



PATIENT

Crimson Mang

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12yr

WEIGHT

12.2lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Karla Schultz

HOSPITAL NAME

Northshore Veterinary
Hospital

REFERRING VET

Karla Schultz

INVOICE

23341

DATE

12/24/2025

PRESENTING CLINICAL SIGNS

chronic (years) vomiting and chronic (year) hypokalemia, AUS 6/2025 showed mass in stomach. O pursuing treatment now, starting with staging. Met check radiographs submitted for interpretation; endoscopic biopsies of mass/duodenum/"normal" stomach submitted for biopsy; focal gastric US here to try to see how diffuse the changes are within gastric wall layers

Abnormal PE/Chem/CBC/UA Results: PE NSF. No weight loss. CBC/chem/UA: mild chronic neutropenia, mild-mod chronic hypokalemia (3.2), decreased USG (1.022) with quiet stick/sediment. Rest WNL including proteins, thyroid. CXR: no overt metastasis, submitting for interpretation

The submitted study contained 16 images, primarily of the stomach.

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Liver/Gallbladder

The visualized liver and gallbladder were sonographically normal.

Gastrointestinal

The stomach was non-distended in size with minor retained fluid and non-shadowing ingesta/ chyme. Overtly normal intact wall in the fundus and overall gastric body with intact normal appearing stomach wall measuring 0.22 cm width.

Regionally thickened stomach wall in the subjective area of the pylorus and likely extending into the upper duodenum primarily involving the pylorus and upper duodenal mucosa was present with associated mild non-homogenous thickened mucosa without overt evidence of mineralization.

Given lack of gastric distention, no obvious evidence of obstruction to pyloric outflow.

The thickened stomach and subjective upper duodenum wall measured 0.8- 0.9 cm in width.

The visualized segments of small intestine were sonographically normal.

Pancreas

The area of the pancreas was sonographically normal.

ULTRASONOGRAPHIC FINDINGS

Primary

- Regionally thickened stomach and subjective upper duodenum wall, mild retained gastric fluid and non-shadowing ingesta/ chyme.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the thickened stomach and subjective upper duodenum wall may include inflammatory, infectious, granulomatous or neoplastic etiologies. Correlation with pending biopsies is indicated. Pending histopathology, canned novel protein or hydrolyzed diet trial and as needed gastro protectants +/- empirical coverage for helicobacter with avoidance of dry food may prove beneficial. A serum aldosterone level could be considered if persistent or progressive hypokalemia.



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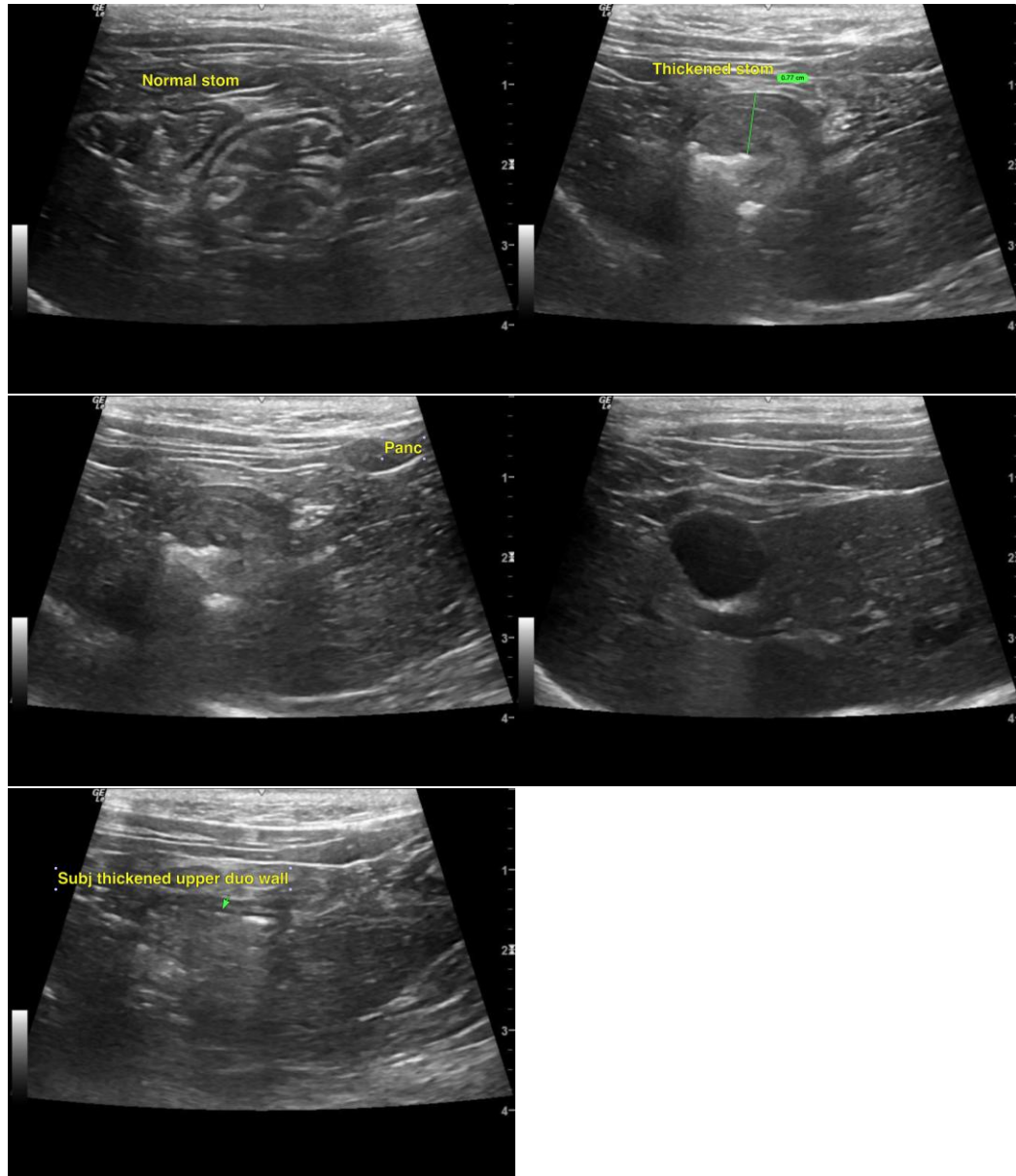
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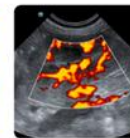
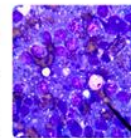
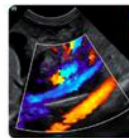
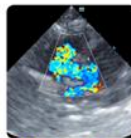
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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info@sonopath.com

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