



**PATIENT PRESENTING CLINICAL SIGNS**

Oreo Bartley History: Weight loss, back-end paresis

**SPECIES** Current Medications: methimazole, gabapentin

Feline Abnormal PE/Chem/CBC/UA Results: Oct 30/25 ALT high 216 (N 6-109 U/L), AST high 71 (N 6-70 U/L), calcium high 3.10 (N 2-2.9 mmol/L), Total T\$ high 61.1 (N 13-56 nmol/L); urine SG 1.055, UPC 0.126 ; spec PLI 90 (N 0-120); cultured Strep deglaciated from urine; 2 cavity echo + abd US done May 20/25 Primary Question to Be Answered in This Exam Bladder stones? Pathology in liver?

**BREED**

DSH

**SEX**

Male Neutered

**AGE**

16 yrs

**WEIGHT**

8.9 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Amanda Stewart

**HOSPITAL NAME**

Halton Peel

**REFERRING VET**

Walters

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12930

**DATE**

12/12/25

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART & ABDOMEN**

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	--	183	0.6	1.6	0.52	45	79
FELINE CARDIAC PARAMETERS	LA/AO (M-mode)	LA/AO HEART BASE (Sisson)	LAD LA MAX 4 Chamber		LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)
NORMAL PARAMETER	<1.5	1.6	0.7-1.7		<1.6	<1.3	40-60
PATIENT	--	1.0	1.1		--	1.1	--
Adapted from June Boon, Veterinary Echocardiography, 1998 Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705							

**Cardiac Presentation**

The echocardiogram in this patient demonstrated normal **left atrial** size and structure. Chamber volume and blood echogenicity were normal, no spontaneous contrast or thrombus. The cranial and caudal **mitral** valve leaflets presented minor irregular age-related changes that are not clinically significant at this time with adequate extension in systole and union in diastole. No significant MR noted on doppler. The **left ventricle** presented borderline increased septal thickness with a-linear contour. The **myocardium** presented remodeling consistent with expected related change with possible mild fibrosis. Mildly prominent remodeled papillary muscles were present. **Contractility** of the ventricular walls was adequate and in normal range for this breed and patient size. The **left ventricular outflow** tract demonstrated normal laminar flow with subjectively unremarkable structure. Subjective assessment of the **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated expected findings for this age patient. The **right ventricle** was of normal size (1/3 diameter of LV), echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio).



**PATIENT**

Normal measured RVOT velocity was noted. No visible **pericardial** or free pleural fluid was noted. The **mediastinum** was free of masses in the visible window.

Oreo Bartley

**Urinary System**

**SPECIES**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Concurrent minor urinary bladder and non-obstructive proximal urethral lumen mineral was present. Moderate, non-dependent, echogenic to particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

Feline

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No evidence of medial iliac or sublumbar lymphadenopathy or masses. No evidence of distal aortic thrombus.

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Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild to moderate indistinct loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.4 cm in length. The right kidney measured 3.6 cm in length.

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**Adrenal Glands**

The left and right adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.40 cm. The right adrenal gland measured 0.37 cm.

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**Spleen**

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 DVM, DABVP  
 (Canine and Feline)

The spleen exhibited primarily heterogeneous parenchyma, was normal in size with minor medial capsule asymmetry. Intermittent, discrete, non-capsule deforming, well-defined, symmetrical, hyperechoic nodules were present throughout the cranial to caudal 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 or neoplastic changes were not noted. The hyperechoic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

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**Liver**

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The liver was subjective borderline to possible mildly enlarged in size. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with congealed, echogenic, nonmineralized biliary sludge present in the caudal lumen of the gallbladder neck. The cystic duct and common bile ducts were normal without evidence of dilation.

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**Gastrointestinal**

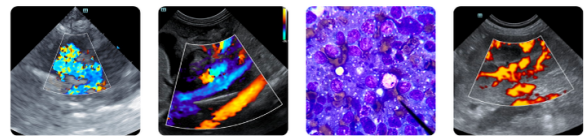
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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, variably echogenic, non-shadowing ingesta without signs of obstruction or foreign material.

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The small intestine presented intact borderline to thickened wall with primarily generalized non-shadowing ingesta to the level of the colon.



**PATIENT**

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

Oreo Bartley

**Pancreas**

**SPECIES**

The left pancreas was normal in size with capsule asymmetry and heterogeneous remodeled to mildly hyperechoic parenchyma. Mildly prominent pancreatic duct.

Feline

**Free Abdomen**

**BREED**

No overt lymphadenopathy or peritoneal effusion was present.

DSH

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

- LV myocardial remodeling, borderline increased septal dimension
- Mildly prominent remodeled papillary muscles
- Normal LA
- Bilateral chronic renal changes

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- Urinary bladder sediment with mild, non-dependent to non-obstructive proximal urethral lumen mineral

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- Intact borderline/mild thickened small intestinal wall with gastrointestinal ingesta consistent with food echogenicity – patient variant, IBD or other inflammatory enteropathy, less likely emerging intestinal neoplasia, all potentials

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- Left limb chronic pancreatitis
- Subjective borderline/mild hepatomegaly – subjective benign
- Congealed gallbladder debris
- Small hypoechoic splenic nodules – likely benign, suggestive of small myelolipomas

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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The lack of LA enlargement indicates previous thrombotic event is less likely. No indication for cardiac medications. Assuming normal clotting status and using 25-gauge needle, hepatic FNA cytology could be considered primarily to assess for evidence of inflammation. A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or rule out occult disease which may cause weight loss.

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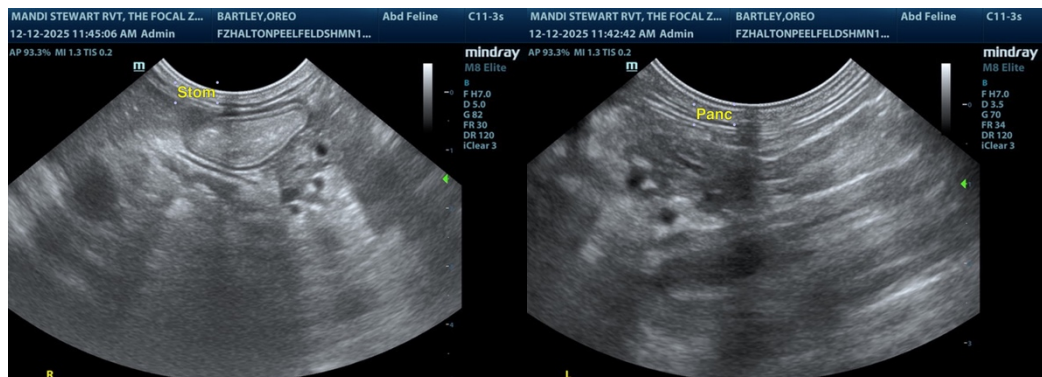
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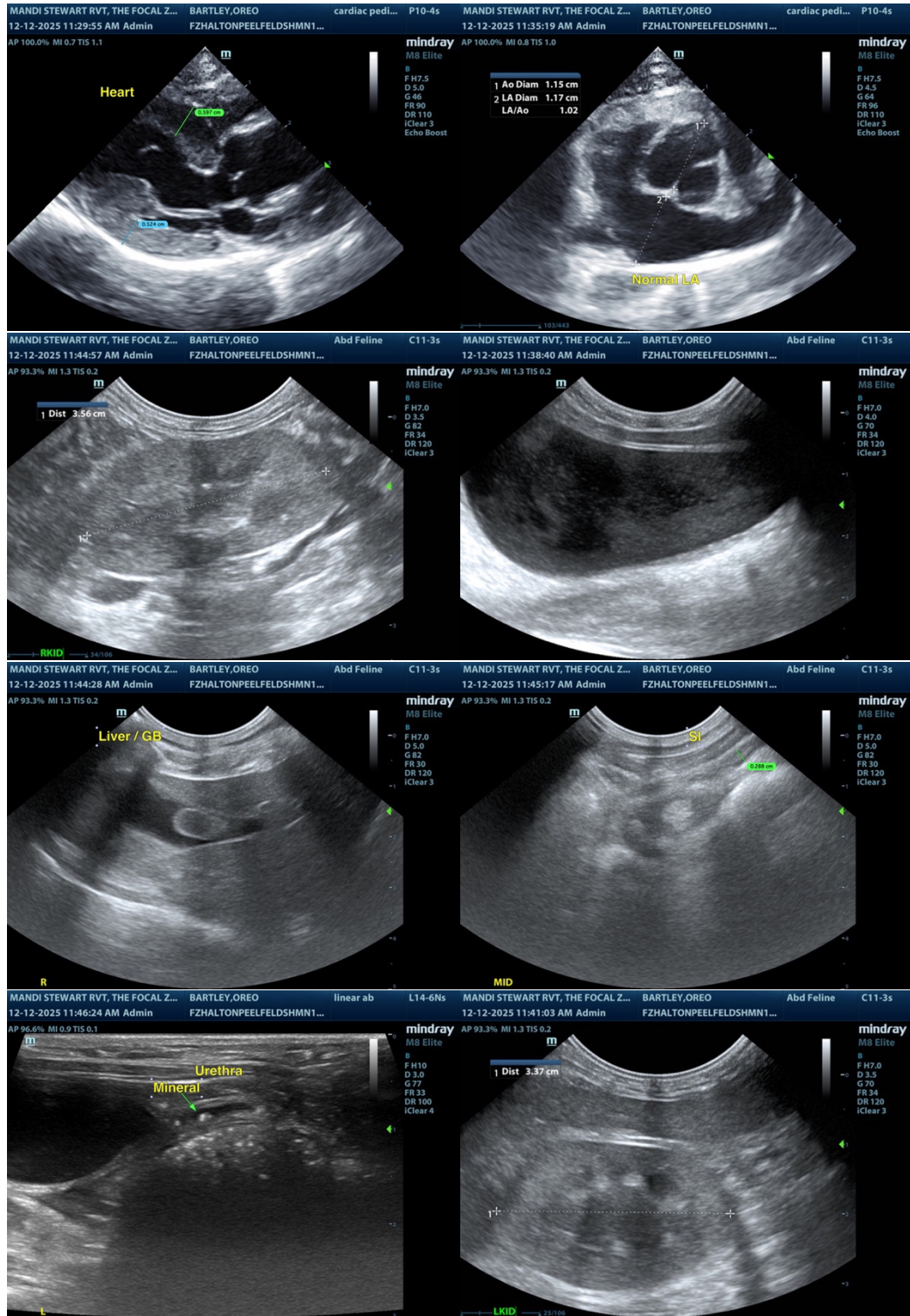
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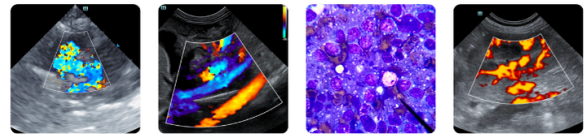
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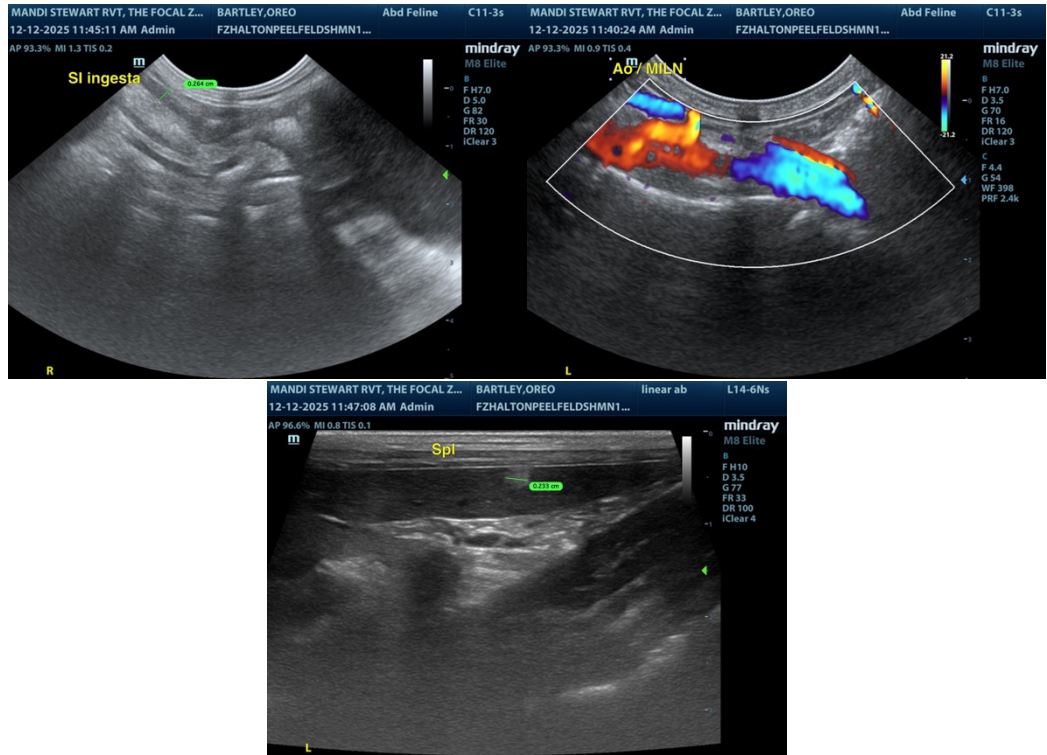
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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