



## PATIENT

Jade Healy

## SPECIES

Feline

## BREED

DSH

## SEX

Spayed Female

## AGE

9 Years 2 Months

## WEIGHT

5.25 kg

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP (Canine  
/ Feline Practice)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski DVM

## HOSPITAL NAME

Apex Veterinary  
Services LTD

## REFERRING VET

Alpine 24/7 ER Doctor

## INVOICE

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## DATE

01/22/26

## PRESENTING CLINICAL SIGNS

- Persistent concerns since discharge include poor appetite, weight loss, and behavioral overgrooming, with suspected discomfort.
- Weight: 5.25 kg (↓ from ~5.8 kg ~6 months prior)

Abnormal PE/Chem/CBC/UA Results: Temperature: 38.0 °C, Heart Rate: 192 bpm (pulse 1:1), Respiratory Rate: 26/min, MM/CRT: Pink, moist; CRT <2 sec, Mentation: QAR, Hydration: Adequate  
CBC • Leukocytosis characterized by neutrophilia • Lower HCT (~36%) compared to historical values (42–47%) • Reticulocytosis present → regenerative response without overt anemia  
Chemistry • Increased cholesterol • Mild SDMA elevation (Creatinine and BUN WNL) Endocrine • Total T4 low-normal

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with dependent lumen hyperechoic to shadowing mineral and nondependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Loss of corticomedullary border demarcation was also present. The renal medullary volume was subjectively reduced. The right kidney revealed cortical infarcts. The left kidney measured 4.3 cm in length. The right kidney measured 3.9 cm in length.

### Adrenal Glands

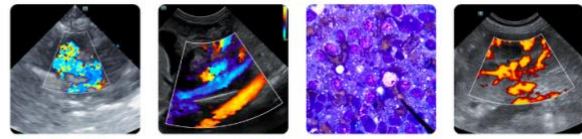
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.39 cm width.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.47 cm width.

### Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease. The spleen measured 0.90 cm width.

### Liver & Gallbladder



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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. The hepatic and portal vasculature were normal in appearance without signs of congestion.

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The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

## Gastrointestinal

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Extensive markedly thickened stomach wall exhibiting hypoechoic mural echogenicity and loss of gastric mural detail. Thickened stomach wall measured up to 2.0 cm width. The stomach contained a mild amount of retained echogenic fluid and gas. Within the fluid, a solitary visualized hypoechoic linear echo was present potentially measuring 3.0 cm in length.

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The intestinal walls demonstrated nonthickened intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. Mild segmental nonobstructive intestinal ileus and nonshadowing chyme. The duodenum wall measured 0.26 cm width. The jejunum wall measured 0.22 cm width.

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

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## Pancreas

The pancreas was indistinctly visualized owing to gastric mural pathology.

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## Free Abdomen

Asymmetrically enlarged nonhomogenous hypoechoic gastric lymph nodes were present with surrounding hyperechoic omentum. No overt peritoneal effusion was present.

## ULTRASONOGRAPHIC FINDINGS

## IMAGING PERFORMED BY

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Chmielinski DVM

## Primary Findings

- Stomach mass with retained gastric fluid and nonspecific hyperechoic lumen echo.
- Sonographically unremarkable small intestine with mild segmental ileus/chyme.
- Irregular swollen nonhomogenous gastric lymphadenopathy.

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## Secondary Findings

- Bilateral chronic renal changes with right kidney cortical infarcts.
- Moderate urinary bladder sediment/sand.

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The stomach is consistent with neoplastic criteria i.e. lymphoma or other. Potential for a small non-obstructive gastric linear foreign body is possible although artifact or mucus may present in a similar sonographic manner. Gastric endoscopy for further assessment and potential for gastric biopsies may be considered for further clarification. Concurrent FNA cytology of thickened stomach wall (assuming normal clotting status) is warranted. Probable gastric lymphatic metastasis is indicated. Oncology consult may be considered pending additional diagnostics, gastrointestinal support is recommended.

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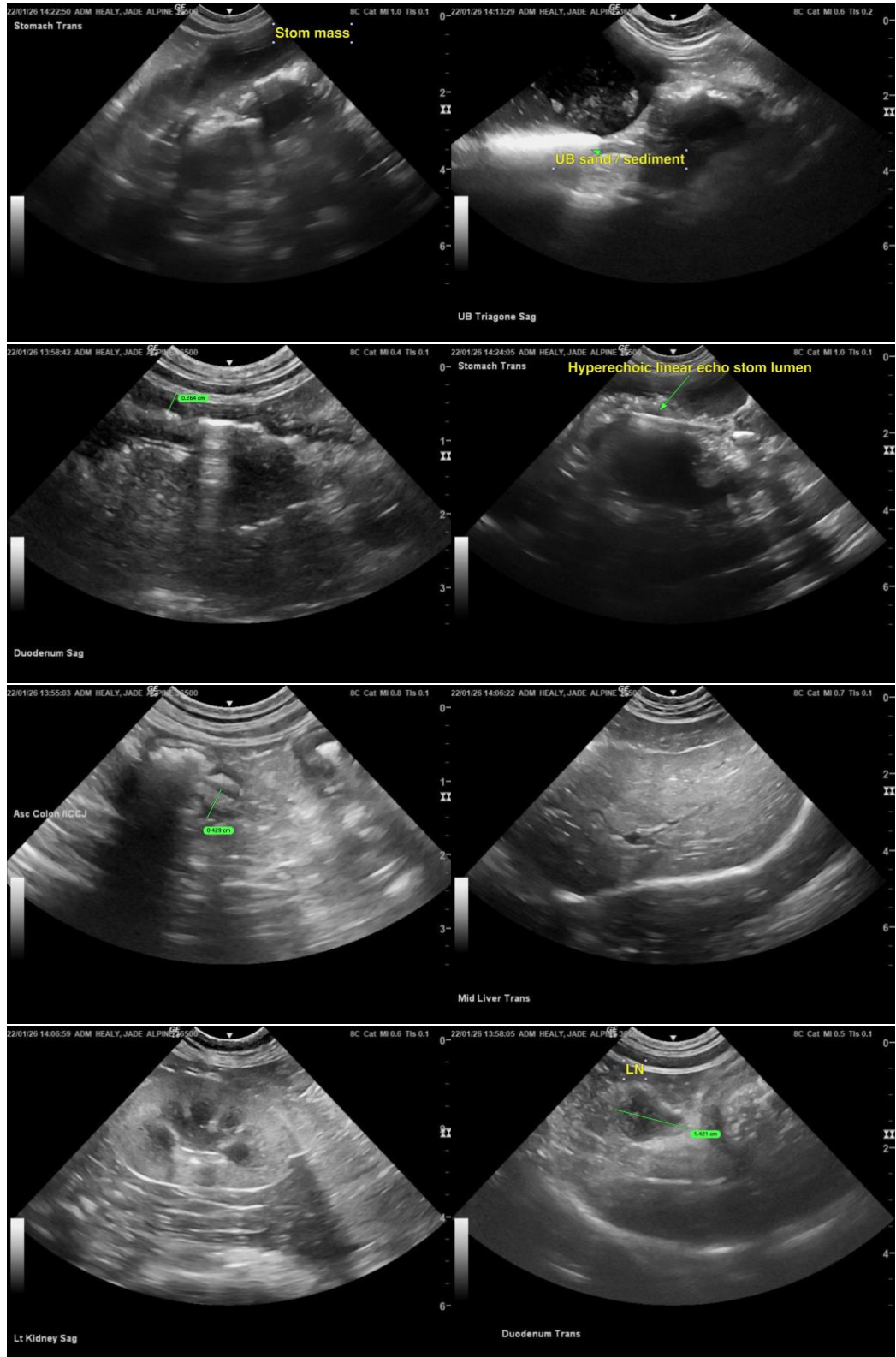
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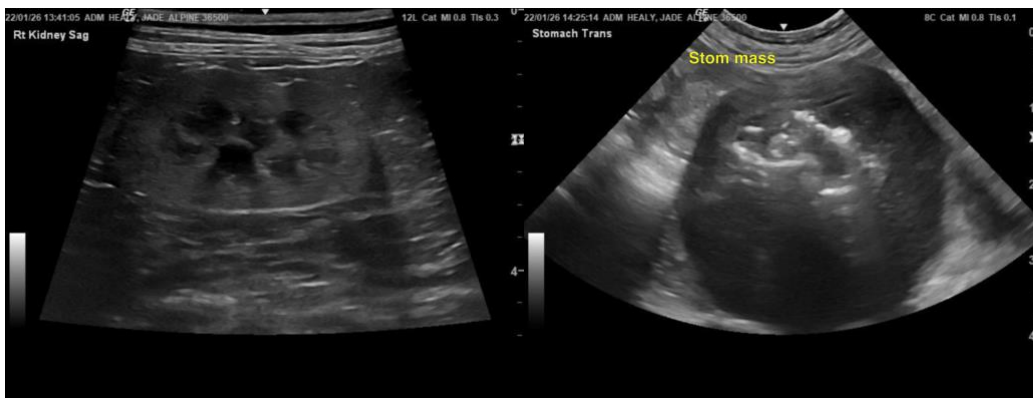
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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