

**PRESENTING CLINICAL SIGNS**

**PATIENT**

History: Excessive drooling, poor appetite. No vomiting. \*Study limited to GI system

Tigre Garcia

**LIMITED ULTRASONOGRAPHIC EXAMINATION**

**SPECIES**

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.

Feline

**BREED**

The visible small intestine demonstrates areas of mildly thick muscularis layer relative to mucosa (disruption of the normal 1:3 muscularis:mucosa ratio). Small intestinal submucosa is slightly irregular, thick and hyperechoic, without evident loss of layering appreciated. The lumen of the small intestine is empty with no evidence of obstruction or foreign material.

DSH

**SEX**

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Neutered Male

**AGE**

**ULTRASONOGRAPHIC FINDINGS**

2 Year

- Mild/emerging inflammatory bowel disease pattern- Thick muscularis has been reported with infiltrative bowel disease including both benign inflammatory disease as well as infiltrative neoplasia such as lymphoma. No loss of layering or distinct characteristics of malignancy are present. Therefore, differentials cannot be further ranked without tissue sampling.

**WEIGHT**

12 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

The bowel changes described above are very mild/subtle and given patients reported history of excessive drooling, but no vomiting or diarrhea, etc., a thorough oral and potentially laryngeal, pharyngeal, and/or even esophageal exam is recommended, which may include thoracic radiographs, and/or even upper GI endoscopy.

Beth Johnson, DVM,  
DACVIM (SAIM)

**IMAGING PERFORMED BY**

In the meantime, additionally a routine fecal/Giardia exam is recommended if not recently evaluated, as is a gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory for further evaluation of GI and pancreatic function.

Pamela Harrigan, RDCS,  
Certified Veterinary  
Sonographer (IVUSS)

**HOSPITAL NAME**

While continuing work up, empirical therapeutic recommendations include empirical deworming with a 5-day course of Panacur, as well as empirical antiemetic therapy to address subclinical nausea, as well as gastroprotectants.

East Boston AH

**REFERRING VET**

Raman Chopra, DVM

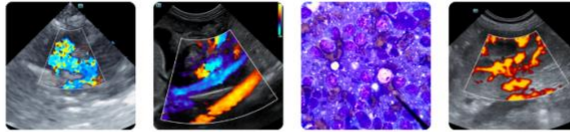
**INVOICE**

36359

**DATE**

3/23/26





**PATIENT**

Tigre Garcia

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

2 Year

**WEIGHT**

12 Pounds

**INTERPRETED BY**

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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**

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