



PATIENT

Mew Koch

SPECIES

Feline

BREED

DLH

SEX

MN

AGE

8mo

WEIGHT

11lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

River's Edge Pet
Medical Center

REFERRING VET

Dr. Shelby Young

INVOICE 24200

DATE
03/14/2026

PRESENTING CLINICAL SIGNS

- P was seen for constipation on 3/9 - has had some diarrhea since starting meds. Got SQF + mirataz 3/10 due to not eating/drinking. more lethargic. vomited last PM. still not eating, decreased drinking.
- PE: BCS 3/9, Gr 2/6 L parasternal diastolic murmur, tense & sensitive abdomen
- Aortic valve insufficiency with L sided cardiomegaly, 2/11/26 diagnosed with echocardiogram
- Current Medications: clavamox, gabapentin, lactulose, mirtazapine

Abnormal PE/Chem/CBC/UA Results: See attached labs: RBC high end of normal (hct 49%) - dehydration vs toxic response, open Immature neutrophils - infection, open Leukocytosis with neutrophilia and eosinopenia (neut 20.8k, eos 0.08k) - stress leukogram, open Hyperphosphatemia 8.2 (rr 3.1-7.5) Hypochloremia 109 (44 112-129) - GI distress (ie vomiting), open panc lipase 3.8 (wnl) See attached rads: Gas distended gastrointestinal tracts, subjectively inflamed. Cannot fully rule out gastrointestinal obstruction vs mechanical ileus. Repeat rad today showed gas in the suspected colon

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

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 4.6 cm in length. The right kidney measured 4.6 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.47 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.43 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



PATIENT

Mew Koch

SPECIES

Feline

BREED

DLH

SEX

MN

AGE

8mo

WEIGHT

11lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

River's Edge Pet
Medical Center

REFERRING VET

Dr. Shelby Young

INVOICE

24200

DATE

03/14/2026

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 mildly distended in size (likely secondary to anorexia) with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering exhibiting mild regional wall thickening, most notable in the ventral gastric body. The gastric body wall measured 0.40 cm in width. The stomach contained a mild amount of retained anechoic fluid and lumen gas with no evidence of obstruction to pyloric outflow.

The small intestine presented normal intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with mild segmental lumen gas no signs of obstruction or foreign material. The duodenum wall measured 0.25 cm width. The jejunum wall measured 0.20 cm width. The ileocolic wall measured 0.31 cm width.

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

Pancreas

The left pancreas was normal in size and contour with mild hypoechoic parenchyma compared to adjacent non-reactive or inflamed omentum.

Free Abdomen

No evidence of peritoneal effusion was present.

Intermittent mild to variably prominent mesenteric lymph nodes were present. These lymph nodes were non-homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic hyperechoic inflammation was present. An example of lymph node size was 2.0 cm x 0.64 cm.

ULTRASONOGRAPHIC FINDINGS

Primary

- Mild nonobstructive gastric ileus with retained fluid / gas, regional mild thickened intact stomach wall
- Overall empty small intestine with segmental gas
- Intermittent mild to variable jejunocolic lymphadenopathy - probable reactive hyperplasia or lymphadenitis secondary to inflammatory bowel episode vs immunologic immaturity
- Mild hypoechoic pancreas

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt gastrointestinal obstruction or foreign body. A small amount of nonobstructive or passing material irritative to the stomach or gastrointestinal tract potentially obscured by gas is possible, yet no indication for immediate surgical intervention at this time. Gastrointestinal support ideally over the next 24-36 hours with clinical monitoring and recheck sonogram if continued inappetence or evidence of progressive ileus is recommended. Monitoring fPL or for cranial abdomen discomfort on palpation which may suggest emerging to mild pancreatitis is recommended.



PATIENT

Mew Koch

SPECIES

Feline

BREED

DLH

SEX

MN

AGE

8mo

WEIGHT

11lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

River's Edge Pet Medical Center

REFERRING VET

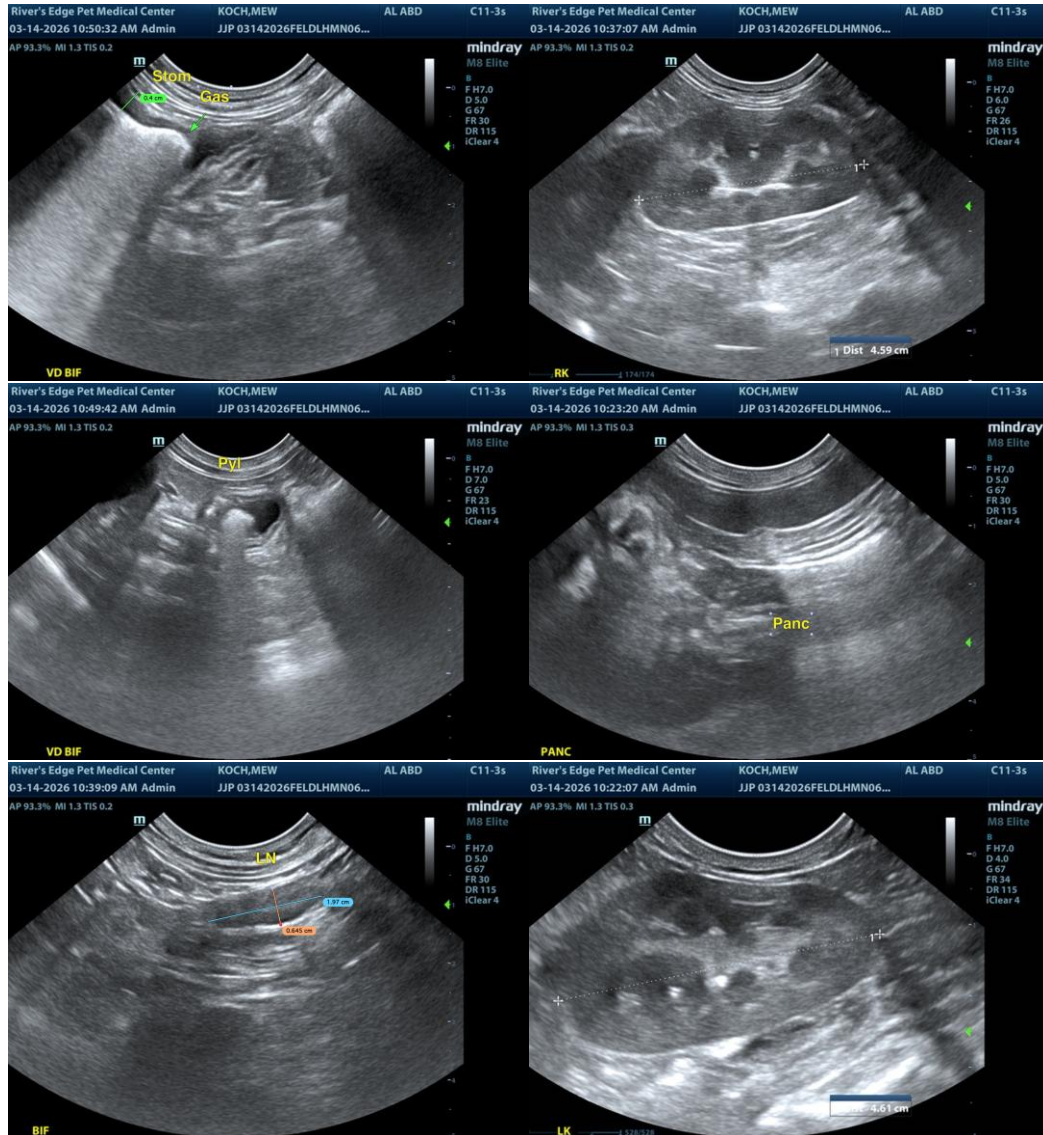
Dr. Shelby Young

INVOICE

24200

DATE

03/14/2026





PATIENT

Mew Koch

SPECIES

Feline

BREED

DLH

SEX

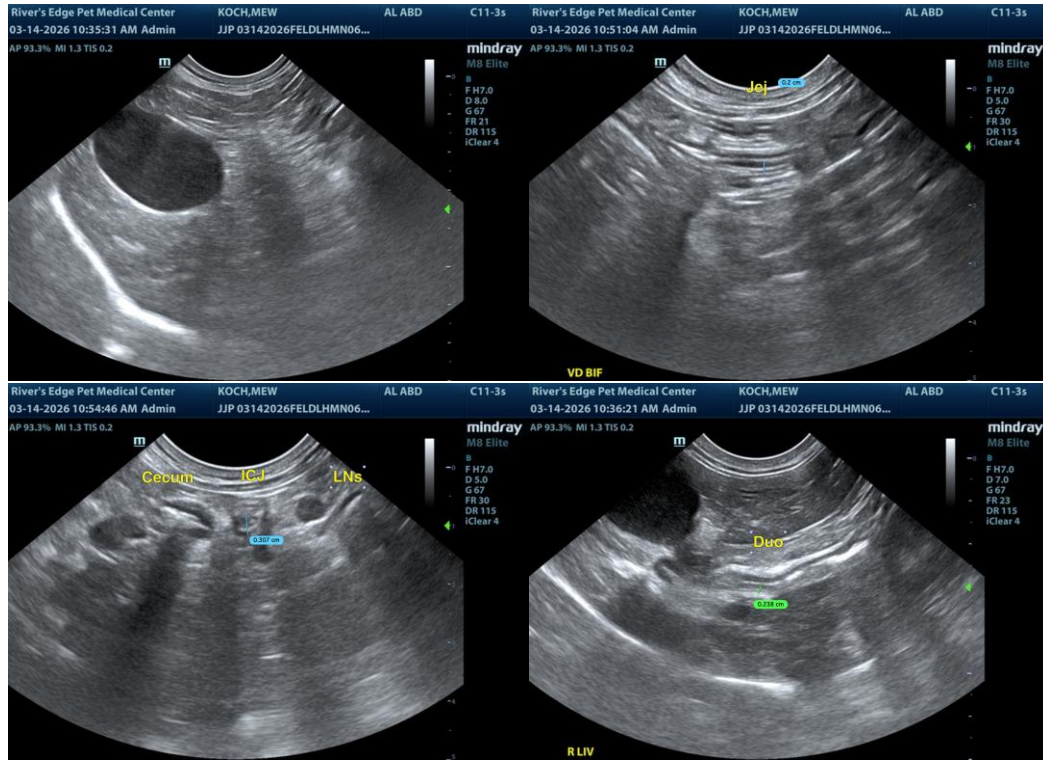
MN

AGE

8mo

WEIGHT

11lb



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.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

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

HOSPITAL NAME

River's Edge Pet
Medical Center

REFERRING VET

Dr. Shelby Young

INVOICE
24200

DATE
03/14/2026