



**PATIENT**

Mia Faliei

**PRESENTING CLINICAL SIGNS**

Patient was spayed in September 2025. In January 2026 and April 2026, patient showed signs of being in heat despite being spayed. Primary suspicion is Ovarian Remnant Syndrome

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

DSH

The urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

**SEX**

Spayed Female

The right kidney is normal is size (3.17 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**AGE**

1 Year

The left kidney is normal is size (3.19 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**WEIGHT**

7 lbs

**Adrenal Glands**

The right adrenal gland is normal in size (0.23 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

**INTERPRETED BY**

Beth Johnson, DVM  
 DACVIM

The left adrenal gland is normal in size (0.28 cm), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

**Spleen**

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

**IMAGING PERFORMED BY**

Kelly Reschny

**Liver**

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

**HOSPITAL NAME**

Collegeway Animal Hospital

**REFERRING VET**

Dr. Hanna

The gallbladder is unable to be visualized in these images.

**Gastrointestinal**

**INVOICE**

74937

The visible stomach wall is normal in thickness and layering. The stomach is moderately distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. If patient was appropriately fasted, delayed gastric emptying could be considered. Non-shadowing foreign material is considered less likely but cannot be definitively ruled out.

**DATE**

5/5/26

If clinical signs are consistent (vomiting, etc.), recommendations include supportive medical care, 24 hours fasting and re-image.



**PATIENT**

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The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta/chyme. There is no evidence of obstruction, foreign material or infiltrative disease.

**SPECIES**

Feline

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

**BREED**

DSH

***Pancreas***

The pancreas that is observed appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

**SEX**

Spayed Female

***Free Abdomen***

**AGE**

1 Year

There is no visible free peritoneal effusion noted in these images.

There is no apparent pathologic lymphadenopathy noted in these images.

**WEIGHT**

7 lbs

In the mid left abdomen adjacent to the left kidney, in the area where the left ovary would be is an approximately 0.50 cm x 0.70 cm, non-discrete, hypo- to almost anechoic appearing density.

**ULTRASONOGRAPHIC FINDINGS**

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

- The left ovary or ovarian remnant can't be ruled out. Having said that, a focal pocket of free fluid, hematoma, abscess versus other is also possible.
- The gallbladder is unable to be visualized.

**IMAGING PERFORMED BY**

Kelly Reschny

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Hormone testing to further investigate the concern for left ovarian remnant such as AMH could be considered. Ultimately, however, pending results, an exploratory laparotomy for planned suspect left ovarian remnant removal may be indicated.

**HOSPITAL NAME**

Collegeway Animal Hospital

**REFERRING VET**

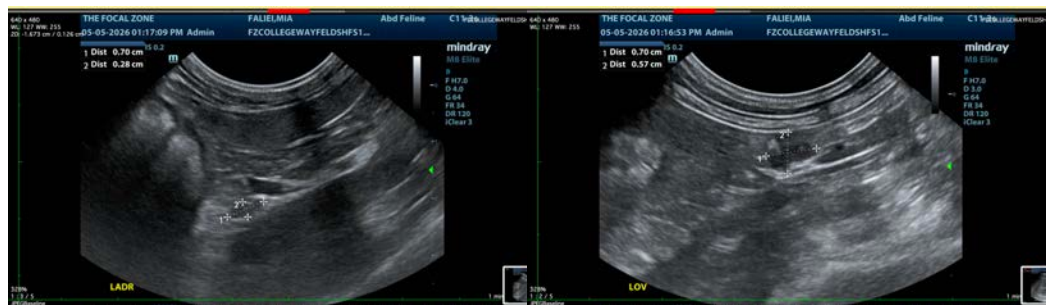
Dr. Hanna

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Mia Faliei

**SPECIES**

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**SEX**

Spayed Female

**AGE**

1 Year

**WEIGHT**

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Kelly Reschny

**HOSPITAL NAME**

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 Hospital

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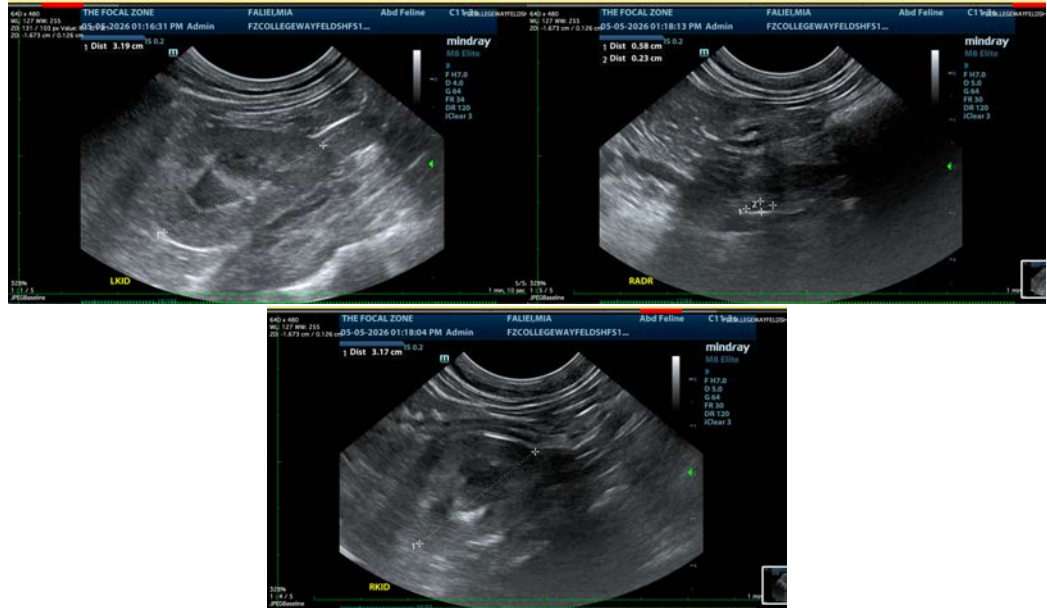
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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