



PATIENT	PRESENTING CLINICAL SIGNS
Barclay Bungle Comb	Weight loss loss of muscle mass hyperthyroid abdomen felt 'doughy' on palpation Current Medications fluoxetine 5mg SID, Felimazole 2.5mg BID
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	Urinary System
BREED	Urinary bladder is adequately distended. It has a normal uniform wall thickness. Contents include primarily anechoic fluid with a large amount of echogenic non-shadowing debris, most consistent with exfoliated cells, crystals, mucous and/or small blood clots likely combined with incidental suspended lipid. Both sterile inflammation as well as urinary tract infection can present with echogenic debris. No masses or definitive cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.
DSH	
SEX	Kidneys are bilaterally irregular and diffusely echogenic with decreased corticomedullary distinction and poor visualization of internal architecture. There is no pyelectasia noted and no mineral is observed. Left kidney is normal in size at 4.2 cm. Right kidney is normal in size at 4.8 cm.
Neutered Male	
AGE	Adrenal Glands
13 Years	The right adrenal gland is normal in size (0.35 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
WEIGHT	The left adrenal gland is normal in size (0.24 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
5.31 kg	
INTERPRETED BY	Spleen
Beth Johnson, DVM DACVIM	Spleen measures at the upper ends of normal limits for thickness at 1.0 cm thick at the hilus. Parenchyma is normal and homogenous in echogenicity and echotexture. No focal nodules or masses are observed. Splenic vasculature appears normal.
IMAGING PERFORMED BY	Liver
Kelly Reschny	The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypochoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture In the mid caudal liver there is an approximately 1.6 cm in diameter anechoic density. Visible vasculature and biliary tree appear normal without distension or congestion.
HOSPITAL NAME	The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.
The Cat Clinic Hamilton	
REFERRING VET	Gastrointestinal
Dr. Hall	The visible stomach wall is normal in thickness and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.
INVOICE	The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.
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PATIENT	The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.
Barclay Bungle Comb	
SPECIES	<i>Pancreas</i>
Feline	Pancreas is prominent (enlarged) in size, hypoechoic to surrounding tissue and has a mildly irregular undulating contour. Parenchyma is coarse with mixed echogenic remodeling noted. No pancreatic duct dilation is noted.
BREED	<i>Free Abdomen</i>
DSH	There is no visible free peritoneal effusion noted in these images.
SEX	There is no apparent pathologic lymphadenopathy noted in these images.
Neutered Male	
AGE	ULTRASONOGRAPHIC FINDINGS
13 Years	<ul style="list-style-type: none"> Mild splenomegaly– can be associated with congestion caused by sedation (if sedated) but can also be associated with diffuse infiltrative disease. Both benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis as well as infiltrative neoplastic diseases such as round cell neoplasia should be considered.
WEIGHT	<ul style="list-style-type: none"> Chronic low-grade smoldering pancreatitis can't be ruled out. Suspect incidental hepatic cyst versus other. Infiltrative neoplasia is considered unlikely. Mild/subtle chronic kidney disease changes. Moderate to large amount of echogenic urinary bladder debris.
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
Beth Johnson, DVM DACVIM	If not recently evaluated, a general metabolic health screen (CBC, chemistry panel with electrolytes and urinalysis) is recommended.
IMAGING PERFORMED BY	A T4 level is recommended if not recently evaluated.
Kelly Reschny	A gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory is recommended for further evaluation of GI and pancreatic function.
HOSPITAL NAME	Fine needle aspirates of the spleen +/- liver could be considered if patient's coagulation status is appropriate.
The Cat Clinic Hamilton	Other than supportive/symptomatic medical management of clinical signs, further treatment recommendations are largely dependent on results of the above.
REFERRING VET	
Dr. Hall	
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PATIENT

Barclay Bungle Comb

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

5.31 kg

INTERPRETED BY

Beth Johnson, DVM
 DACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

The Cat Clinic
 Hamilton

REFERRING VET

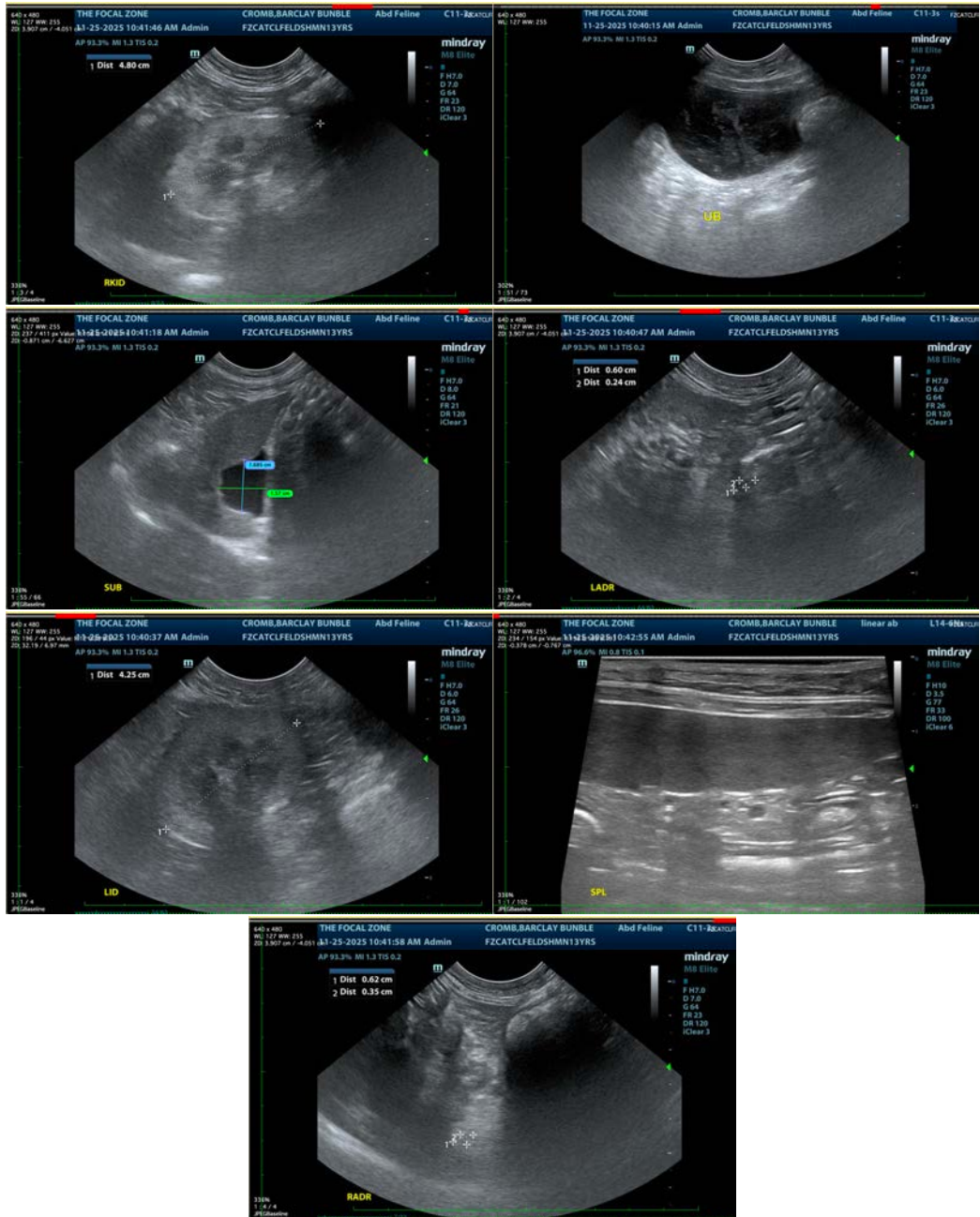
Dr. Hall

INVOICE

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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.

Beth Johnson, DVM, DACVIM info@sonopath.com