



PATIENT

Kali Colon

PRESENTING CLINICAL SIGNS

Patient has been having some on and off vomiting the last few days. unknown if she is eating but has been defecating normally. owner noticed leaking from her rear this morning

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Abdomen: Tense on palpation. No overt organomegaly appreciated CBC. lymphopenia Chemistry. glucose 164, calcium 8.2 EPOC. sodium 147, potassium 3.1, glucose 150, BE -9 Other: FpLi. abnormal T4. 5 (elevated) ProBNP. negative/normal Radiograph report attached

BREED

DSH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

FS

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

AGE

17yr

Normal size and margination were 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 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 3.3 cm in length.

WEIGHT

3.49kg

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland was indistinctly visualized without overt pathology, subjectively measuring 0.34 cm in width. The right adrenal gland was not definitively visualized, no overt pathology in the area of the right adrenal gland.

Spleen

IMAGING PERFORMED BY

Dr. Kuzimski

The spleen exhibited normal size and mild, asymmetrical medial capsule contour with generalized heterogeneous splenic parenchyma. No visualized masses or nodules were present. The spleen measured 0.85 cm in width at the level of the mid spleen.

HOSPITAL NAME

Animal Emergency
Hospital Deland

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 non-distended in size with thin walls and primarily anechoic luminal content. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

REFERRING VET

Dr. Kuzimski

Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild non-shadowing ingesta sonographically suggestive of food echogenicity with mild lumen gas and no signs of obstruction or foreign material. The pylorus wall measured 0.24 cm in width.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The small intestine exhibited minor, mid-duodenal corrugation with segmental generally mild non-shadowing intestinal ingesta and lumen gas to the level of the colon. The duodenum wall measured 0.24 cm width. The jejunum wall measured 0.20 cm width. The ileocolic wall measured 0.27 cm width.

SPECIES

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

Pancreas

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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

SEX

FS

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

ULTRASONOGRAPHIC FINDINGS

Primary

AGE

17yr

- Age-related renal changes.
- Sonographically normal gastrointestinal tract with mild, non-shadowing gastric and segmental intestinal ingesta
- Normal area of pancreas

WEIGHT

3.49kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no evidence of significant visceral pathology, such as gastrointestinal obstruction, foreign material, gastrointestinal mural pathology, or sonographically active pancreatitis. Supportive care for non-specific gastroenteritis or possible mild/chronic pancreatitis, which may present sonographically normal with clinical monitoring is recommended. Sonographic reassessment is indicated if continued or progressive gastrointestinal signs or weight loss.

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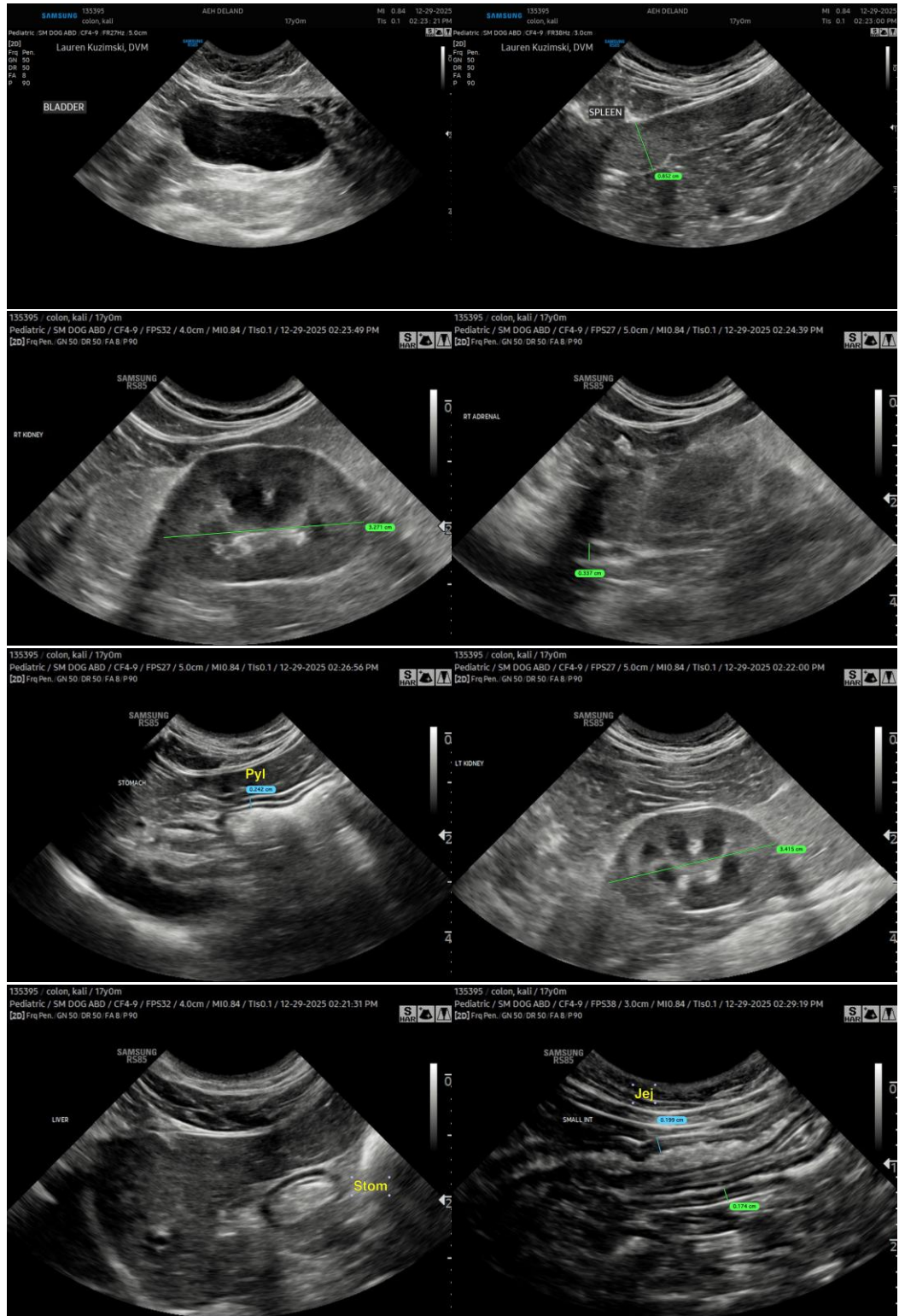
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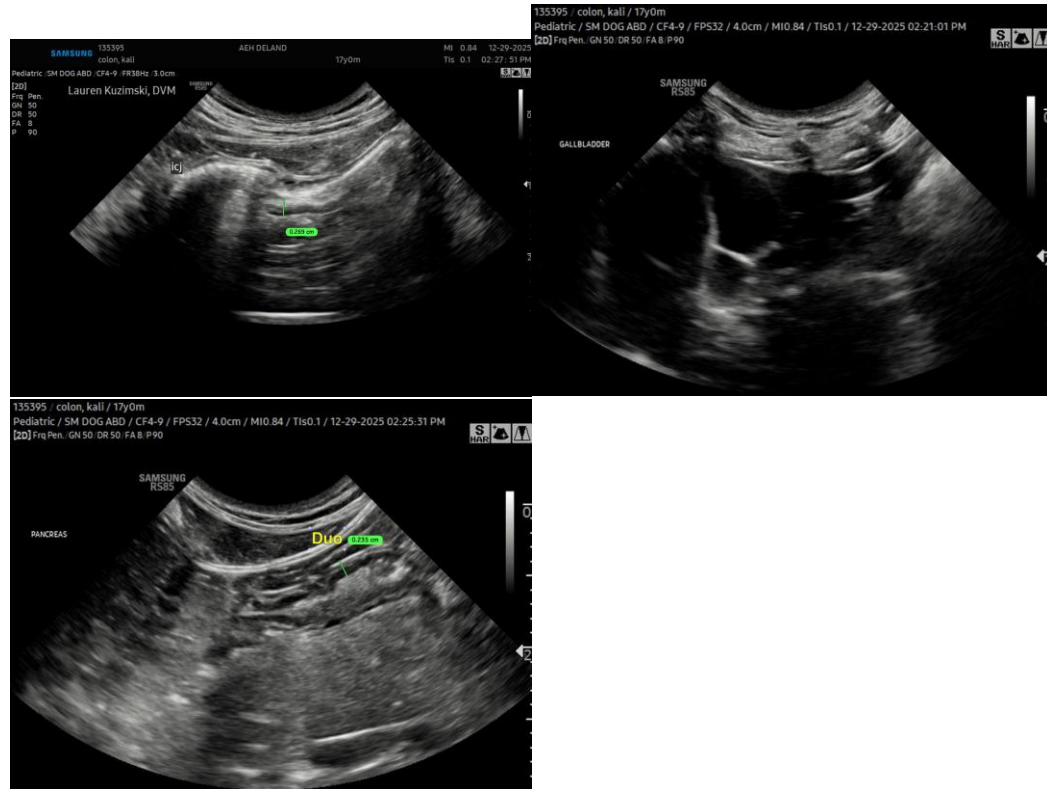
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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