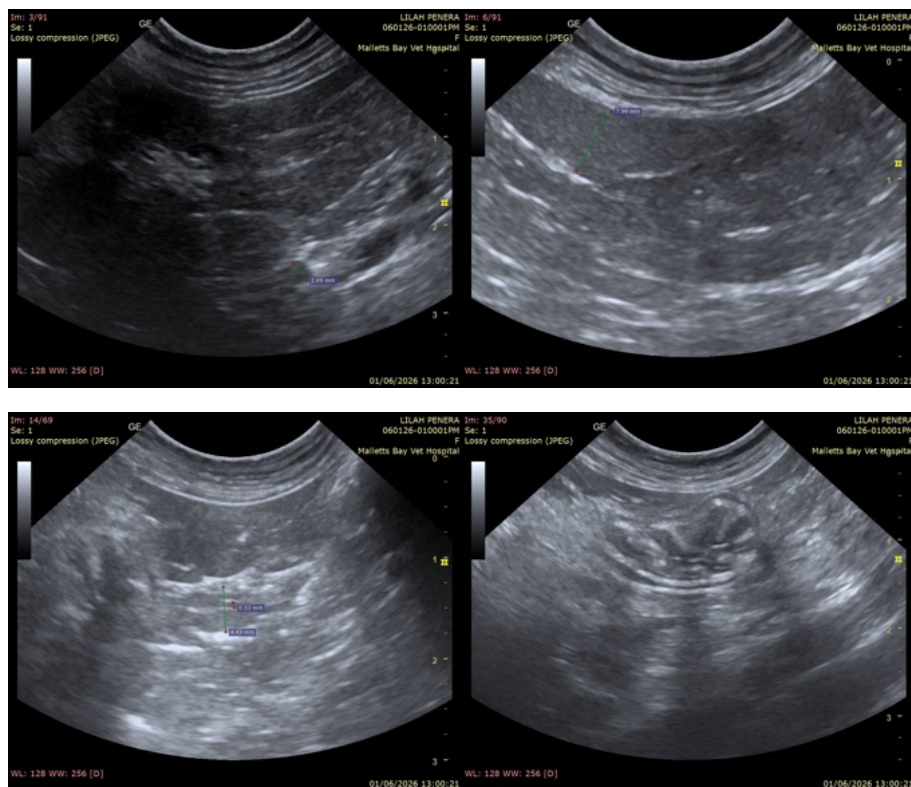
DATE

6/1/26

Recommendations

- Correlation with CBC, serum biochemistry profile, urinalysis, blood pressure measurement, and total T4 testing is recommended if not recently performed.
- Consider feline pancreatic lipase immunoreactivity (fPLI) testing if pancreatitis remains a clinical concern despite the absence of definitive ultrasonographic abnormalities.
- Measurement of serum cobalamin (vitamin B12) and folate concentrations may be considered as part of the gastrointestinal workup, particularly given the history of chronic recurrent gastrointestinal signs.
- Symptomatic management and close clinical monitoring are recommended.

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

Lilah Penera

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

15 years

WEIGHT

9.5 lbs

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Lexi Naylor

HOSPITAL NAME

Malletts Bay VH

REFERRING VET

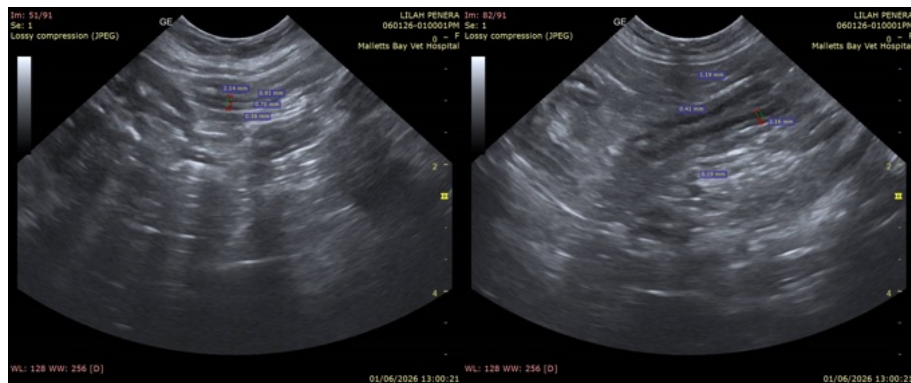
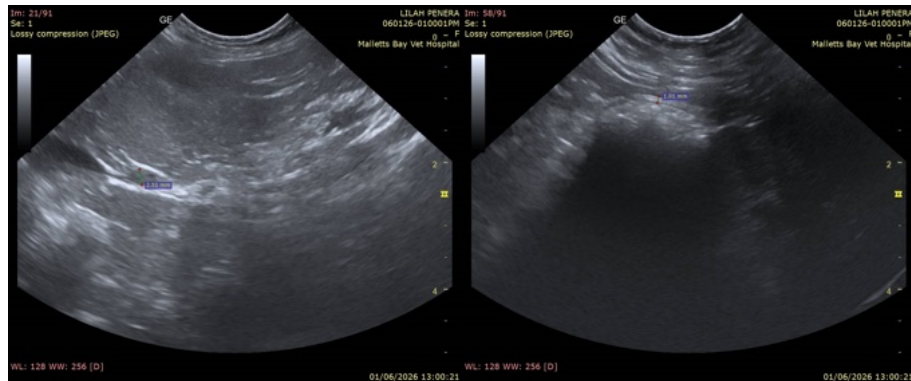
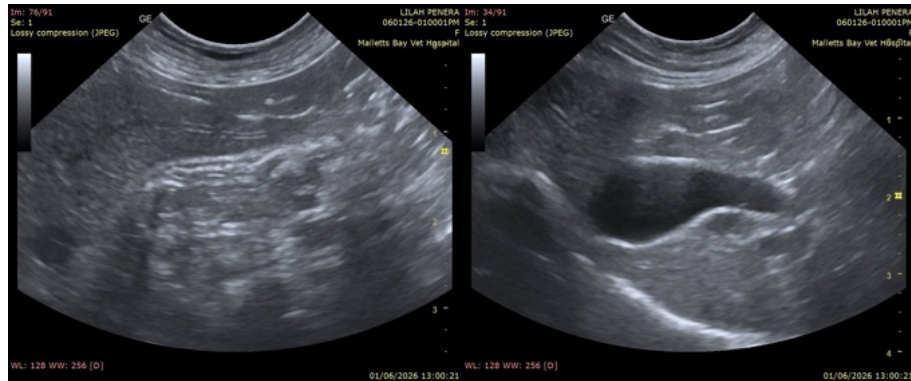
Dr. Naylor

INVOICE

78203

DATE

6/1/26



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