



PATIENT

Rascal Del

SPECIES

Feline

BREED

DLH

SEX

MN

AGE

12 years

WEIGHT

6.6 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Alpine Animal Hospital

REFERRING VET

Dr. Rachel Zsumel

INVOICE

10917

DATE

12/9/2025

PRESENTING CLINICAL SIGNS

Chronic hx vomiting hairballs, food approx 2x monthly. Also has always tried to eat plastic bags, clumps hair, etc. Working diagnosis Concern for chronic enteropathy, pancreatitis, other.

Abnormal PE/Chem/CBC/UA Results: Chem Chol 232, triglycerides 338, PSL 30, BUN 37 CBC Plts clumped T4 2.9 UA USG 1.049 UPC 0.3 Sed inactive Texas GI panel pending - will send results when available.

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 (4.14 cm). 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, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (3.62 cm). 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, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.34 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 0.33 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 borderline large in size (1.1 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.



PATIENT

Rascal Del

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.

SPECIES

Feline

Gastrointestinal

The stomach contains minimal fluid and gas/shadowing material. 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.

BREED

DLH

The visualized areas of duodenum (0.22 cm), jejunum (0.25 cm) and ileum have a uniform diameter with minimal fluid distension. Wall appears subjectively, mildly increased. Bowel loops follow a typical curvilinear path with distinct wall layering. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed

SEX

MN

AGE

12 years

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.

WEIGHT

6.6 kg

Pancreas

The pancreas is visible and mildly mottled in the left limb, and hypoechoic and slightly prominent in the right limb. There is no evidence of nodules or cystic lesions. There is mild surrounding reactive mesentery around the right limb of the pancreas.

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, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

**IMAGING
PERFORMED BY**

Loetitia Saint-Jacques,
LVT

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. Recommend urinalysis and culture.
- Pancreatic changes in the right limb consistent with mild pancreatitis.
- Minimal fluid/gas/shadowing material visualized within the gastric lumen. This is likely within normal limits. No evidence of an obstruction is noted. Small, non-obstructive ingested material cannot be ruled out.
- Normal/borderline thick small intestine. The mild small intestinal wall changes may be a normal variant in this patient or could be consistent with an inflammatory process (e.g., inflammatory bowel disease).
- Borderline large spleen. I suspect this is normal in a larger cat. Other differentials could include congestion, infiltrative disease, splenitis, lymphoid hyperplasia, etc. Continued monitoring is warranted.

HOSPITAL NAME

Alpine Animal Hospital

REFERRING VET

Dr. Rachel Zsumel

INVOICE

10917

DATE

12/9/2025

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



PATIENT

The gastrointestinal changes observed on today's scan are mild and non-specific. This does not rule out an underlying enteropathy.

Rascal Del

SPECIES

The right limb of the pancreas is somewhat prominent and hypoechoic with some mildly reactive mesentery, most consistent with mild pancreatitis or resolving pancreatitis. Consider empirical treatment for pancreatitis. If symptoms are persistent, empirical treatment for a concurrent enteropathy with a hydrolyzed protein prescription diet, probiotic therapy, etc., is warranted. If symptoms are persistent, biopsies of the GI tract may be warranted and/or repeat ultrasonographic evaluation in the future looking for the progression of today's lesions.

Feline

BREED

DLH

SEX

MN

AGE

12 years

WEIGHT

6.6 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Alpine Animal Hospital

REFERRING VET

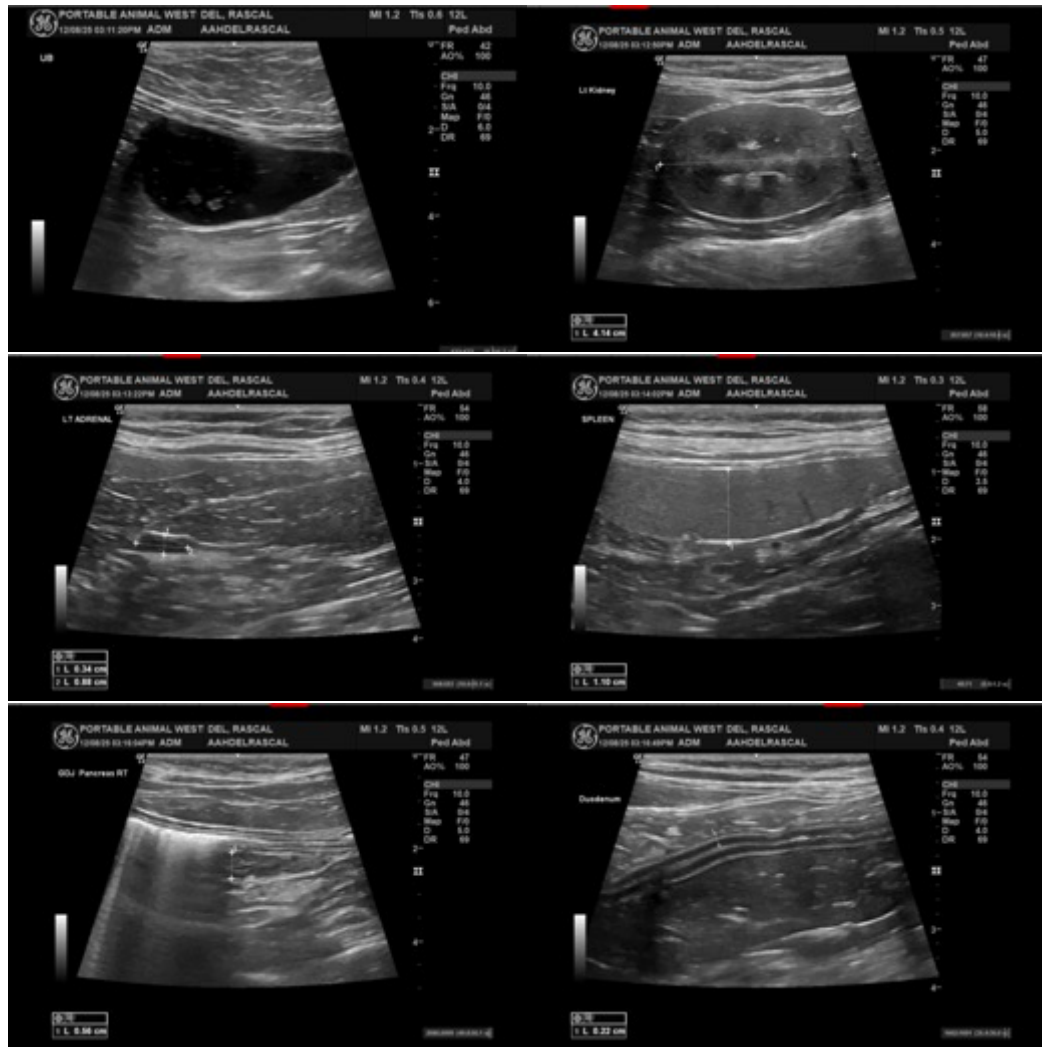
Dr. Rachel Zsumel

INVOICE

10917

DATE

12/9/2025





PATIENT

Rascal Del

SPECIES

Feline

BREED

DLH

SEX

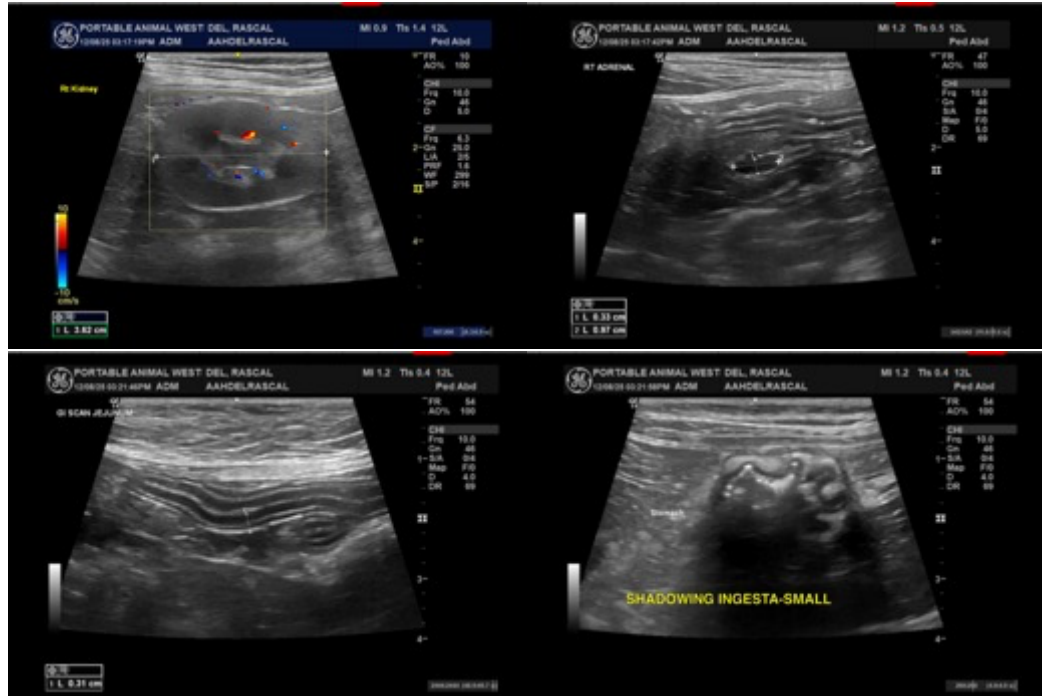
MN

AGE

12 years

WEIGHT

6.6 kg



INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Alpine Animal Hospital

REFERRING VET

Dr. Rachel Zsumel

INVOICE

10917

DATE

12/9/2025

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.

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