



**PATIENT**

Sammie Fonatana

**PRESENTING CLINICAL SIGNS**

2 Mon hx wt loss, hyporexia, no V+, hx pemphigus foliaceus. Meds- atopic

**SPECIES**

Feline

Abnormal PE/Chem/CBC/UA Results: Basophilia GGT-58 Tbili-3.3 Glob-5.6 UA prot-2+ bili-3+ struvites USG-1.046

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

British Shorthair

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

**SEX**

Mn

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 3.5 cm in length. The right kidney measured 4.0 cm in length.

**AGE**

5.5yr

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

NA

**Adrenal Glands**

The bilateral adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.38 cm width The right adrenal gland measured 0.41 cm width.

**INTERPRETED BY**

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

**Spleen**

The spleen exhibited generalized enlargement with primarily symmetrical contour with mild heterogenous to subtle micronodular parenchyma. The spleen measured 1.8 cm in width at the level of the mid spleen.

**IMAGING PERFORMED BY**

Kerri Becker

**Liver/Gallbladder**

The liver was subjectively mildly enlarged. 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 to mildly subnormal in size in size with thin walls and minor bile debris. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

**HOSPITAL NAME**

Bond Vet Florham Park

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

**REFERRING VET**

Dr Hinds

The intestinal walls demonstrated intact wall layers with mildly thickened walls and altered 1:3 muscularis / mucosa ratio primarily consisting of muscularis hypertrophy. The ileocolic wall measured 0.36 cm in width. The small intestinal wall measured 0.31 cm in width.

**INVOICE 23356**

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

**DATE**

12/29/2025



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***Pancreas***

The area of the pancreas was sonographically normal.

**SPECIES**

Feline

***Free Abdomen***

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

**BREED**

British Shorthair

**Primary**

- Hepatosplenomegaly
- Intact thickened small intestinal wall
- Normal area of pancreas
- Non-distended gallbladder with minor bile debris

**SEX**

Mn

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

5.5yr

No evidence of post-hepatic obstruction, IBD or other inflammatory enteropathy. Potential triaditis or emerging to low-grade intestinal or possible multicentric neoplasia, all potentials. Assuming normal clotting status and using 25ga needle a hepatosplenic FNA cytology is recommended. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. Gastrointestinal support pending additional diagnostics is recommended.

**WEIGHT**

NA

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DVM, DABVP  
(Canine and Feline)

**IMAGING  
PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

Bond Vet Florham Park

**REFERRING VET**

Dr Hinds

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Feline

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**SEX**

Mn

**AGE**

5.5yr

**WEIGHT**

NA

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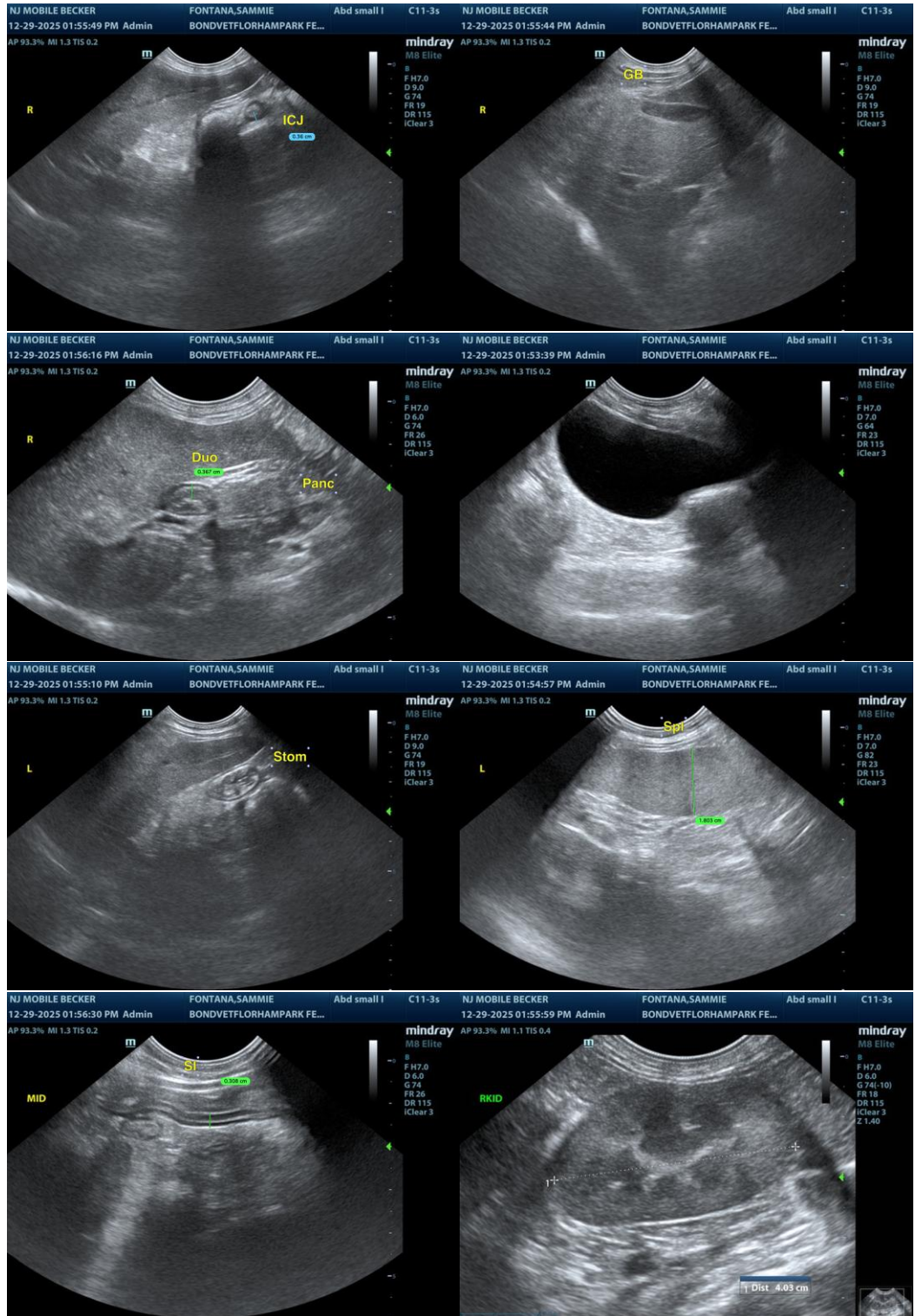
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**SEX**

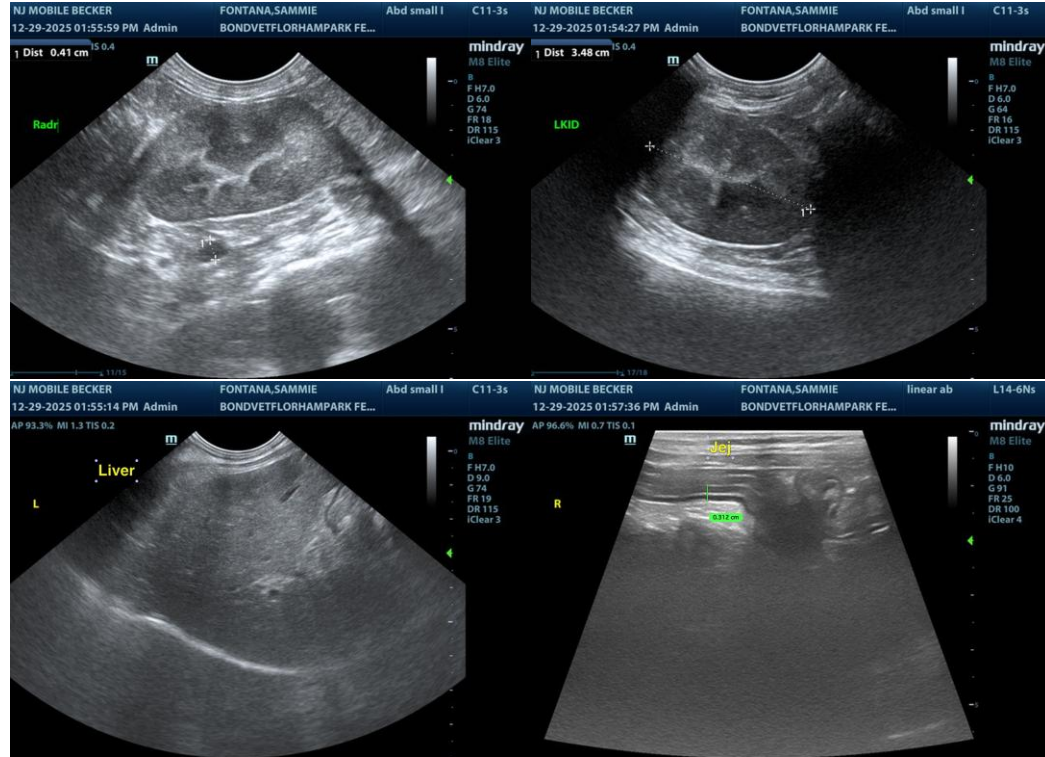
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**AGE**

5.5yr

**WEIGHT**

NA



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 DVM, DABVP  
 (Canine and Feline)

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.

**IMAGING PERFORMED BY**

Kerri Becker

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)  
[info@sonopath.com](mailto:info@sonopath.com)

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**REFERRING VET**

Dr Hinds

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 23356

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