



PATIENT

Bob Mueller

SPECIES

Feline

BREED

DMH

SEX

Neutered Male

AGE

15 Years

WEIGHT

8.75 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Countryside Animal
 Clinic

REFERRING VET

Dr. Cox

INVOICE

13583

DATE

02/04/26

PRESENTING CLINICAL SIGNS

- Clinical Exam Findings: FORLS - dental disease
- Underweight, aggressive - sedation for handling/exam, flea dirt
- ABNORMAL Labwork Values: CBC RBC 5.41 (6.5-11.5) Hgb 10.3 (10.6-16.7) Chem BUN 53 (16-37) Crea 1.9 (0.9-2.3) T4 1.4 (0.8-4.7) UA USG 1.021 pH 6.0 prot 1+ inactive sediment

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 1.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

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 indistinct corticomedullary border demarcation was also present. Mild pyelectasia was present within the left kidney. The left kidney measured 3.5 cm in length. The right kidney measured 3.8 cm in length.

Adrenal Glands

The adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.43 cm width. The right adrenal gland measured 0.41 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 revealed subjective mild hepatomegaly. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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 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 was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact borderline to mild thickened wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty to the level of the colon. The small intestine wall measured 0.26 cm to 0.27 cm wall width.



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

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Pancreas

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The left pancreas presented normal in size with capsule asymmetry and heterogeneous remodeled parenchyma compared to adjacent nonreactive omentum.

Feline

Free Abdomen

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Intermittent mildly enlarged 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). An example of the lymph nodes measured 1.9 cm x 0.86 cm. No evidence of peritoneal effusion.

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ULTRASONOGRAPHIC FINDINGS

Neutered Male

- Chronic renal changes with mild left kidney pyelectasia.
- Intact borderline to mildly thickened small intestine.
- Probable mild chronic pancreatitis.
- Mild hepatomegaly.
- Intermittent mild mesenteric lymphadenopathy suggestive of benign criteria i.e. mild reactive hyperplasia or possible lymphadenitis.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

15 Years

The small intestine may indicate patient variant or potential underlying mild chronic enteropathy, i.e. IBD or similar. Given lack of hepatic enzyme elevation, the hepatomegaly is nonspecific and suggestive of benign criteria. Triaditis could be a potential. No overt evidence of neoplastic criteria.

WEIGHT

8.75 pounds

Further assessment may include a GI panel (PLI, TLI, cobalamin and folate) and assuming normal (2:47) clotting status, screening, hepatic FNA cytology. Further renal staging to include urine C/S and protein:creatinine ratio on sterile urine sample may be considered.

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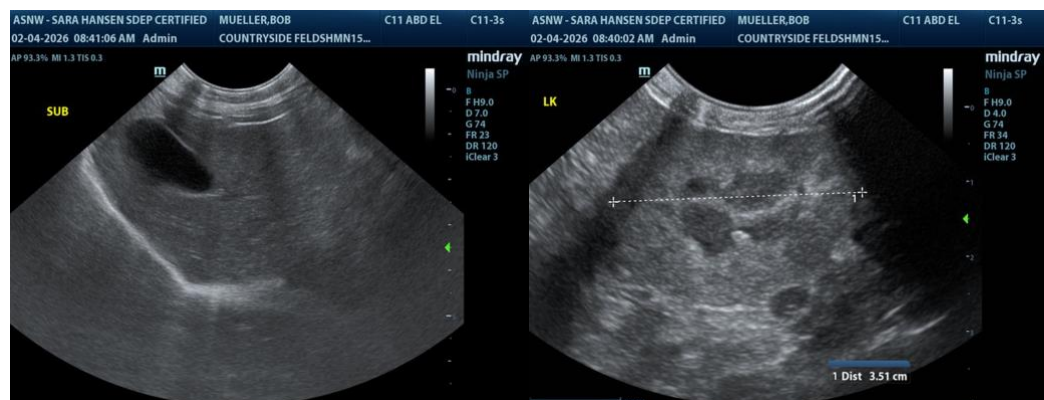
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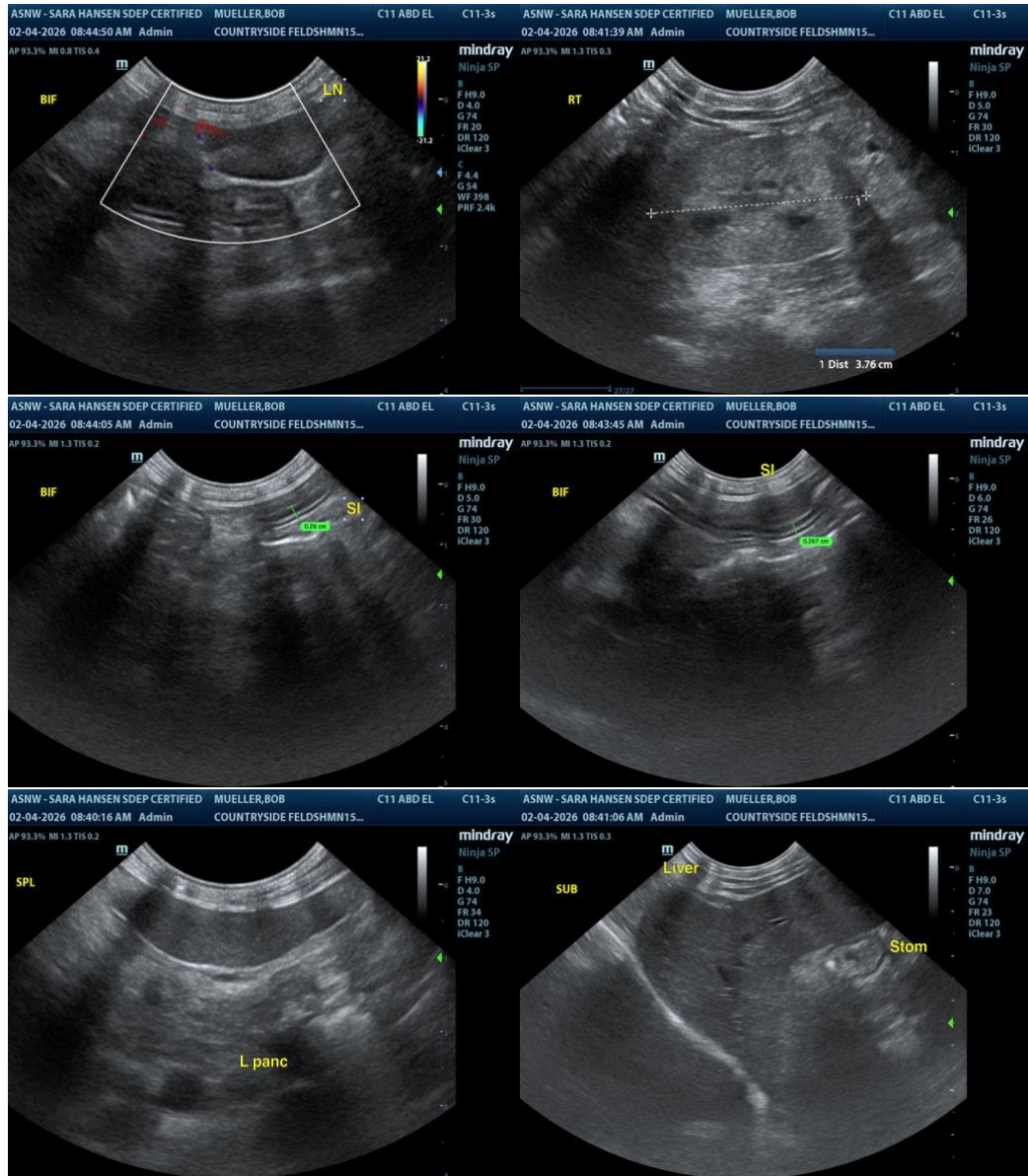
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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