



PATIENT

King Sushi Cramer

SPECIES

Feline

BREED

Ragdoll

SEX

Neutered Male

AGE

12 years

WEIGHT

10.9 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS,
Certified Veterinary
Sonographer

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

Dr. Emily McCabe

INVOICE

10752

DATE

11/13/2025

PRESENTING CLINICAL SIGNS

Anorexia/vomiting x 3 days. Weight loss ~ 2 pounds. History of severe pancreatitis (more than 9 documented events with elevated specs years 2021-2025). Mild hyperthermia on presentation, tachycardia/tachypna. Improved after 24 hours of IVF and pain medications. Glu 328, Na 146, Cl 106, amhlase 2292, lipase 308.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The left kidney has a normal shape and size (3.39 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (4.27 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.39 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.29 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

Spleen

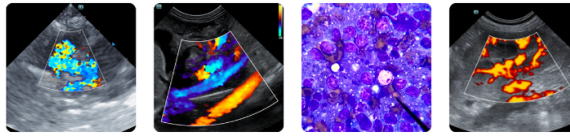
The spleen is subjectively normal in size (0.71 cm), echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

The liver is normal in size, and rounded. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. There is a moderate amount of non-organized echogenic debris. The bile duct appears mildly dilated and tortuous measuring at 0.2 cm. No evidence of an obstruction is visualized.

Gastrointestinal



PATIENT

King Sushi Cramer

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.36cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

SPECIES

Feline

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (0.25 cm in wall thickness) and the jejunum measured as normal (0.21 cm.) Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

BREED

Ragdoll

SEX

Neutered Male

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

AGE

12 years

Pancreas

The pancreas is large and hypoechoic to surrounding mesentery. There is an irregular, hypoechoic lesion at the caudal aspect of the left limb of the pancreas, which is partially cystic, most consistent with a pancreatic cyst/nodule, measuring 0.89 cm in diameter. Additionally, in the right limb of the pancreas there is a rounded, irregular area of pancreas measuring 0.77 cm x 1.27 cm, which could be consistent with a nodule, a super imposed lymph node, or irregular area of the abnormal pancreas. There is evidence of regional mesenteric inflammation. Consistent with moderate pancreatitis in both limbs.

WEIGHT

10.9 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is no significant lymphadenopathy. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is highly reactive around both limbs of the pancreas.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS,
Certified Veterinary
Sonographer

ULTRASONOGRAPHIC FINDINGS

- Pancreatic changes most consistent with severe chronic active pancreatitis with a nodule/cystic lesion visualized in the left limb, and an irregular, rounded area on the right limb.
- Heterogenous, rounded liver. Hepatic changes are non-specific and could be consistent with inflammation/infection (cholangiohepatitis), infiltrative neoplasia, lipidosis or other hepatopathy.
- Mildly dilated, tortuous bile duct. Dilation of the common bile duct could be consistent with a functional obstruction (i.e. primary hepatic disease resulting in hepatocellular swelling) or with an extrahepatic bile duct obstruction (ie. choledocholith, bile duct tumor, pancreatic disease, other).

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

Dr. Emily McCabe

INVOICE

10752

DATE

11/13/2025

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Both limbs of the pancreas are very hypoechoic, an irregular, with surrounding reactive mesentery. There are occasional cystic or irregular areas concerning for nodules (likely lymphoid nodules?) Recommend aggressive treatment for pancreatitis, with serial monitoring looking for the development



PATIENT

King Sushi Cramer

SPECIES

Feline

BREED

Ragdoll

SEX

Neutered Male

AGE

12 years

WEIGHT

10.9 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Pamela Harrigan, RDCS,
Certified Veterinary
Sonographer

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

Dr. Emily McCabe

INVOICE

10752

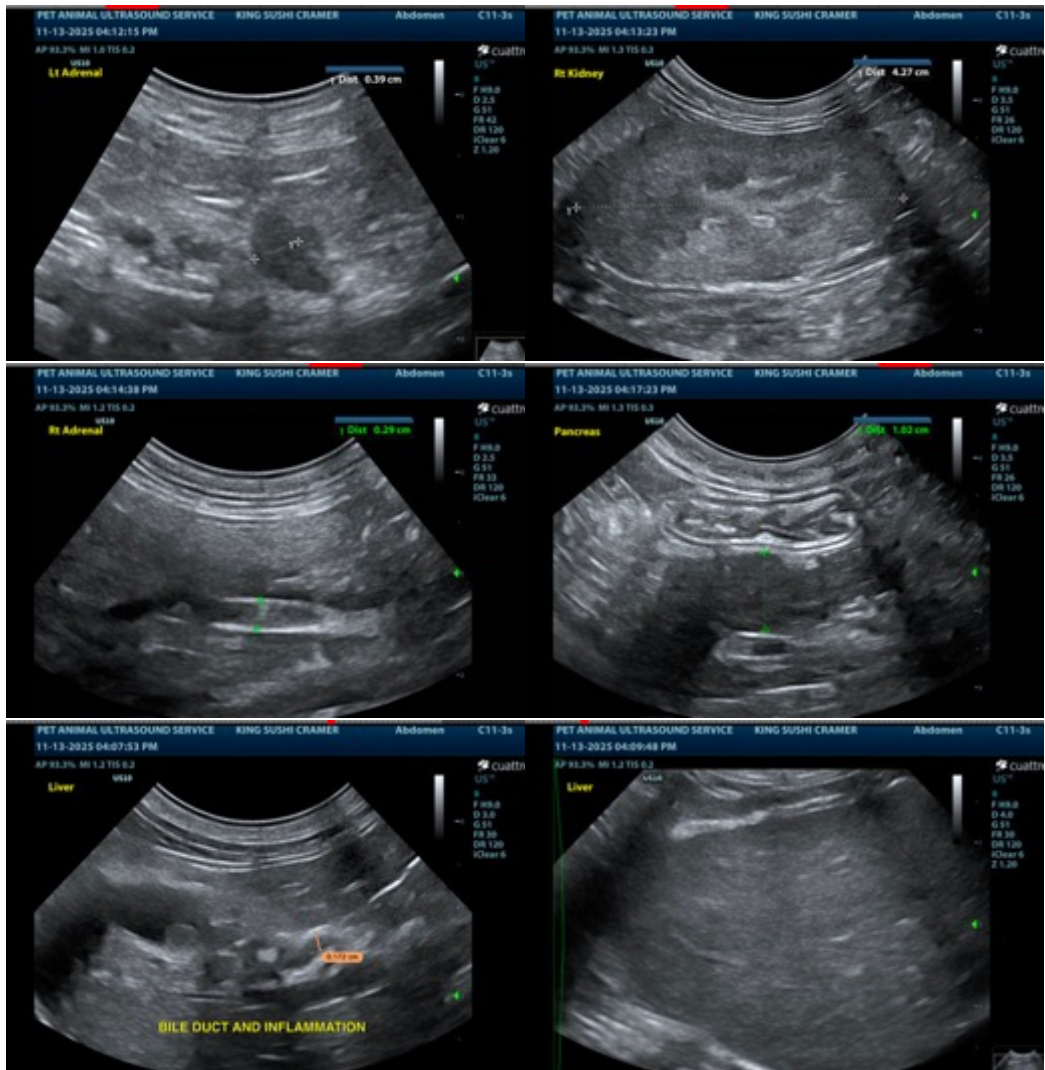
DATE

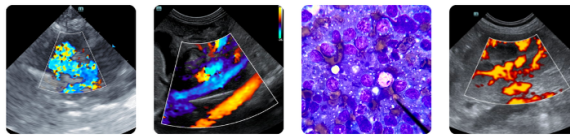
11/13/2025

of an abscess or similar.

The bile duct is dilated and tortuous, possibly consistent with a partial post hepatic obstruction. Given the recurrence of these issues, it may be warranted at some point to consider evaluation for triaditis with biopsies of the GI tract, pancreas, and liver. You could consider a combination of hydrolyzed protein ultra low-fat diet, and a GI panel to Texas A&M for a qualitative fPLI/TLI, cobalamin, and folate for initial evaluation.

Consider repeat imaging in the future to reevaluate the irregular area in the right limb of the pancreas to ensure this is not a progressive pancreatic mass lesion.





PATIENT

King Sushi Cramer

SPECIES

Feline

BREED

Ragdoll

SEX

Neutered Male

AGE

12 years

WEIGHT

10.9 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS,
Certified Veterinary
Sonographer

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

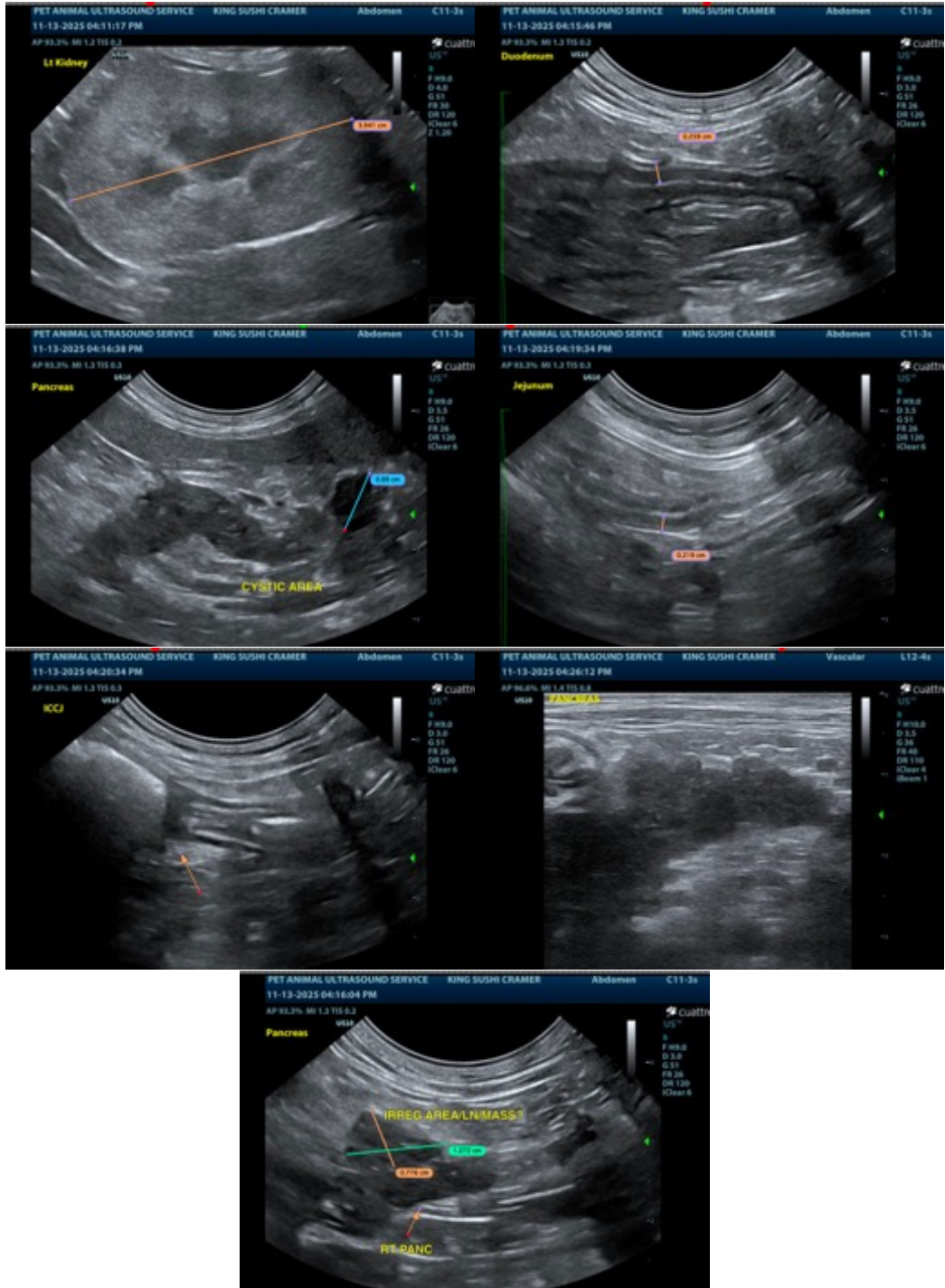
Dr. Emily McCabe

INVOICE

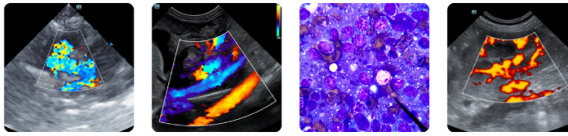
10752

DATE

11/13/2025



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.



PATIENT

King Sushi Cramer

SPECIES

Feline

BREED

Ragdoll

SEX

Neutered Male

AGE

12 years

WEIGHT

10.9 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Pamela Harrigan, RDCS,
Certified Veterinary
Sonographer

HOSPITAL NAME

Norfolk County
Veterinary Service

REFERRING VET

Dr. Emily McCabe

INVOICE

10752

DATE

11/13/2025

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

info@sonopath.com