



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Sadie Winters	re check prev u/s 1/27 showed large hypoechoic spleen and moderate amt of free fluid cat is doing well
<b>SPECIES</b>	<b>RECHECK ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Feline	<b>Urinary System</b>
<b>BREED</b>	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 no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
DSH	
<b>SEX</b>	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. Minor bilateral pyelectasia was present. The left kidney measured 4.2 cm in length. The right kidney measured 4.2 cm in length.
FS	
<b>AGE</b>	The area of the aortic trifurcation was free of pathology.
13	<b>Adrenal Glands</b>
<b>WEIGHT</b>	The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.
8.4	<b>Spleen</b>
<b>INTERPRETED BY</b>	The spleen exhibited persistent mild yet subjectively improved enlargement 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. The spleen measured 1.0-1.1 cm in width at the level of the hilus.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
<b>IMAGING PERFORMED BY</b>	<b>Liver/Gallbladder</b>
Jenn	The liver was subjectively normal in size, structure, and contour. The liver parenchyma exhibited mild uniform reduced echogenicity with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Rockaway Animal Hospital	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.
<b>REFERRING VET</b>	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 ileus, obstruction or foreign material.
Dr. Maniar	
<b>INVOICE</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
12837ag	<b>Pancreas</b>
<b>DATE</b>	The pancreas exhibited subtle prominent size with mildly rounded contour and mild hypoechoic to homogenous parenchyma.
01/31/2023	



**PATIENT**

*Free Abdomen*

Sadie Winters

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**SPECIES**

Feline

**ULTRASONOGRAPHIC FINDINGS**

- Minor bilateral pyelectasia-possibly secondary to IVF therapy if clinically applicable
- Sonographically unremarkable GI tract
- Persistent to mildly improved splenomegaly-nonspecific
- Mildly hypoechoic liver
- Suspect low-grade pancreatitis, possibly resolving

**BREED**

DSH

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

FS

No evidence of previously noted free abdominal fluid. Assuming normal clotting status and using a 25g needle, a splenic FNA for screening cytology could be considered for further assessment. A spec fPL suggested for further clarification of possible persistent to resolving pancreatitis. Continued as needed supportive care would be appropriate.

**AGE**

13

**WEIGHT**

8.4

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

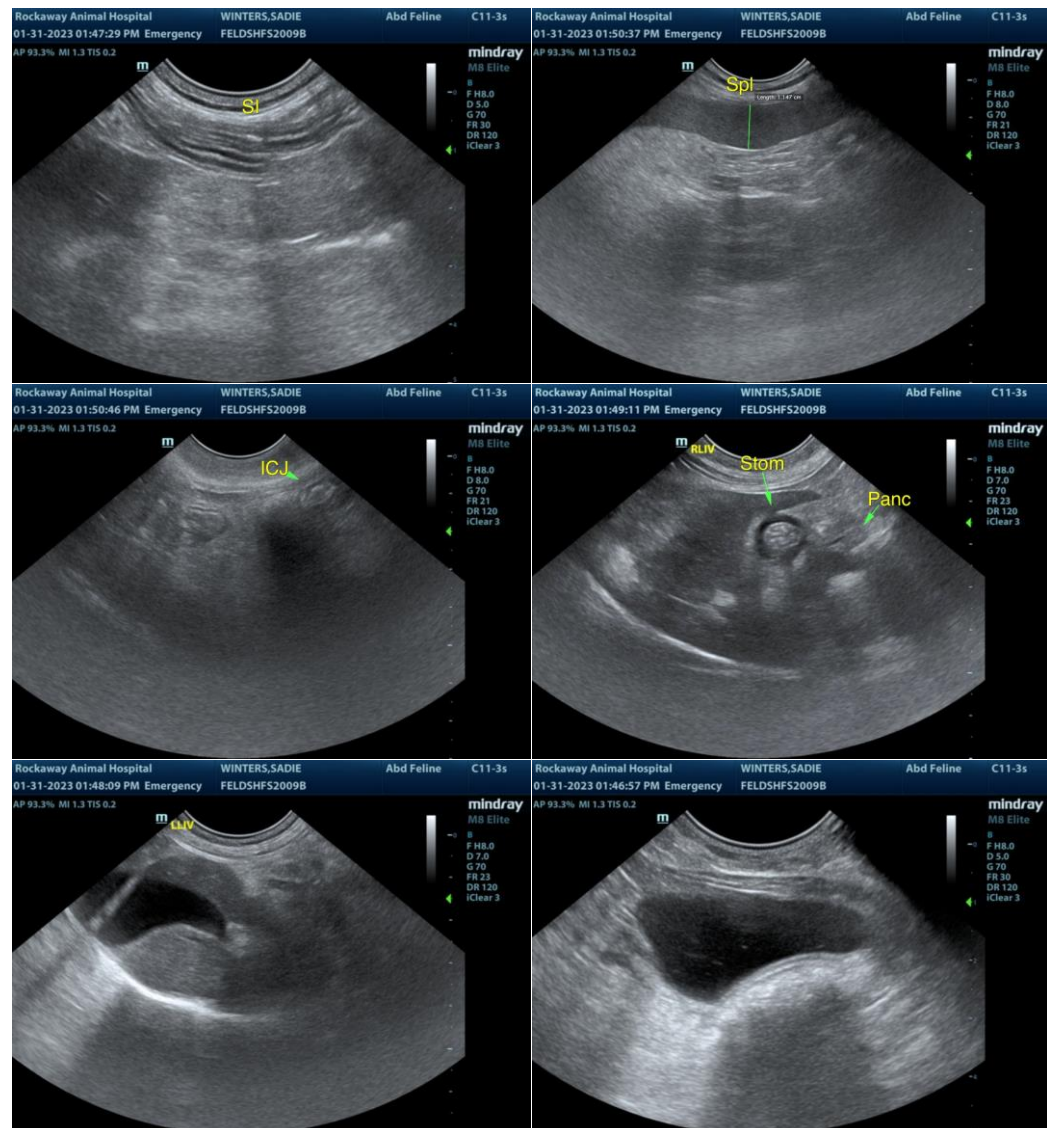
Dr. Maniar

**INVOICE**

12837ag

**DATE**

01/31/2023





**PATIENT**

Sadie Winters

**SPECIES**

Feline

**BREED**

DSH

**SEX**

FS

**AGE**

13

**WEIGHT**

8.4

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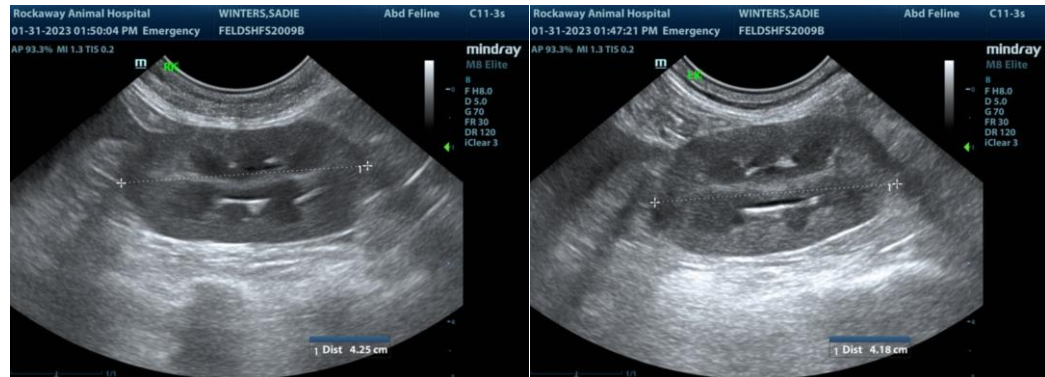
Dr. Maniar

**INVOICE**

12837ag

**DATE**

01/31/2023



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.

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