



PATIENT

Mickey Larsen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

3.8

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

IMAGING PERFORMED BY

Cassidy Smith

HOSPITAL NAME

Viking Veterinary
Hospital

REFERRING VET

Dr. Drew Davis

INVOICE

13842

DATE

02/17/26

PRESENTING CLINICAL SIGNS

- P has been vocal frequently for most of the day, put on high protein diet which seems to help with it.
- - Historical GI issues in June 2025: underwent radiographs, full blood work, and barium study at Las Cruces; suspected foreign body moved from stomach to small intestine by 4.5 hours post-barium, avoiding surgical intervention
- - Vomiting 2-3 times in the past week
- - Recent rabies vaccination
- - History of seasonal allergies in New Mexico, not yet observed in current location
- - Exhibits hunched posture after eating certain foods but not with Purina One high-protein formula
- - No reluctance to jump on counters or furniture
- - No inappropriate urination or litter box issues

Abnormal PE/Chem/CBC/UA Results: CBC WNL Chem: hypochloremia (112), hyperglobulinemia (7), albumin globulin ration 0.4, elevated ALT (449), elevated AST (190), elevated ALP (214), elevated GGT (7), hyperbilirubinemia (0.5) UA: USG 1.049, proteinuria 2+ T4: WNL 2.4

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Echogenic to particulate nondependent mild sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

Normal size and margination was 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 4.1 cm in length. The right kidney measured 4.1 cm in length.

Adrenal Glands

The bilateral adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.41 cm width. The right adrenal gland measured 0.36 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 nonuniform and hypoechoic to the spleen with a mild/ moderate coarse echotexture and subjective mild to benign



PATIENT

Mickey Larsen

parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Intermittent indistinctly margined to mild hypoechoic hepatic nodules were present with an example measuring 1.1 cm in diameter.

SPECIES

Feline

The gallbladder was non-distended in size with mildly thickened wall. The gallbladder contained anechoic bile. The cystic and common bile ducts were normal.

Gastrointestinal

BREED

DSH

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.

SEX

Neutered Male

The small intestine presented intact mildly thickened wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The small intestine wall measured 0.29 cm wall width. The ileocolic wall measured 0.36 cm wall width.

Normal visible colon wall layers were present with semi formed fecal matter in lumen.

AGE

13 Years

Pancreas

The pancreas was normal in size with symmetrical contour and heterogeneous mildly hypoechoic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

WEIGHT

3.8

Free Abdomen

Intermittent mildly prominent homogenous mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). No evidence of peritoneal effusion.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

ULTRASONOGRAPHIC FINDINGS

IMAGING PERFORMED BY

Cassidy Smith

- Hepatopathy with indistinct hyperechoic nodules.
- Mild cholecystitis pattern.
- Empty stomach with suspect mild IBD pattern and associated mild mesenteric lymphadenopathy- lymph nodes suggestive of benign criteria i.e. mild hyperplasia or reactive lymphadenitis.
- Probable mild chronic pancreatitis.
- Bilateral mild chronic renal changes.
- Mild urine sediment.

HOSPITAL NAME

Viking Veterinary
Hospital

REFERRING VET

Dr. Drew Davis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations may include favored IBD or other inflammatory enteropathy in conjunction with chronic pancreatitis and triaditis. Potential for emerging to mild intestinal round cell neoplasia, early metastatic lymphadenopathy, or emerging to low-grade hepatic neoplasia, i.e., carcinoma is thought less likely yet not excluded.

INVOICE

13842

Further assessment may include (assuming normal clotting status and using 25-gauge needle) hepatic FNA cytology and correlation with the GI panel (PLI, TLI, cobalamin and folate).

DATE

02/17/26

No evidence of current gastrointestinal foreign body or obstructive criteria. Gastrointestinal support, including current dietary therapy, as needed gastroprotectants +/- empirical IBD/triaditis protocol with



PATIENT

Mickey Larsen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

3.8

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

**IMAGING
PERFORMED BY**

Cassidy Smith

HOSPITAL NAME

Viking Veterinary
Hospital

REFERRING VET

Dr. Drew Davis

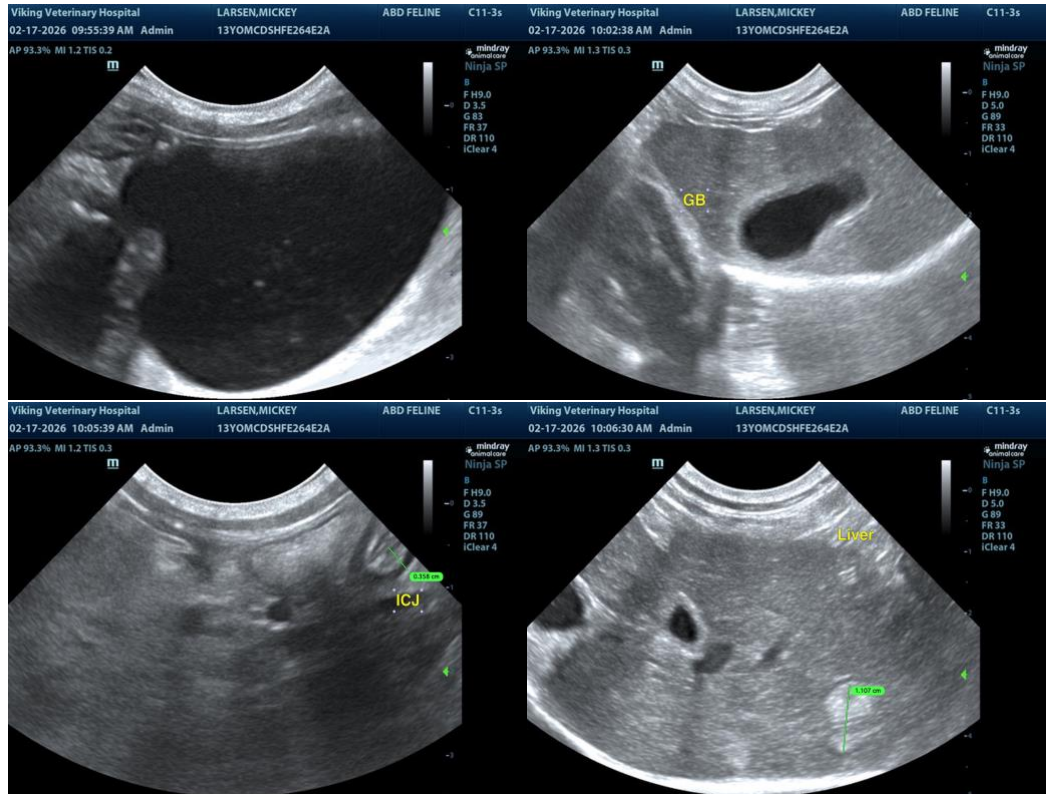
INVOICE

13842

DATE

02/17/26

clinical and as needed sonographic monitoring may prove beneficial. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.





PATIENT

Mickey Larsen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

3.8

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Cassidy Smith

HOSPITAL NAME

Viking Veterinary Hospital

REFERRING VET

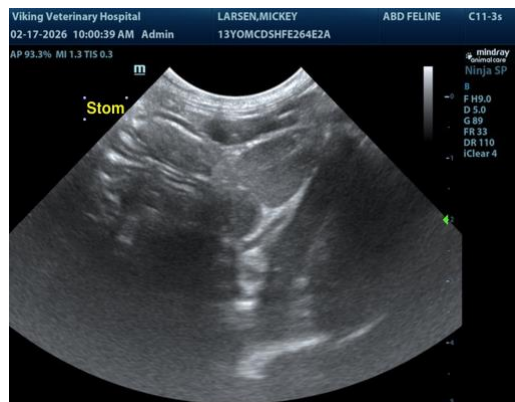
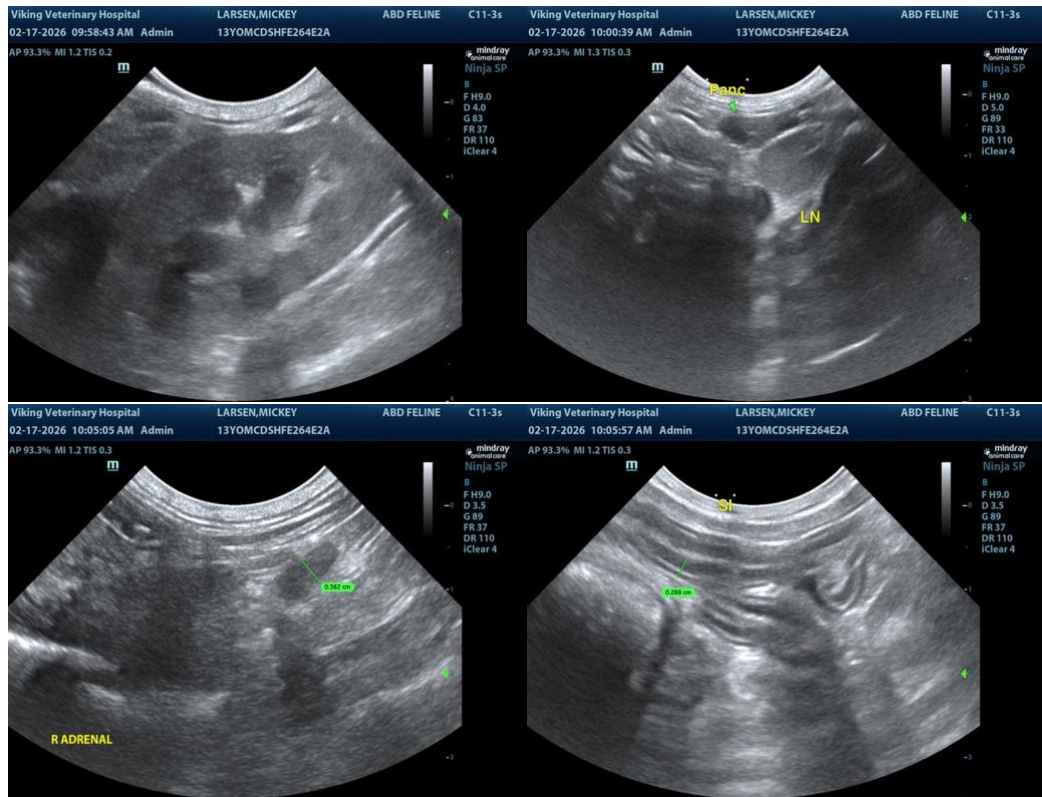
Dr. Drew Davis

INVOICE

13842

DATE

02/17/26



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