



## PATIENT

Miso Becerril

## SPECIES

Feline

## BREED

DSH

## SEX

MN

## AGE

1yr

## WEIGHT

9.2lb

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

## IMAGING PERFORMED BY

Jazmin Munoz  
Gonzalez

## HOSPITAL NAME

Oakridge Veterinary  
Clinic

## REFERRING VET

Jazmin Munoz  
Gonzalez

## INVOICE 23641

**DATE**  
01/20/2026

## PRESENTING CLINICAL SIGNS

- PC: COHAT and inappropriate urination. P has been urinating outside the litter box daily for the last few months. O has added more litter boxes, and cleans litter 2x a day. No LUTs. Previous bw revealed mild hyperphosphatemia 6.4, borderline hyperglobulinemia 2.9 and UA revealed usg 1.058, 1+ urine protein, 2+ blood (collected via cysto).
- Started on Hill's C/D with for a month without improvement.
- hypertension noted during cohat today. Will recheck Friday.
- submitted UA + UMIC for further testing.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor particulate non-dependent urine sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 3.7 cm in length. The right kidney measured 3.7 cm in length.

The area of the aortic trifurcation was free of pathology.

### Adrenal Glands

The left and right adrenal glands were not definitively visualized.

### Spleen

The spleen exhibited mild enlargement (1.2 cm at the mid spleen) with a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

### Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and minor non-organized debris. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

### Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.



## PATIENT

Normal visible colon wall layers were present with apparent formed feces in lumen.

Miso Becerril

## **Pancreas**

## SPECIES

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Feline

## **Free Abdomen**

## BREED

No visualized overt lymphadenopathy was present.

DSH

Minor pockets of peritoneal effusion present.

Generalized normal omental echogenicity was present.

## SEX

## ULTRASONOGRAPHIC FINDINGS

MN

### Primary

## AGE

- Normal urinary bladder and visible proximal urethra with minor urine sediment
- Normal bilateral kidneys

1yr

### Secondary

- Mild splenomegaly
- Minor peritoneal effusion

## WEIGHT

9.2lb

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## INTERPRETED BY

Correlation with pending UA and C/S is recommended. No evidence of upper or lower urinary tract structural pathology. If negative UTI, continued empirical therapy for possible low-grade idiopathic cystitis or potential behavior modification may be considered.

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DVM, DABVP  
(Canine and Feline)

The splenomegaly and minor peritoneal effusion may be explained by non-reported sedation if clinically indicated. If the patient is non-sedated and assuming normal clotting status, a screening splenic FNA cytology using a 25ga needle is warranted.

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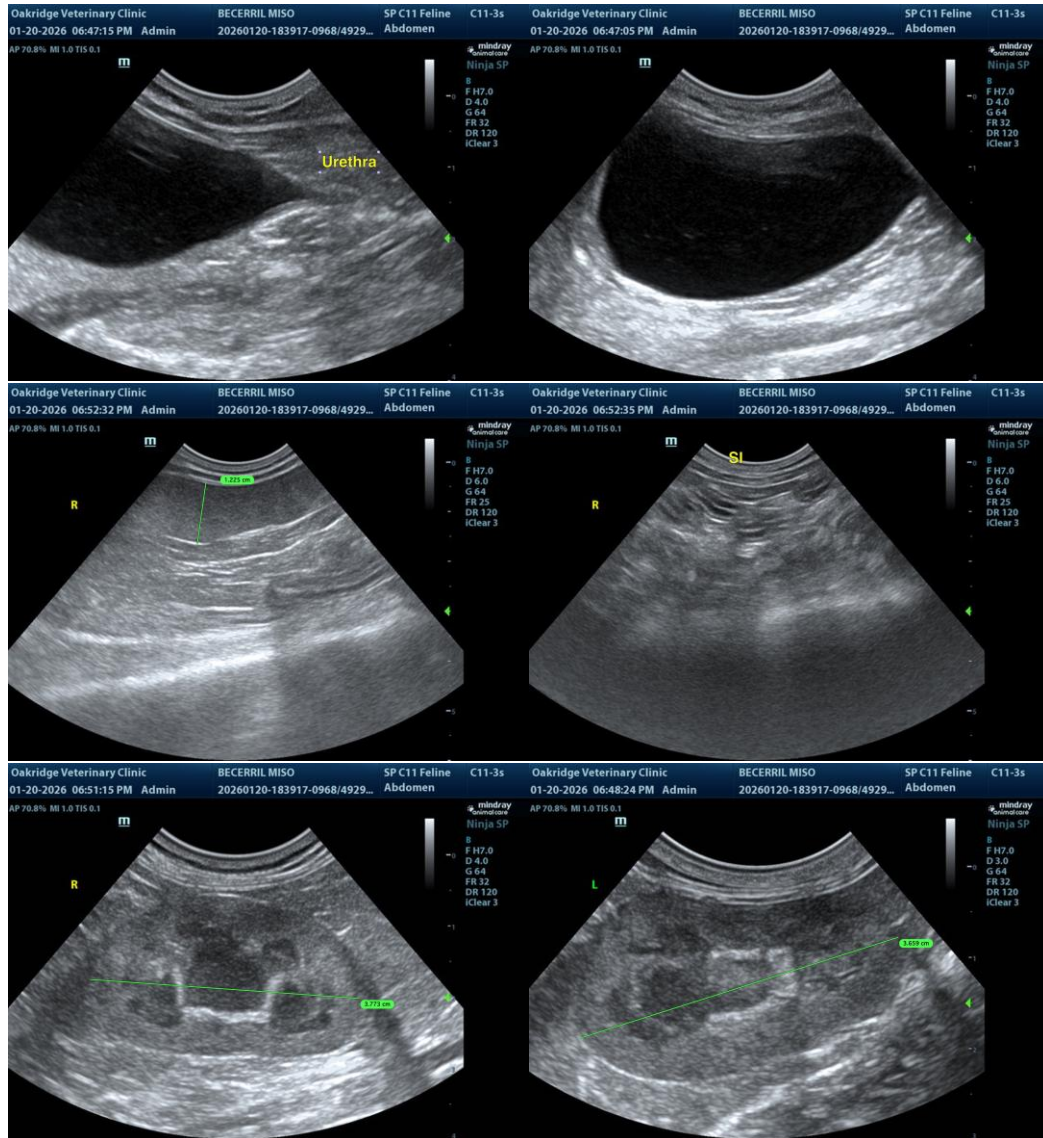
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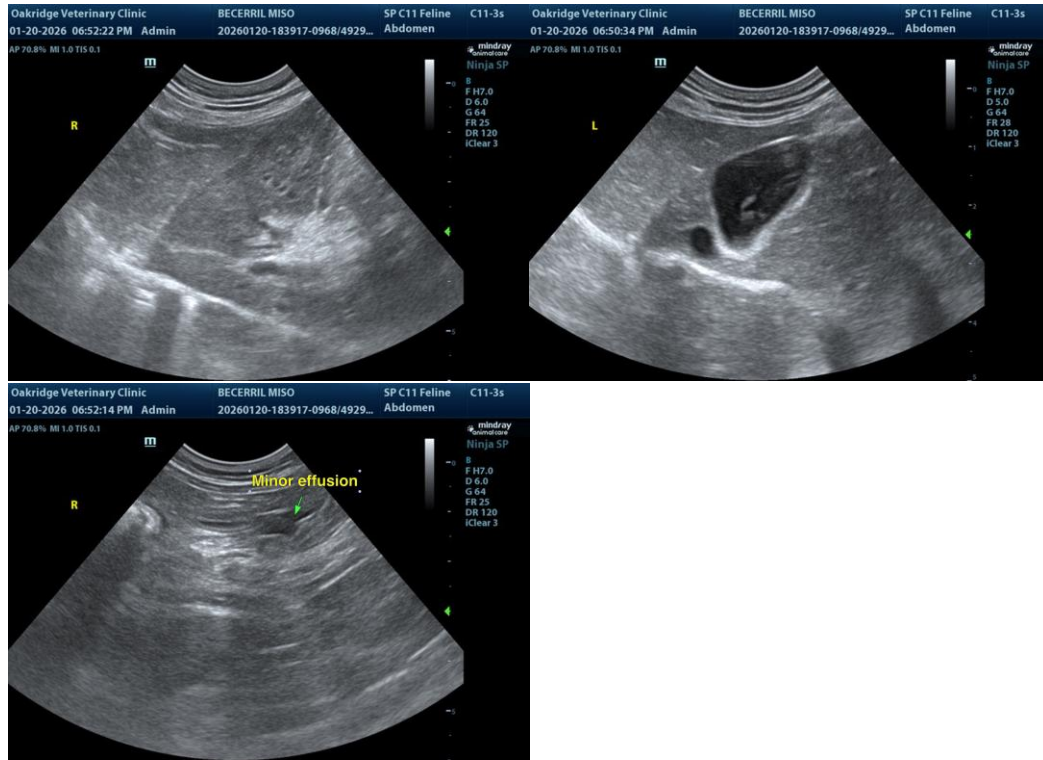
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**INTERPRETED BY**

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DVM, DABVP  
(Canine and Feline)

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.

**IMAGING PERFORMED BY**

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