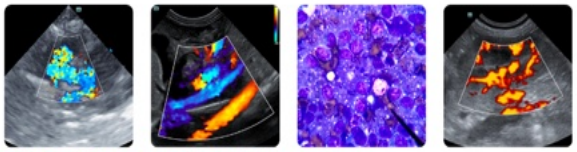

SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Milly Dagleish

SPECIES

Feline

BREED

Ragdoll

SEX

Intact female

AGE

4 years

WEIGHT

9.5 lbs

INTERPRETED BY

Kim Radway, DVM, DABVP (Canine/ Feline)

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Ancaster AH

REFERRING VET

Dr. Baehrle

INVOICE

71116

DATE

2/2/26

PRESENTING CLINICAL SIGNS

- P had history of pregnancy but recently has not been able to have any litters.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone and pelvic urethra presented with normal wall thicknesses. The urine is anechoic, but contained a small to moderate amount of hyperechoic suspended debris. No uroliths or masses were noted in the lumen of the bladder. No evidence of inflammatory or neoplastic changes were noted. The ureters were not visible and considered normal.

The **kidneys** revealed normal size, corticomedullary definition and ratio with the cortex being 1/3 of medulla. Medullary echogenicity differed distinctly from that of the cortex and no evidence or dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. The left kidney was 3.47 cm and the right kidney was 3.91 cm in length.

The uterus was evaluated and found to have no evidence of masses, increased thickness of the wall or fluid within the lumen. The left ovary measured 0.81 x 0.57 cm and the right ovary measured 0.83 x 0.65 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were acceptable. The left adrenal gland was 0.88 cm by 0.46 cm and the right adrenal gland was 0.68 cm by 0.33 cm in size.

Spleen

The **spleen** presented with a smooth homogeneous parenchyma hyperechoic to liver and kidney. The capsule was smooth and linear in its contour. The splenic vasculature demonstrated normal volume without signs of congestion, significant contraction, or thrombosis.

Liver

The **liver** revealed normal size, contour, and structure. Parenchymal echogenicity was smooth and homogenous in appearance. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented with anechoic contents and a thin hyperechoic wall. The cystic and common bile ducts were normal. No periportal lymphadenopathy was evident.

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Gastrointestinal

The **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was a small amount of gas in the lumen of the stomach. No obstructive or overt infiltrative disease was noted. No abnormal lymphatic activity was noted and the abdomen was free of gastrointestinal masses and pathological fluid.

Pancreas

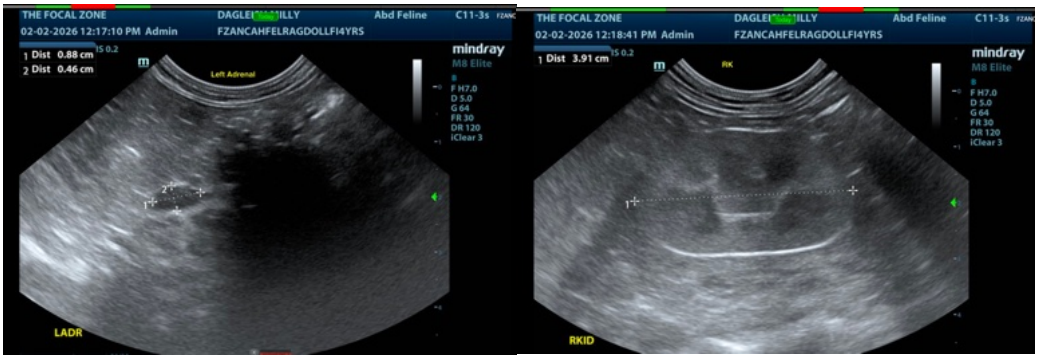
The right and left limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic capsular contour were acceptably normal. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Small to moderate amount of hyperechoic, suspended debris within the urine.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

It is recommended to perform a cystocentesis urine sample to submit a urine sample for urinalysis and urine culture. Additional testing for underlying reproductive health should include a full feline thyroid panel, full viral panel and echocardiogram to rule out any occult cardiac disease. Referral to a reproductive specialist can also be considered where they could discuss genetic testing and hormone panel such as progesterone levels. It is also important to ensure that there is decreased stress within this patient's environment especially around the time of breeding.



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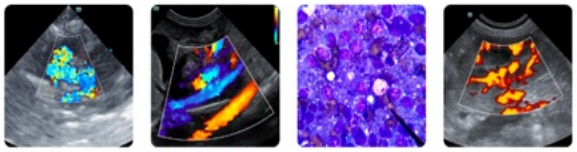

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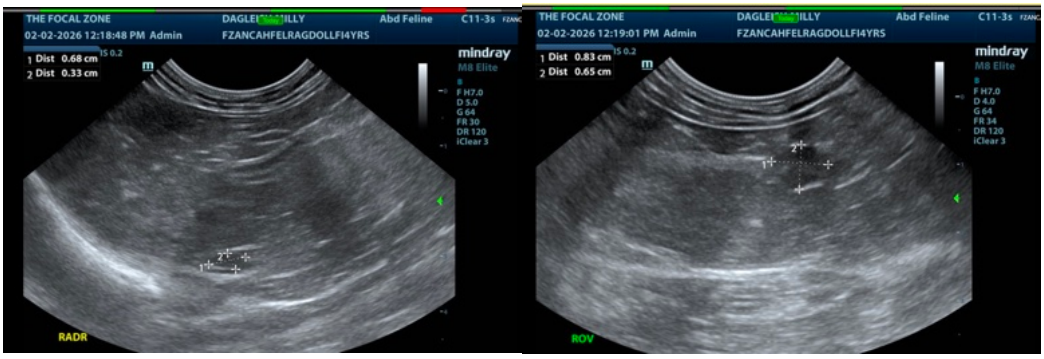

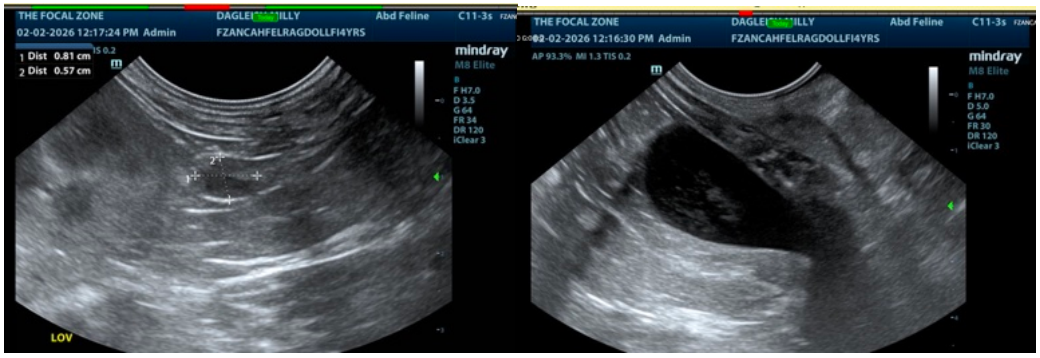

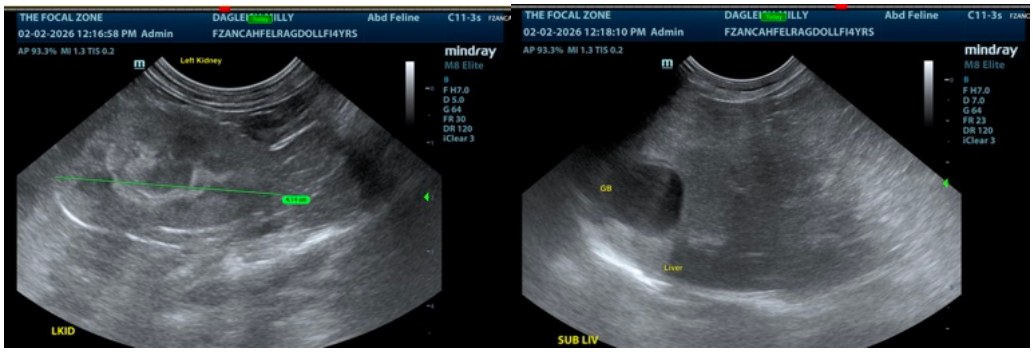

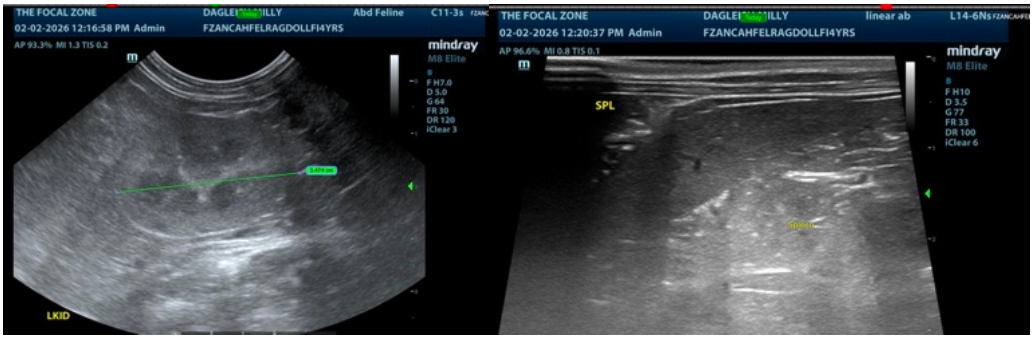

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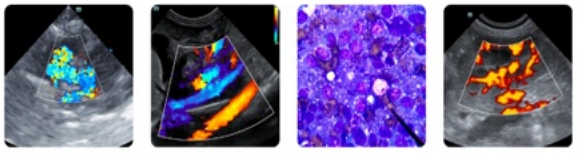

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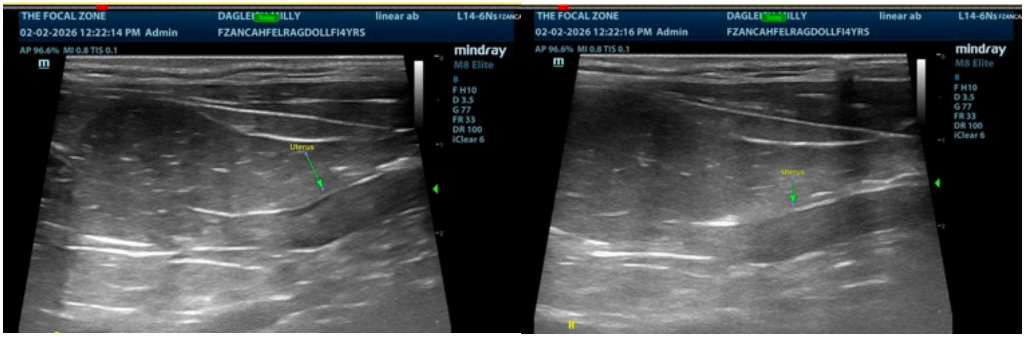

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kim Radway, DVM, DABVP (Canine/ Feline)

info@SonoPath.com