



**PATIENT**

Snowy Chauncey

**SPECIES**

Feline

**BREED**

DMH

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

12.7 lbs

**INTERPRETED BY**

Greg Kuhlman, DVM,  
DACVIM (SAIM)

**IMAGING PERFORMED BY**

Kathleen Byrnes

**HOSPITAL NAME**

Wallburg Animal  
Hospital

**REFERRING VET**

Dr. Harris

**INVOICE**

75512

**DATE**

5/28/26

**PRESENTING CLINICAL SIGNS**

P presented for US due to persistent hematuria seen on urinalysis. Large amount of blood on urinalysis, sample obtained by cystocentesis, but sample completely clear no visible blood seen when collected. Previous US done by radiologist- intestinal wall thickened concern for IBD- Bladder and kidneys normal at the time.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The bladder is moderately distended with anechoic urine. No uroliths are seen. The bladder wall is normal in appearance and thickness. No masses are seen. The visible urethra appears normal.

The right kidney presents normal size (4.5 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

The left kidney presents normal size (3.7 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

**Adrenal Glands**

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The right adrenal gland measures 3.2 mm in width.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The left adrenal gland measures 3.0 mm in width.

**Spleen**

The spleen is normal in size, shape, margination and echogenicity. No masses are seen.

**Liver**

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern.

The gallbladder presents normal size with anechoic contents. Normal gallbladder wall. No evidence of bile duct distention or obstruction.

**Gastrointestinal**

The stomach has normal wall layering and thickness. The jejunum is moderately to markedly thickened diffusely due to a markedly thickened muscularis layer. Sections of jejunum measure up to 3.6 mm in width. The duodenum has moderate loss of layering present diffusely. It is moderately to markedly thickened at 4.8 mm in width. Colon contains normal contents with normal wall thickness.

**Pancreas**

The visible pancreas is mildly diffusely hypoechoic. No surrounding steatitis.



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**Free Abdomen**

There are no enlarged abdominal lymph nodes seen on this exam. No free abdominal fluid is seen.

**ULTRASONOGRAPHIC FINDINGS**

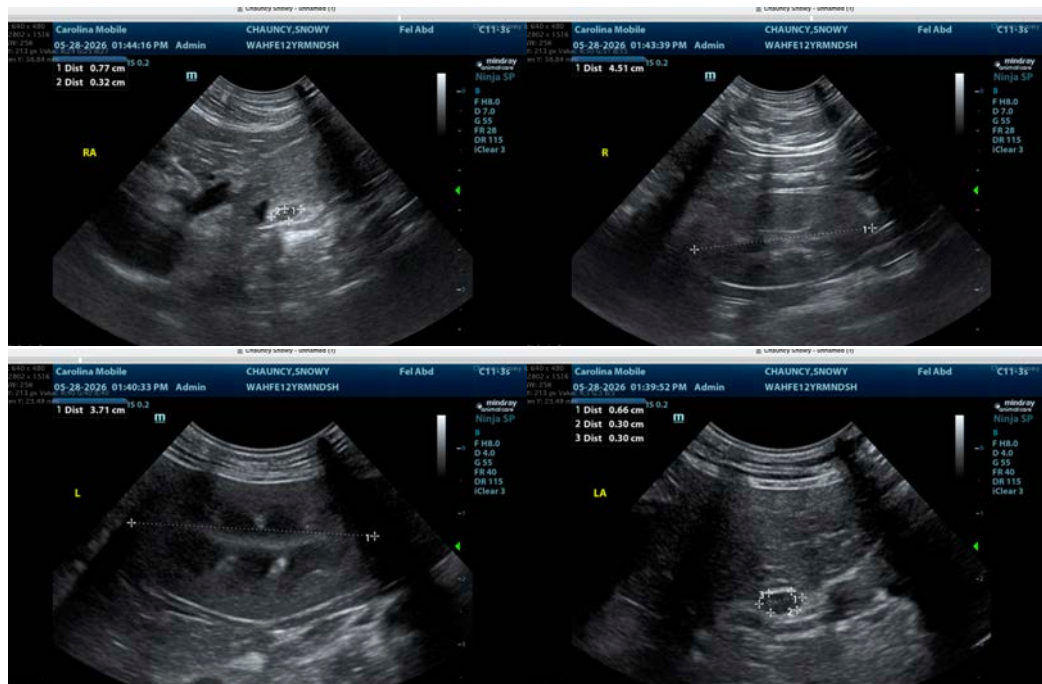
- Thickened small bowel.
- Diffusely mildly hypoechoic pancreas.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The patient potentially has mild pancreatitis. Recommend submitting fPLI to confirm.

The thickened small intestines are consistent with a chronic enteropathy. Differentials include small cell GI lymphoma versus mast cell disease, less likely an infectious etiology such as histoplasmosis. If histoplasmosis is endemic to the patient's geographic region, recommend ruling this out as a cause of the chronic enteropathy. A benign etiology such as inflammatory bowel disease is possible but not highly likely.

No other significant abnormalities identified. No cause for the patient's reported persistent hematuria seen on this exam. If not already performed, recommend urine culture.





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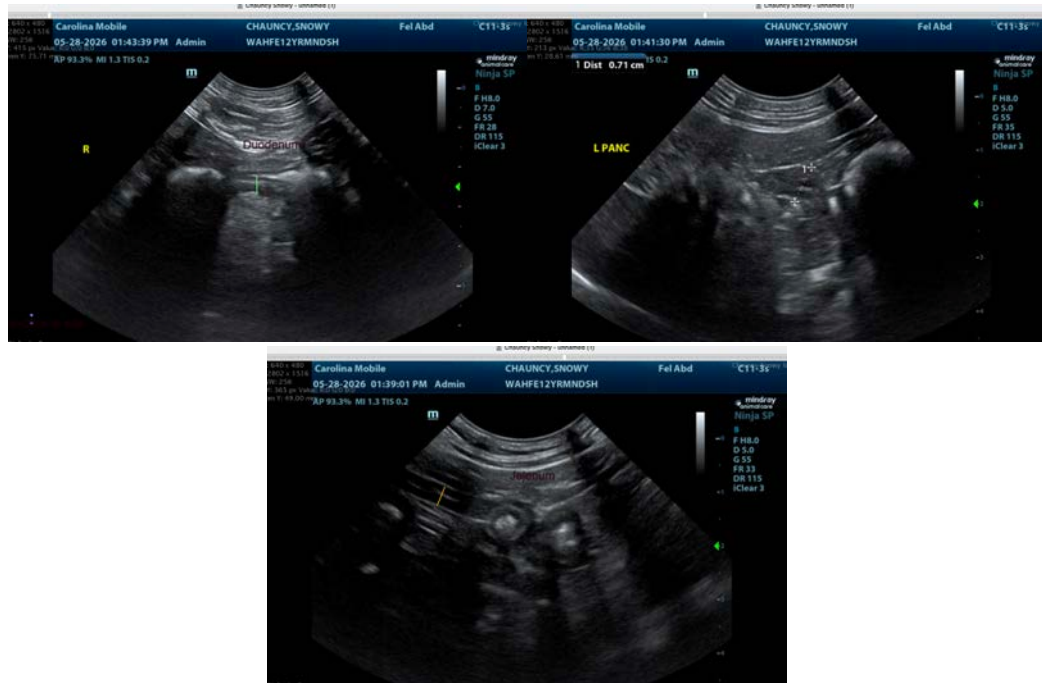
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Greg Kuhlman, DVM, DACVIM (SAIM)

Veterinary Internal Medicine Specialist

[info@SonoPath.com](mailto:info@SonoPath.com)