



PATIENT

Sia Duque

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years 10 Months

WEIGHT

7.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

Dr. Bravo

INVOICE

72897

DATE

12/31/25

PRESENTING CLINICAL SIGNS

HX chronic diarrhea, possible IBD. Rads show fecal material within the colon consistent with clinical hx of diarrhea- AUS recommended if clinical signs persist.

Abnormal PE/Chem/CBC/UA Results: Hemat-24.8 Retic-60.4 BG-154 K+3.3 TP-8.5 Others WNL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with mild primarily suspended echogenic debris present. 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 calculi. Echogenic debris of this type can be associated with small crystals, cellular debris and proteinaceous debris.

The left kidney has a normal shape and size (4.24 cm). Overall echogenicity is slightly hyperechoic with mildly reduced 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 (4.11 cm) with a non-obstructive nephrolith noted. Overall echogenicity is slightly hyperechoic with poor 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, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.41 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 0.37 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 (0.53 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 subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. 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. Luminal contents are mild and likely incidental at this time. The cystic and common bile ducts are normal/not visible.



PATIENT

Sia Duque

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years 10 Months

WEIGHT

7.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

Dr. Bravo

INVOICE

72897

DATE

12/31/25

Gastrointestinal

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.

Most of the visualized areas of duodenum, jejunum and ileum have a uniform diameter with minimal fluid distension. Wall thickness is normal to slightly increased. Bowel loops follow a typical curvilinear path with distinct wall layering, but some areas display a prominent muscularis layer which does not display the typical 1:3 muscularis:mucosa layer ratio. Duodenum wall measures 0.25 cm. Jejunum wall measures 0.23 cm. Visualized peristalsis appears appropriate. The ileum appears prominent and thickened, measuring at 0.49 cm, with some areas exhibiting reduced definition of wall layering.

The ileocecal junction was visualized. The proximal ascending colon appears thickened with mildly reduced detail of wall layering, measuring at 0.42 cm. The descending colon appears thickened, measuring at 0.35 cm. Sections of colon are visualized with non-formed fecal material and gas shadowing distally.

Pancreas

The left limb of the pancreas is prominent and hypoechoic as compared to the surrounding isoechoic mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

Free Abdomen

There is scant free fluid noted. There is a mild lymphadenopathy around the ileocecal junction with lymph nodes measuring 0.38 cm, 0.33 cm, and 0.44 cm. A larger hypoechoic mesenteric lymph node is visualized measuring 0.77 cm. The omentum is of normal echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Mild suspended echogenic debris in the urinary bladder – The echogenic debris in the bladder lumen could be consistent with cells, crystals, and/or mucus.
- Age related changes visualized associated with both kidneys.
- Pancreatic changes most consistent with chronic pancreatic remodeling/mild chronic pancreatitis in the left limb.
- Diffusely “ropey” small intestine with some areas exhibiting focal thickening and a prominent muscularis layer – Findings are most consistent with inflammatory change, although focal thickening and irregularity is concerning for an early neoplastic process.
- Thickened, irregular ileum – Findings could be consistent with significant inflammatory or early neoplastic change.
- Thickened proximal and descending colon – Some of these areas have the appearance most consistent with colitis, although wall layering is reduced in some regions, increasing concern for early neoplastic change.



PATIENT

Sia Duque

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years 10 Months

WEIGHT

7.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

Dr. Bravo

INVOICE

72897

DATE

12/31/25

- Prominent mesenteric lymph nodes – Most consistent with significantly reactive or early neoplastic change.

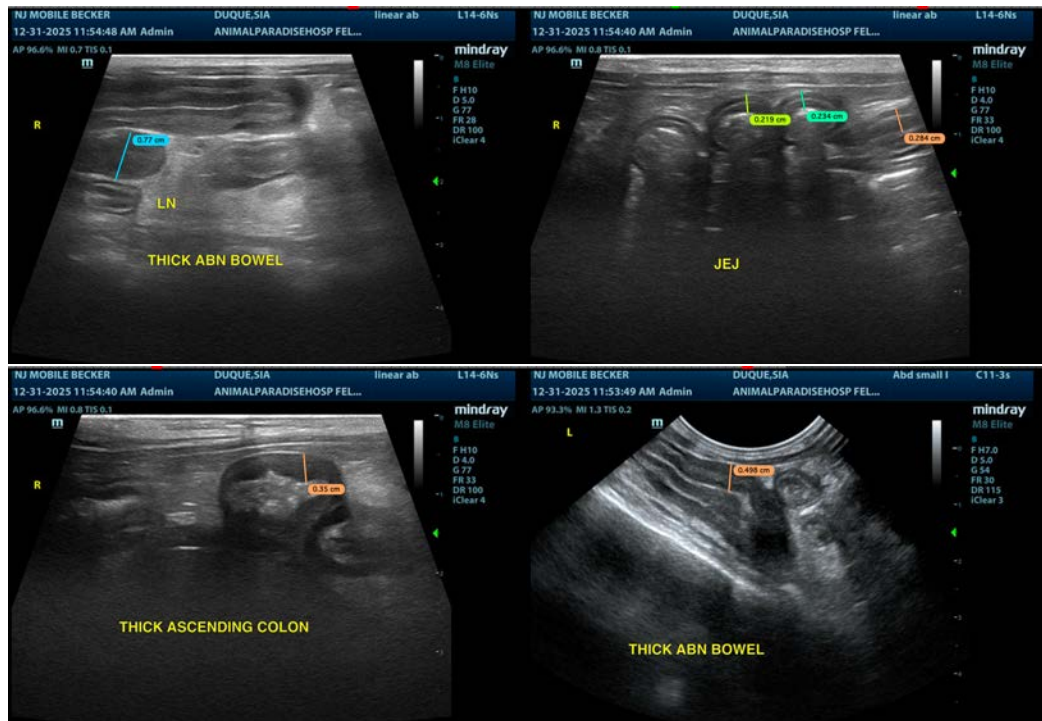
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There are mild diffuse small intestinal changes with some areas of small intestine (primarily the ileum) appearing more significantly thickened, with some areas exhibiting reduced detail of wall layering. Additionally, the proximal ascending colon is thickened with mildly reduced wall layering. These changes could be consistent with severe inflammatory change but are concerning for possible early neoplastic change. Consider the following:

- Consider a novel protein/hydrolyzed protein diet (exclusively at least 4-6 weeks)
- Consider a GI panel to Texas A&M for evaluation of B12 levels, folate, PLI/TLI etc.. to further evaluate for pancreatic/small intestinal disease.
- Recommend chronic probiotic therapy.

If symptoms are persistent, biopsies of the GI tract and lymph nodes may be warranted to further evaluate. Prior to this, you could consider repeat imaging, looking for the progression of today's lesions.

If a safe window for sampling is available, aspirate of the proximal ascending colon or a larger mesenteric lymph node could be considered, although a significant "mass effect" is not visualized.





PATIENT

Sia Duque

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years 10 Months

WEIGHT

7.1 lbs

INTERPRETED BY

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

**IMAGING
 PERFORMED BY**

Kerri Becker

HOSPITAL NAME

Animal Paradise
 Hospital

REFERRING VET

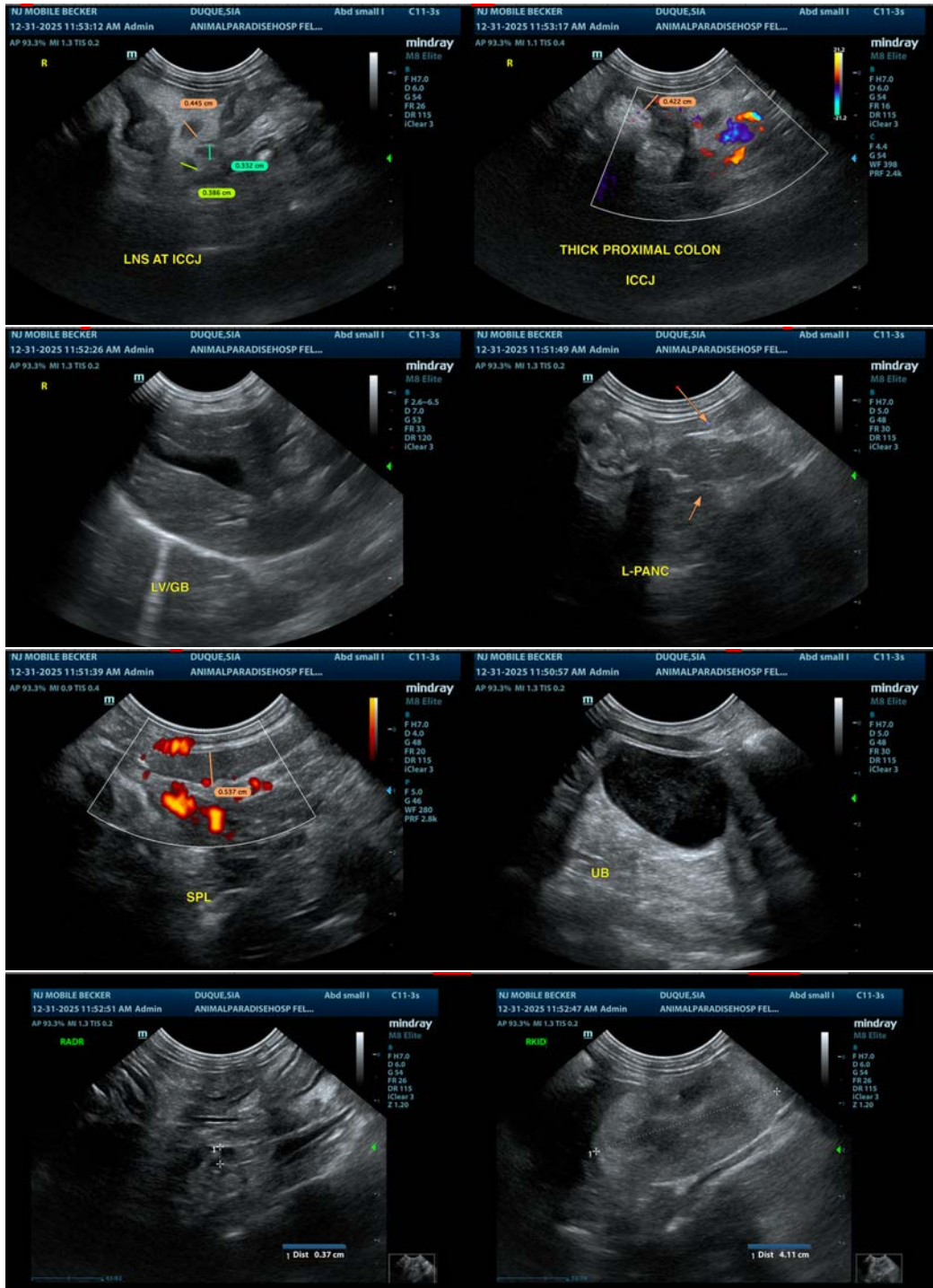
Dr. Bravo

INVOICE

72897

DATE

12/31/25





PATIENT

Sia Duque

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

14 Years 10 Months

WEIGHT

7.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Animal Paradise
Hospital

REFERRING VET

Dr. Bravo

INVOICE

72897

DATE

12/31/25



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.

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

info@sonopath.com