

**PATIENT**

The submitted study contained 10 videos and 23 still images for review.

Luna Kim

PRESENTING CLINICAL SIGNS

Patient presented for poor appetite, weight loss, and PU/PD over the past 2-3 months. Patient seems to have an appetite but only eats small amounts here and there. Defecation is normal.

SPECIES

Feline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED****Urinary System**

Russian Blue

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.

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Right kidney subnormal size was present. Left kidney size and contour was normal. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral areas of focal mild medullary mineral were present. The left kidney measured 3.2 cm in length. The right kidney measured 2.9 cm in length.

AGE

15yr

The area of the aortic trifurcation was free of pathology.

WEIGHT

7.2lb

Adrenal Glands

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

INTERPRETED BY

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

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 0.7 cm in width at the level of the mid spleen.

IMAGING PERFORMED BY

Dr Paul Kim

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 mild non-organized debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Ridgefield Park Animal
Hospital

REFERRING VET

Dr Paul Kim

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 gastric body wall measured 0.25 cm in width.

INVOICE

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The small intestine presented intact wall layering with subjective mildly thickened duodenum wall.

DATE

02/04/2026

Empty lumen without evidence of mechanical /metabolic ileus to the level of the colon. The duodenum wall measured 0.32 cm width. The jejunum wall measured 0.20 cm width.



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

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Pancreas

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

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Free Abdomen

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

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ULTRASONOGRAPHIC FINDINGS

Primary

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- Empty gastrointestinal tract with intact gastrointestinal wall, subjective mildly thickened duodenum
- Possible mild chronic pancreatitis
- Bilateral chronic renal changes with mild subnormal right kidney size
- Mild gallbladder debris

AGE

15yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation with a full CBC/chemistry panel and UA is recommended if not already done. Aside from subjective non-specific mildly thickened duodenum, no evidence of significant gastrointestinal mural pathology or obstructive pattern or foreign material.

WEIGHT

7.2lb

A GI panel to include PLI/TLI/cobalamin and folate to assess for intestinal disease and correlate with pancreas is recommended. Three view chest radiographs to assess for thoracic or esophageal pathology as a contributing factor recommended if not done.

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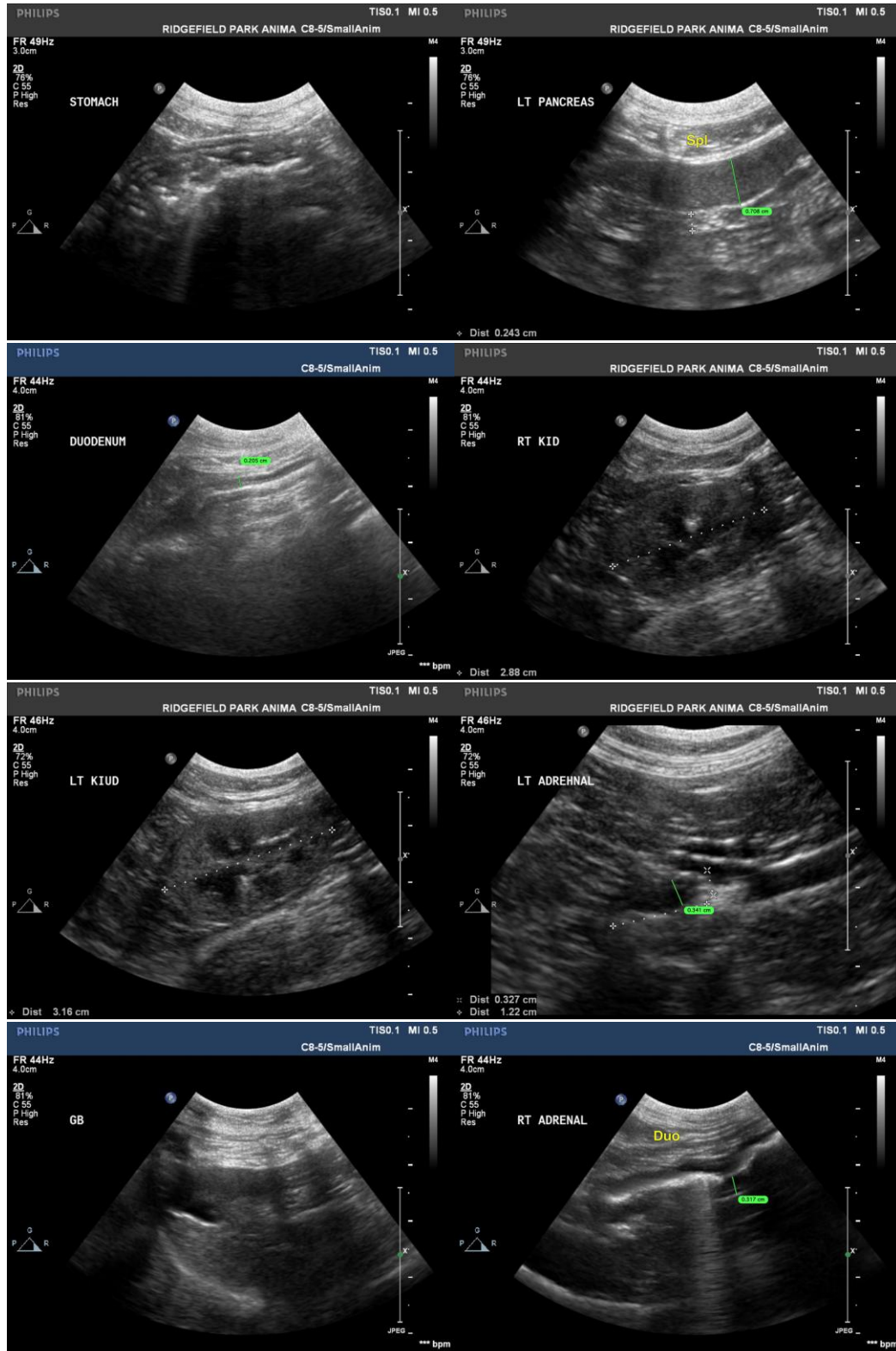
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Feline

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.

BREED

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