



## PATIENT

Jade Bruno

## SPECIES

Feline

## BREED

Manx Coon

## SEX

FS

## AGE

6yr

## WEIGHT

18lb

## INTERPRETED BY

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

## IMAGING PERFORMED BY

John Ammeraal DVM

## HOSPITAL NAME

Sova Animal Hospital

## REFERRING VET

John Ammeraal DVM

## INVOICE

23335

## DATE

12/26/2025

## PRESENTING CLINICAL SIGNS

Jade presented to Eclipse ER due to vomiting and having diarrhea. Last night, owner came home to multiple piles of vomit in the house. There was diarrhea in the litterbox - no blood in stool or vomit noted. O gave 1.5 tab of metronidazole 50mg - p vomited up half tab. O gave 8mg cerenia at midnight. P has not vomited since then but was still drooling this morning and would not eat. O gave 1/4 tab pepcid this morning. P still having diarrhea. She was vocalizing this morning as well and seems lethargic. Had a slightly decreased appetite for the past 4 days which is not very abnormal for her. Was otherwise doing well at home. No known dietary indiscretion

Abnormal PE/Chem/CBC/UA Results: Abdomen soft non painful on palpation Labs Eclipse-Glucose 182 (H), creatinine 0.7 (L), Na 169 (H)

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

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 with no evidence of pelvic dilation. The left kidney measured 4.3 cm in length. The right kidney measured 4.4 cm in length.

The area of the aortic trifurcation was free of pathology.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.53 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.54 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.

### Liver/Gallbladder

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. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was



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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 with a normal wall layer ratio. The lumen of the stomach contained mild to moderate progressively shadowing ingesta with no signs of obstruction.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental, generally mild non-shadowing intestinal ingesta without obstructive pattern or visualized shadowing content to the level of the colon.

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

### **Pancreas**

The area of the pancreas was sonographically normal.

### **Free Abdomen**

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

## **ULTRASONOGRAPHIC FINDINGS**

### **Primary**

- Sonographically normal gastrointestinal tract with progressively shadowing gastric and segmental non-shadowing intestinal ingesta
- Non-distended colon with formed fecal matter
- Normal area of the pancreas

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

No evidence of gastrointestinal mural pathology or mechanical obstructive pattern. The gastrointestinal ingesta may indicate retained food echogenicity which may suggest some degree of metabolic gastrointestinal ileus owing to non-specific or non-structural gastroenteritis. Intermixed gastric hairball density or similar cannot be definitively excluded. Gastrointestinal support with documented 12-hour fast and sonographic reassessment of the gastrointestinal tract is recommended. Spec FPL or full GI panel is warranted to assess for low-grade pancreatitis or non-structural intestinal disease which may present sonographically normal. Three view chest radiographs are recommended if not done to assess for occult thoracic or esophageal pathology.



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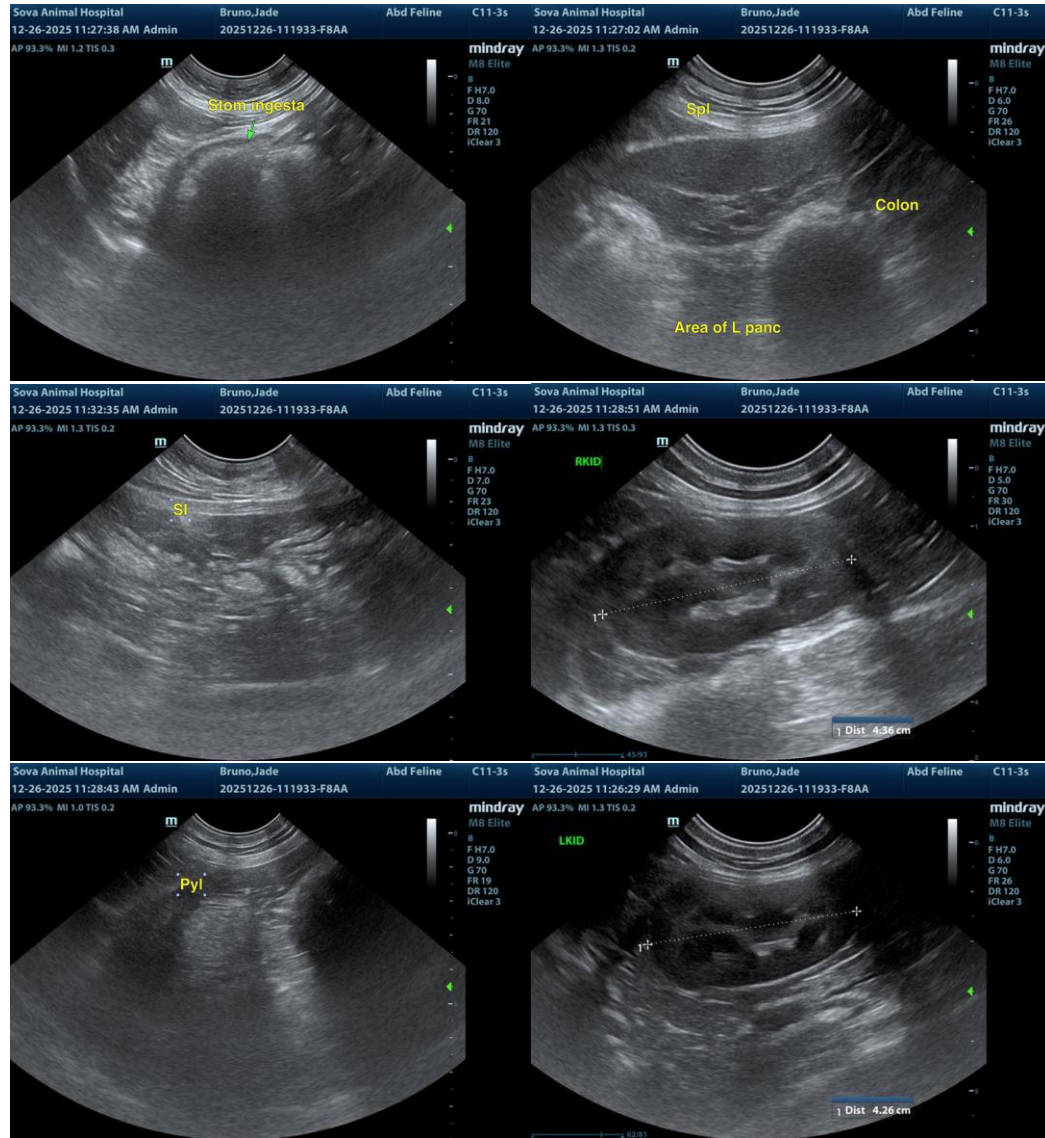
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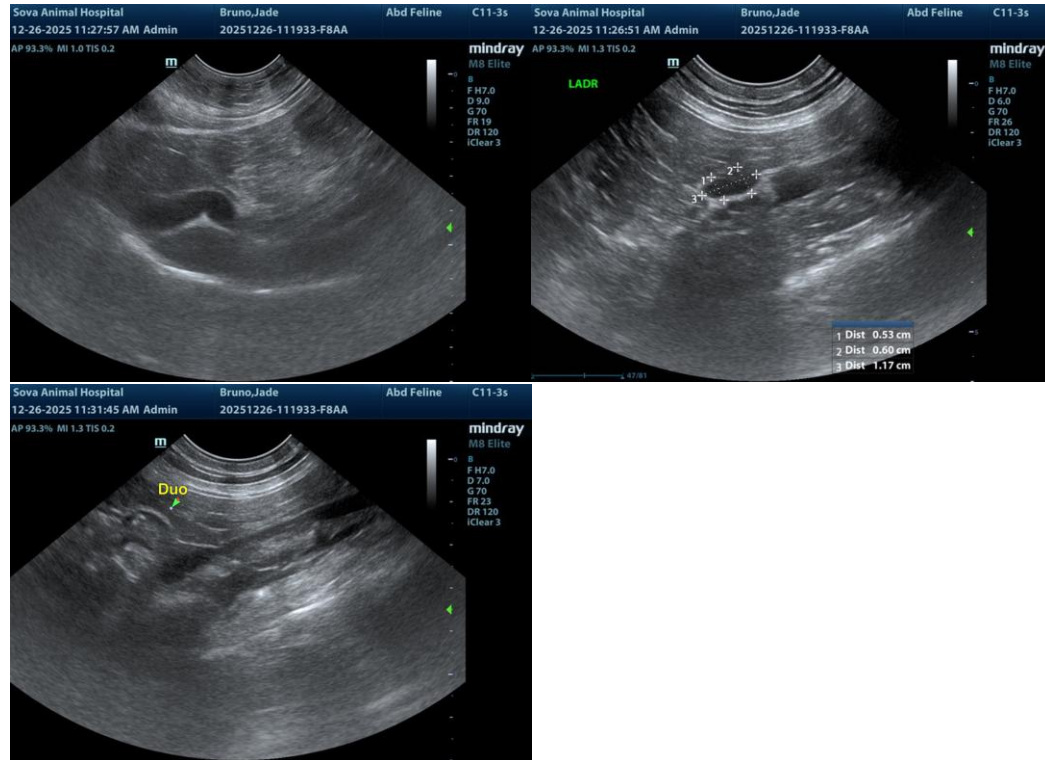
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)  
[info@sonopath.com](mailto:info@sonopath.com)