



PATIENT

Shepard Lush

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

13 yrs

WEIGHT

8.4 kgs

INTERPRETED BY

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

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Blue Pearl Wyomissing

REFERRING VET

VCA Sinking Springs

INVOICE

12884

DATE

12/3/25

PRESENTING CLINICAL SIGNS

History: AUS to further evaluate a few weeks hx of decreased appetite, increased urination (poss increased drinking), weight loss (3 lbs in 4 mos), and BW showing anemia (microcytic/hypochromic), elevated ALT and hyperglycemia (r/o stress hyperglycemia vs DM). Concern for chronic disease/ chronic GI disease. Presented to the ER on 11/26/25 for further evaluation of these signs. Started with supportive care.

Meds: Mirtaz, Ondansetron

Abnormal PE/Chem/CBC/UA Results: ER Diagnostics 11/26/25: PCV/TS - 19/8.2 CBC: HCT 17.7% L, HGB 5.2 L, RBC 5.35 L, MCV 33.1 L, MCHC 29.5 L, WBC 18.69 H, Neut - 17.72 H, mild lymphopenia and eosinopenia, Plts 169-n low, RBC - 5.35×10^6 Chem: Alb 2.7-n, ALP 71-n, ALT 274 H, Glu 283 H, Glob 5.1 H, BUN - 14.4 L, Cr 0.8-n, Chol 123-n T4: 1.6 - n UA: USG 1.009 L, pH 7.0, Gluc Neg, Ket Neg, inactive sediment

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of - cm exhibited normal thickness and tone. Anechoic urine was present in the lumen. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted. Small, dependent urinary bladder lumen calculus was present measuring 0.70 cm in diameter.

The area of the iliac trifurcation was free of pathology.

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The left kidney measured 4.2 cm in length. The right kidney measured 4.4 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.30 cm. The right adrenal gland was overtly normal in size, position and shape, measuring 0.5 cm.

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. The spleen measured 0.74 cm width level of the mid spleen.

Liver

The liver presented normal in size. The parenchyma of the liver was subjectively increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was



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uniform with a mild coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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.

Segmental mid abdomen small intestinal mural mass was present exhibiting thickened wall, mural hypoechogenicity and loss of intestinal wall layering measuring 3.6 cm x 2.4 cm. The intestinal mass did not appear obstructive. Adjacent intestinal segments exhibited intact thickened wall with altered wall layer ratio owing to thickened muscularis layer Intact, thickened small intestinal wall measured 0.32 cm.

The visualized colon was sonographically normal containing formed fecal matter.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

Peri intestinal enlarged non-homogeneous mesenteric lymph nodes were present measuring 2.0 cm in diameter. Mild surrounding hyperechoic perilymphatic omentum and no evidence of peritoneal effusion present.

PRIMARY FINDINGS

- Intestinal mural mass with concurrent adjacent thickened intact intestinal segments
- Associated non-homogeneous mesenteric lymphadenopathy
- Mild hyperechoic liver
- Mild gallbladder debris

SECONDARY FINDINGS

- Bilateral chronic renal changes
- Small urinary bladder calculus

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intestinal mural mass and concurrent thickened intact adjacent intestinal segments and peri intestinal lymphadenopathy almost certainly is consistent with neoplastic/metastatic criteria, i.e. round cell neoplasia, carcinoma or other with significant inflammatory disease, granulomatous disease/FIP thought less likely. Further assessment may include, assuming normal clotting status, mass accessible lymph node and screening hepatic FNA cytology with potential for oncology or surgical consult.



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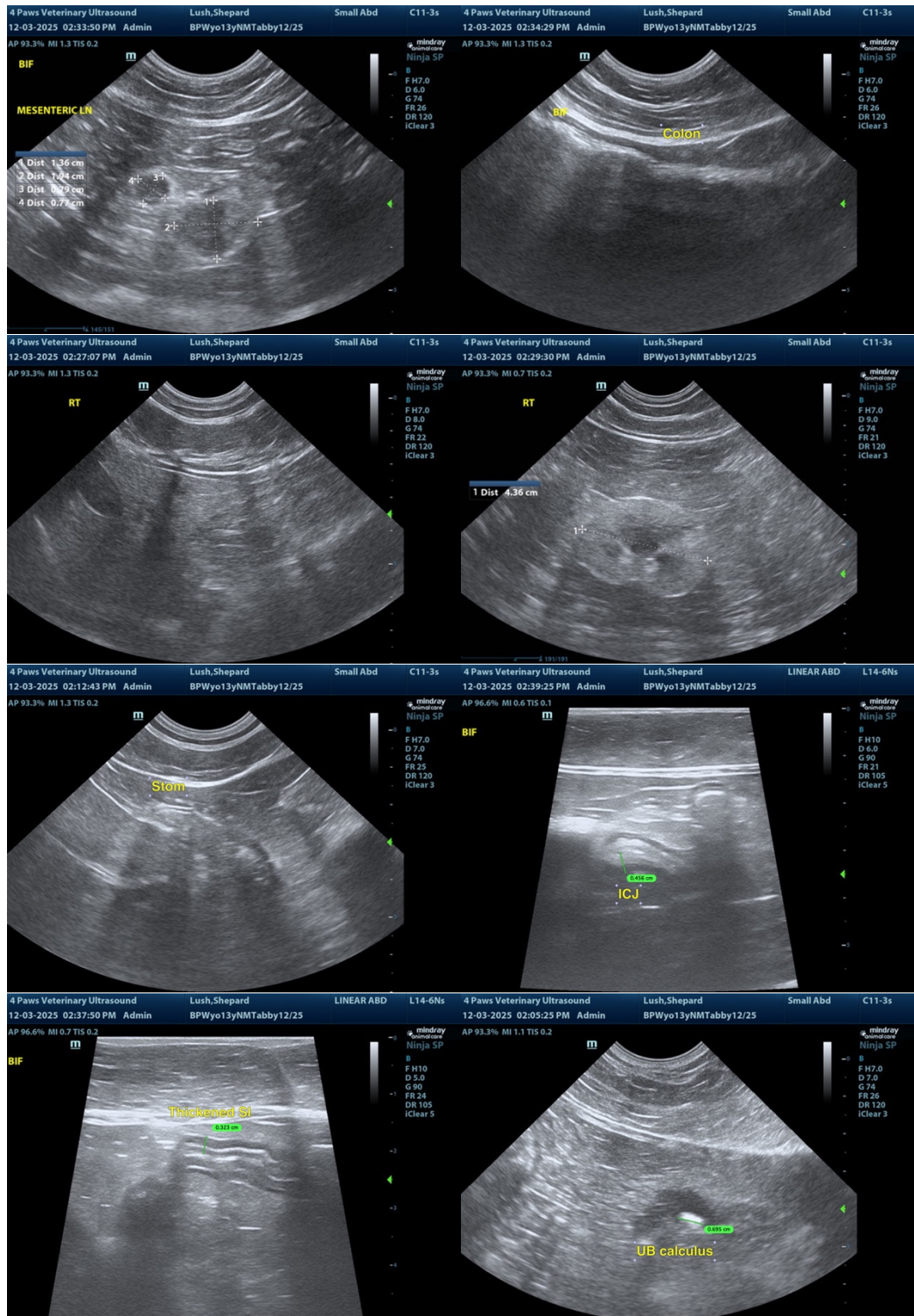
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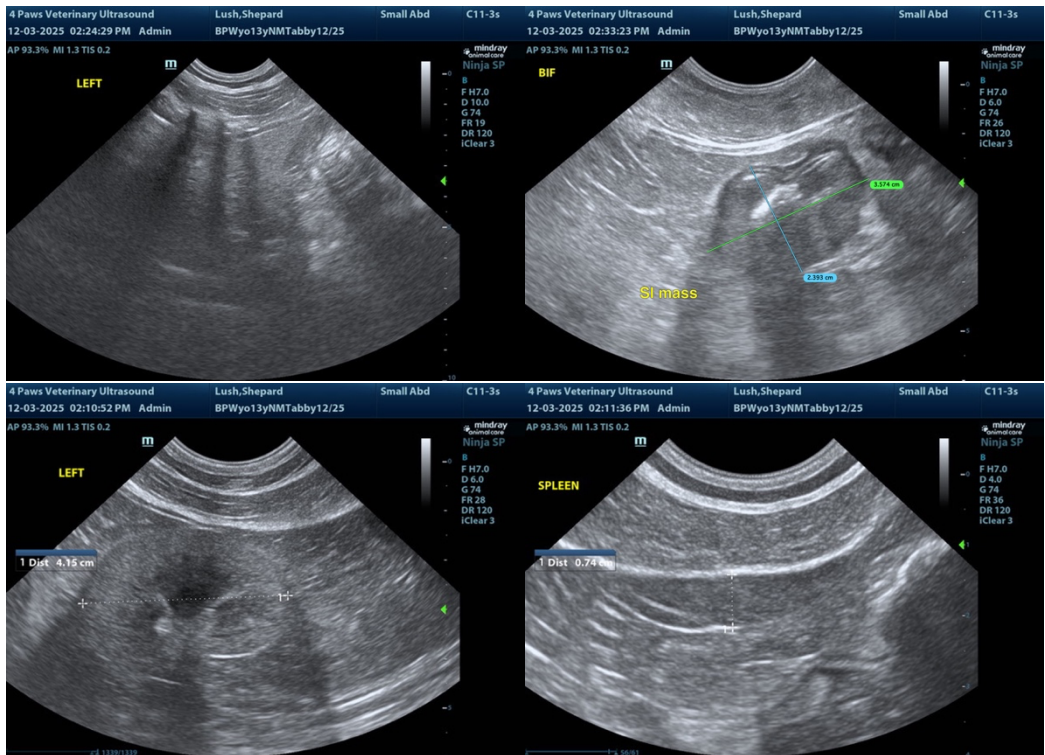
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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