



## PATIENT

Hershey Konesky

## SPECIES

Feline

## BREED

DSH

## SEX

Neutered Male

## AGE

18 Years

## WEIGHT

12.5 pounds

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP

## IMAGING PERFORMED BY

Dr. Trae Cutchin

## HOSPITAL NAME

Friendship Springs  
Veterinary Care

## REFERRING VET

Dr. Trae Cutchin

## INVOICE

12786

## DATE

12/19/25

## PRESENTING CLINICAL SIGNS

Generally, stable but lately has gotten picky about food and isn't eating anything but treats. Weight has gone down over the last five months but is up slightly today from previous weight a month ago. BCS is 5/9.

Abnormal PE/Chem/CBC/UA Results: Labs from early October show very mild anemia, slight increase sdma, creatinine technically normal but 2.0 mg/dl, slight hypercalcemia, isosthenuria. Follow up labs are pending.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder was distended in size with normal tone. The trigone, cystourethral junction and visible pelvic urethra to a depth of 3.0 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 change were noted. No evidence of obstruction to urine outflow.

The area of the aortic trifurcation was free of pathology.

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 corticomedullary border demarcation with mid medullary and peri-pelvic hyperechoic parenchyma. No evidence of pelvic dilation was present. The left kidney measured 3.8 cm in length. The right kidney measured 3.1 cm in length.

### Adrenal Glands

No obvious pathology in the area of the left adrenal gland.

The area of the right adrenal gland was free of obvious pathology.

### Spleen

The spleen was borderline enlarged and 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 1.0 cm width level of the mid spleen. A nondisruptive well demarcated mid splenic hyperechoic nodule was visualized measuring 0.45 cm in diameter.

### Liver

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. A solitary ventrocaudal thinly walled cyst was present measuring 0.83 cm in diameter.



## PATIENT

Hershey Konesky

## SPECIES

Feline

## BREED

DSH

## SEX

Neutered Male

## AGE

18 Years

## WEIGHT

12.5 pounds

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP

## IMAGING PERFORMED BY

Dr. Trae Cutchin

## HOSPITAL NAME

Friendship Springs  
Veterinary Care

## REFERRING VET

Dr. Trae Cutchin

## INVOICE

12786

## DATE

12/19/25

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

### **Gastrointestinal**

The stomach presented intact wall layering. The stomach contained a mild amount of retained anechoic fluid and indistinctly visualized variably echogenic area of ingesta with potential for fluid absorbing echo measuring approximately 1.65 cm in diameter. Pylorus wall measured 0.24 cm wall width with no overt evidence of obstruction to pyloric outflow.

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. Duodenum wall measured 0.27 cm wall width. Jejunum wall measured 0.25 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**

No evidence of significant omental lymphadenopathy or peritoneal effusion was present.

## **ULTRASONOGRAPHIC FINDINGS**

- Chronic renal changes exhibiting medullary parenchyma hyperechogenicity.
- Borderline splenomegaly with hyperechoic splenic nodule- sedation if clinically applicable, hyperplasia, hematopoiesis, hyperechoic myelolipoma versus hyperplasia, infiltrative splenic neoplasia thought less likely.
- Mild hepatomegaly with small ventrocaudal intraparenchymal cyst- hyperplasia, inflammation, occult hepatic neoplasia thought less likely.
- Mild retained gastric fluid and indistinct retained ingesta or fluid absorbing echo.
- Sonographically normal small intestine/area of pancreas.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Correlation with pending follow up lab work and urinalysis is recommended. If patient is nonsedated (assuming normal clotting status and using a 25-gauge needle), screening hepatosplenic FNA cytology to assess for occult disease is warranted. The indistinct retained gastric ingesta or fluid absorbing foreign echo is nonspecific. Correlation with most recent meal ingestion recommended. If reported fasted prior to the ultrasound, documented 12-hour NPO and sonographic reassessment of the stomach is indicated. A GI panel to include PLI, TLI, cobalamin and folate and three view chest radiographs to assess for additional nonobvious disease as a contributing factor may be considered.



**PATIENT**

Hershey Konesky

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

18 Years

**WEIGHT**

12.5 pounds

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP

**IMAGING PERFORMED BY**

Dr. Trae Cutchin

**HOSPITAL NAME**

Friendship Springs  
Veterinary Care

**REFERRING VET**

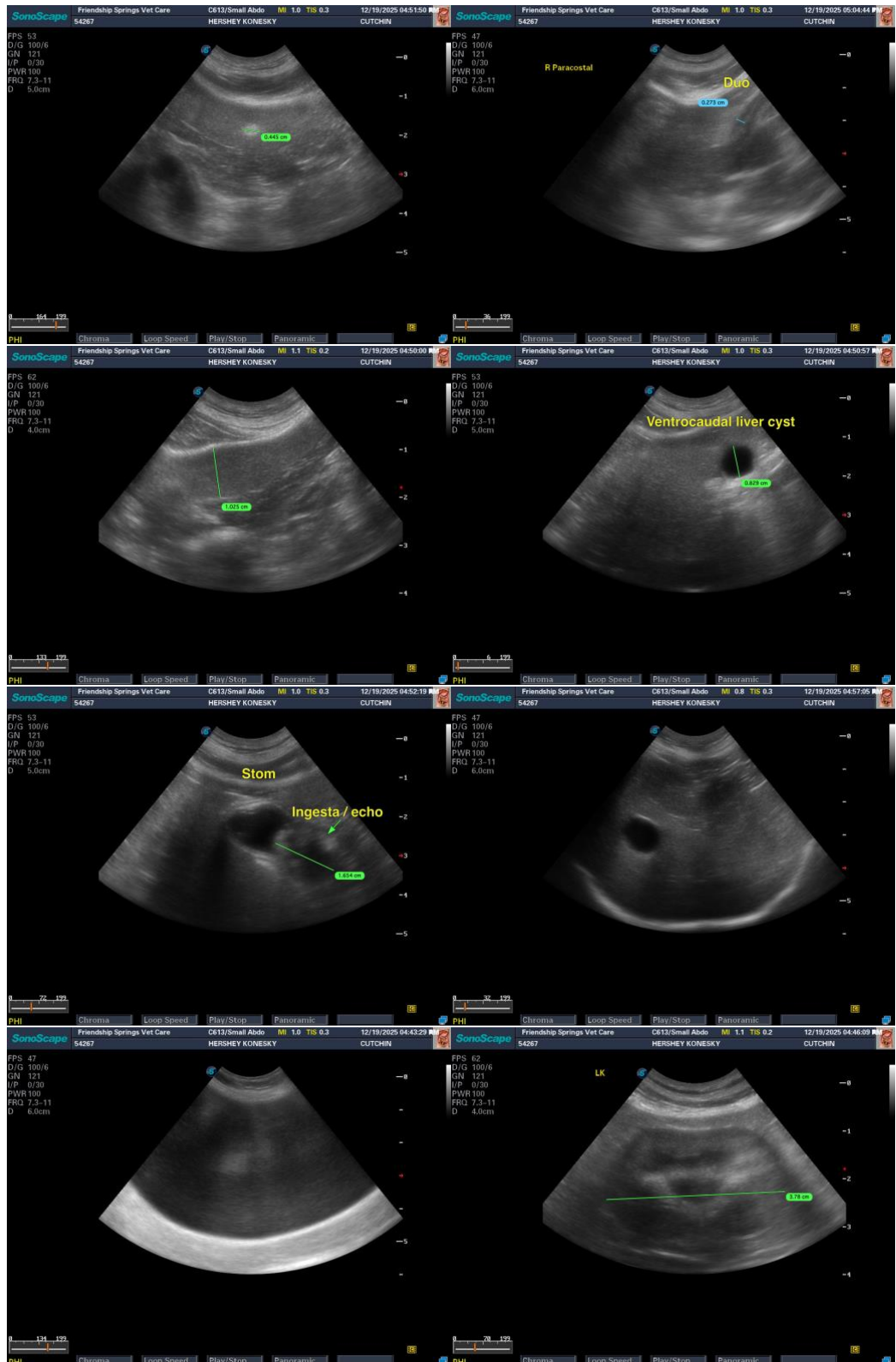
Dr. Trae Cutchin

**INVOICE**

12786

**DATE**

12/19/25





**PATIENT**

Hershey Konesky

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

18 Years

**WEIGHT**

12.5 pounds

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP

**IMAGING PERFORMED BY**

Dr. Trae Cutchin

**HOSPITAL NAME**

Friendship Springs  
Veterinary Care

**REFERRING VET**

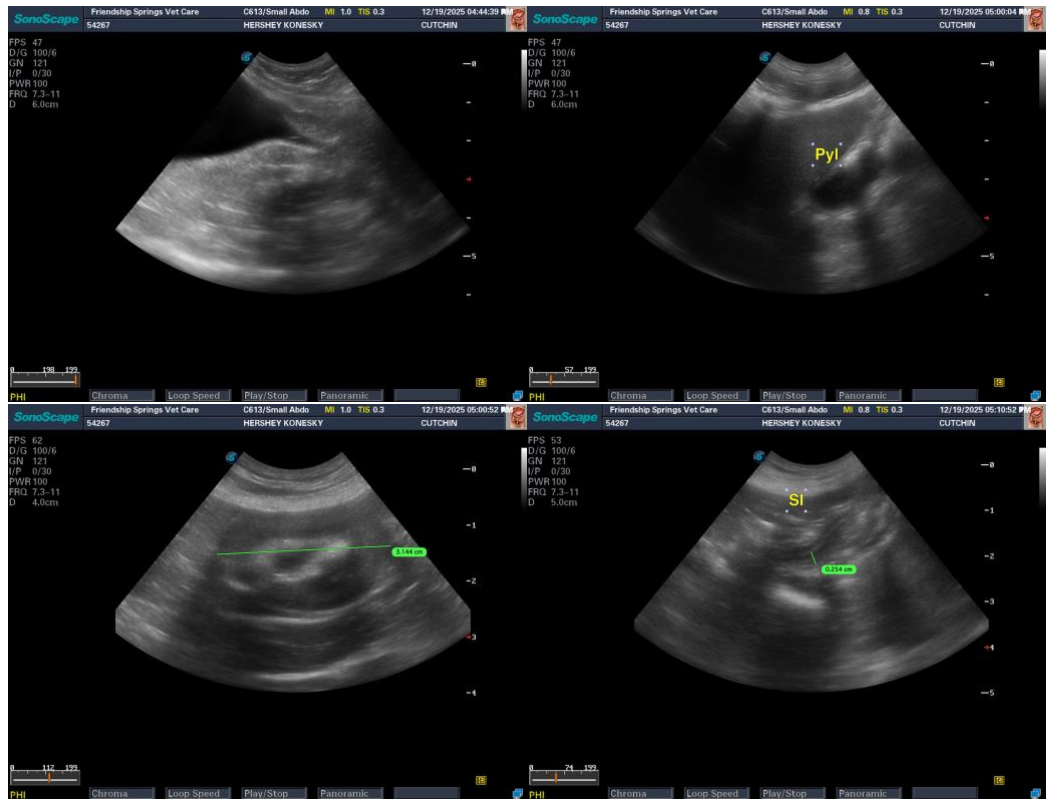
Dr. Trae Cutchin

**INVOICE**

12786

**DATE**

12/19/25



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](mailto:info@SonoPath.com)