



PATIENT

Yeti Uhrbach

SPECIES

Feline

BREED

Siberian

SEX

Neutered Male

AGE

1 Year 9 Months

WEIGHT

5.6 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Mariusz
Chmielinski DVM

HOSPITAL NAME

Apex Veterinary
Services LTD

REFERRING VET

VetDirect/Dr.
Bregliano

INVOICE

12671

DATE

12/15/25

PRESENTING CLINICAL SIGNS

Acute vomiting started on Thursday - December 11 - treated at SAVE - no more vomiting but still not eating. Last Vomiting on Wednesday - treated with Emavert. Previous ex lap sx in August

Abnormal PE/Chem/CBC/UA Results: Vital Signs: Temperature [Celsius]:38.0, Heart Rate/min (HR):182, HR: Pulse Ratio: 1:1, Respiratory Rate/ min: 26, Respiratory Effort: 0, Mucus Membranes/ CRT: pink, tacky/ CRT< 2 sec ,Mentation: BAR ,Hydration: ~ 6% DeH2O , BCS (scale 1 to 5): 3.5/5, mild to moderate abdominal pain on palpation.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 change were noted.

Normal size and margination was 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 4.3 cm in length. The right kidney measured 4.2 cm in length.

Adrenal Glands

The left adrenal gland was overtly normal in size, position and shape. The left adrenal gland measured 0.33 cm width.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.32 cm width.

Spleen

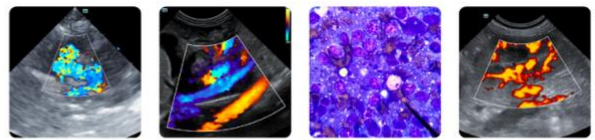
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. The spleen measured 0.91 cm width level of the mid spleen.

Liver

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

Gastrointestinal

The stomach presented intact wall layering. The stomach was overall nondistended containing mild retained anechoic fluid and mild lumen gas. No evidence of obstruction to pyloric outflow. Pylorus wall measured 0.24 cm wall width.



PATIENT

Yeti Uhrbach

SPECIES

Feline

BREED

Siberian

SEX

Neutered Male

AGE

1 Year 9 Months

WEIGHT

5.6 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Mariusz Chmielinski DVM

HOSPITAL NAME

Apex Veterinary Services LTD

REFERRING VET

VetDirect/Dr. Bregliano

INVOICE

12671

DATE

12/15/25

The small intestine presented with primarily intact wall layering and normal wall layer ratio. The small intestine exhibited primarily generalized mild distention with mild echogenic fluid and segmental gas. A strongly shadowing mild irregular echo was present in the subjective area of the distal small intestine or ileocolic junction measuring approximately 1.25 cm. Intact mildly thickened distal small intestine to ileum wall in the area of the shadowing lumen echo measuring 0.30 cm wall width. By comparison, the jejunum wall measured 0.20 cm wall width and the duodenum wall measured 0.22 cm wall width.

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

Pancreas

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.

Free Abdomen

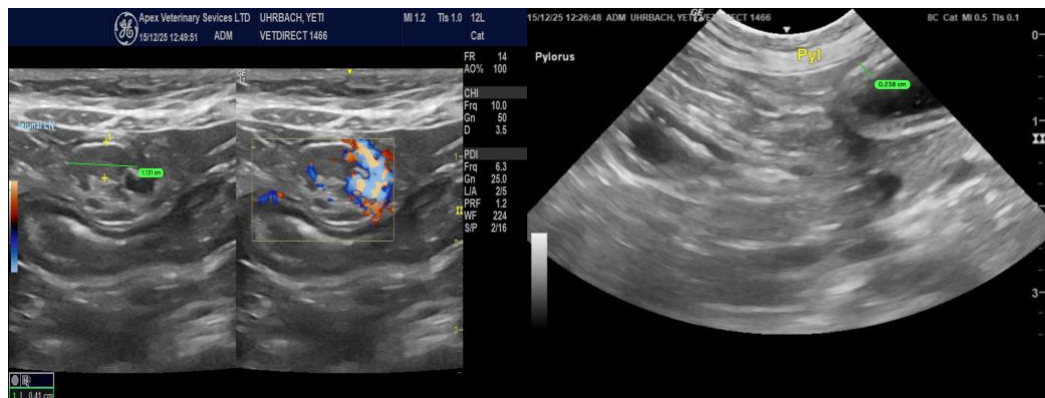
Intermittent mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 1.1 cm x 0.41 cm. Intermittent subtle to scant pockets of peritoneal effusion were visualized.

ULTRASONOGRAPHIC FINDINGS

- Distal small intestine to ileocolic foreign body with primarily generalized mild gastrointestinal obstructive pattern proximal.
- Intermittent mild mesenteric lymphadenopathy with subtle to scant peritoneal effusion- lymph nodes consistent with benign/mild reactive criteria.
- Normal area of pancreas.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory laparotomy with gross inspection of the gastrointestinal tract with expectation toward distal enterotomy is recommended. Given the patient's history and pending gross inspection of the gastrointestinal tract, intestinal biopsies should be considered to assess for underlying intestinal disease.





PATIENT

Yeti Uhrbach

SPECIES

Feline

BREED

Siberian

SEX

Neutered Male

AGE

1 Year 9 Months

WEIGHT

5.6 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Mariusz
Chmielinski DVM

HOSPITAL NAME

Apex Veterinary
Services LTD

REFERRING VET

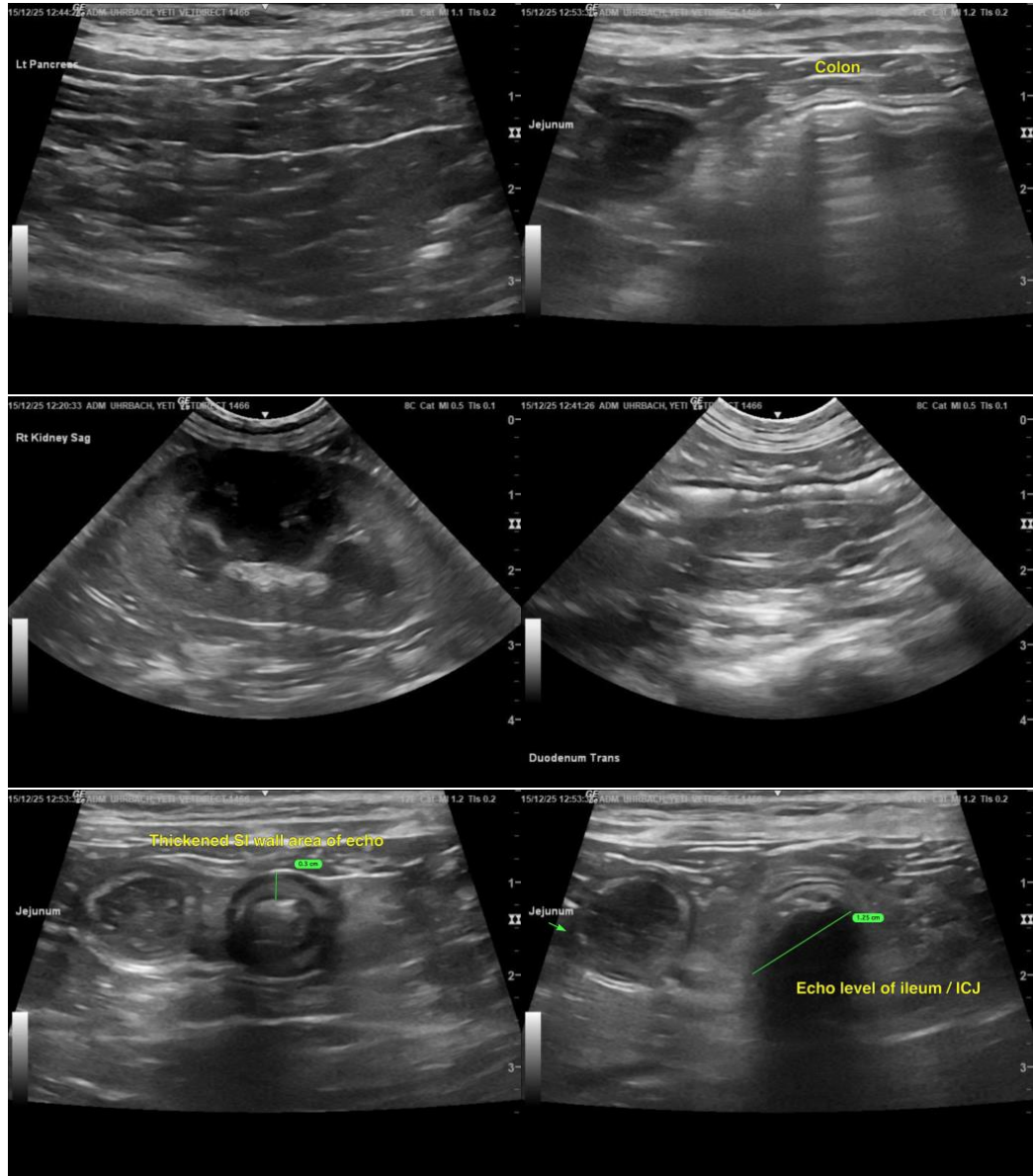
VetDirect/Dr.
Bregliano

INVOICE

12671

DATE

12/15/25





PATIENT

Yeti Uhrbach

SPECIES

Feline

BREED

Siberian

SEX

Neutered Male

AGE

1 Year 9 Months

WEIGHT

5.6 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Mariusz
Chmielinski DVM

HOSPITAL NAME

Apex Veterinary
Services LTD

REFERRING VET

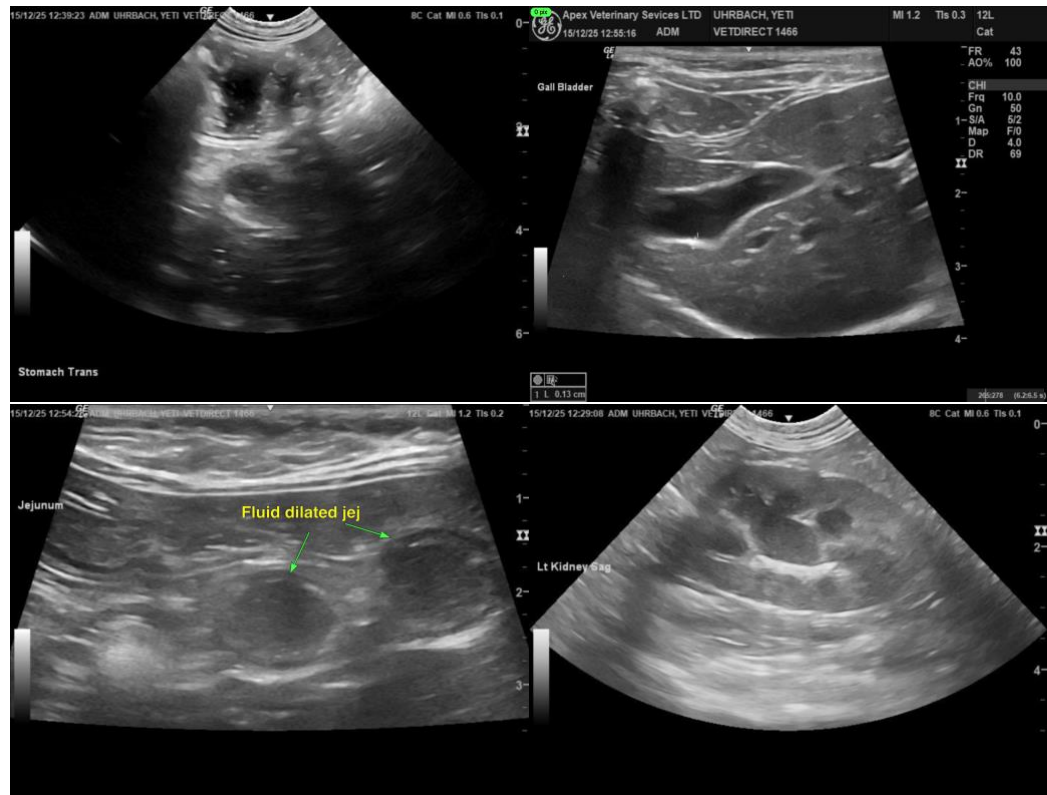
VetDirect/Dr.
Bregliano

INVOICE

12671

DATE

12/15/25



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)

info@SonoPath.com