



PATIENT

Pouncey George

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11Y

WEIGHT

11.9lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

Rodriguez

INVOICE

74019

DATE

3-3-26

PRESENTING CLINICAL SIGNS

- Currently on steroids for IBD

Abnormal PE/Chem/CBC/UA Results: B12: 272, folate >24, TLI 34.3. T4:0.8

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild particulate nondependent 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.

The area of the residual prostate appeared normal and free of pathology

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination were present in the kidneys. Mild hyperechoic cortex with adequate to mildly enhanced corticomedullary border demarcation. The left kidney measured 4.2 cm in length. The right kidney measured 4.3 cm in length.

Adrenal Glands

The adrenal glands were indistinctly visualized likely secondary to steroid therapy. No evidence of pathology. The left adrenal gland measured 0.32 cm and the right measured 0.33 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.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. Normal hepatic vascular volume was present. 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 contained mild to moderate nonshadowing ingesta without signs of obstruction or foreign material.

The small intestine presented intact wall layering with maintained 1:3 muscularis/mucosa ratio. Borderline prominent intestinal wall. Discrete hyperechoic segmental intestinal mucosal speckling was noted. Mild segmental intestinal nonshadowing ingesta was present. Jejunum wall measured 0.25 cm wall width. Doudenum wall measured 0.27 cm wall width. Ileocolic wall measured 0.33 cm wall width.



PATIENT

Pouncey George

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11Y

WEIGHT

11.9lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

Rodriguez

INVOICE

74019

DATE

3-3-26

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

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

Minor benign colic lymphadenopathy was seen.

No evidence of peritoneal effusion.

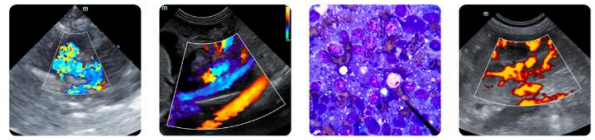
ULTRASONOGRAPHIC FINDINGS

- Intact borderline thickened small intestinal wall exhibiting discrete mucosal speckling, gastrointestinal ingesta consistent with food echogenicity.
- Mild age related renal changes.
- Urine sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant visceral pathology with small intestine exhibiting borderline to subtle mural changes consistent with probable chronic enteropathy. Given the patient's history, suppression of the intestinal mural changes owing to steroid therapy possible. Cobalamin supplementation recommended given cobalamin level less than 400 with monitoring.

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.



PATIENT

Pouncey George

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11Y

WEIGHT

11.9lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

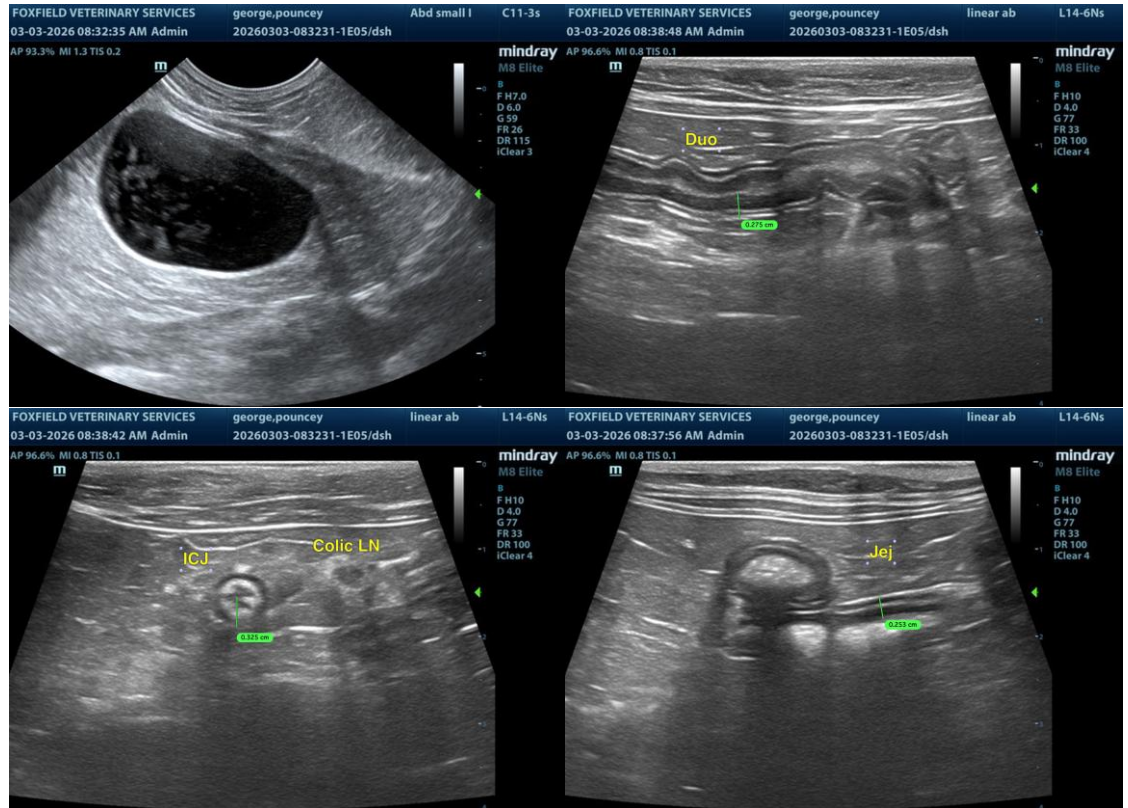
Rodriguez

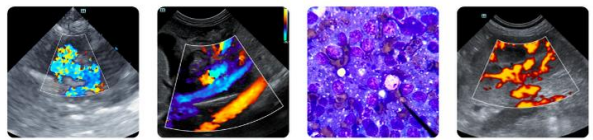
INVOICE

74019

DATE

3-3-26





PATIENT

Pouncey George

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

11Y

WEIGHT

11.9lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

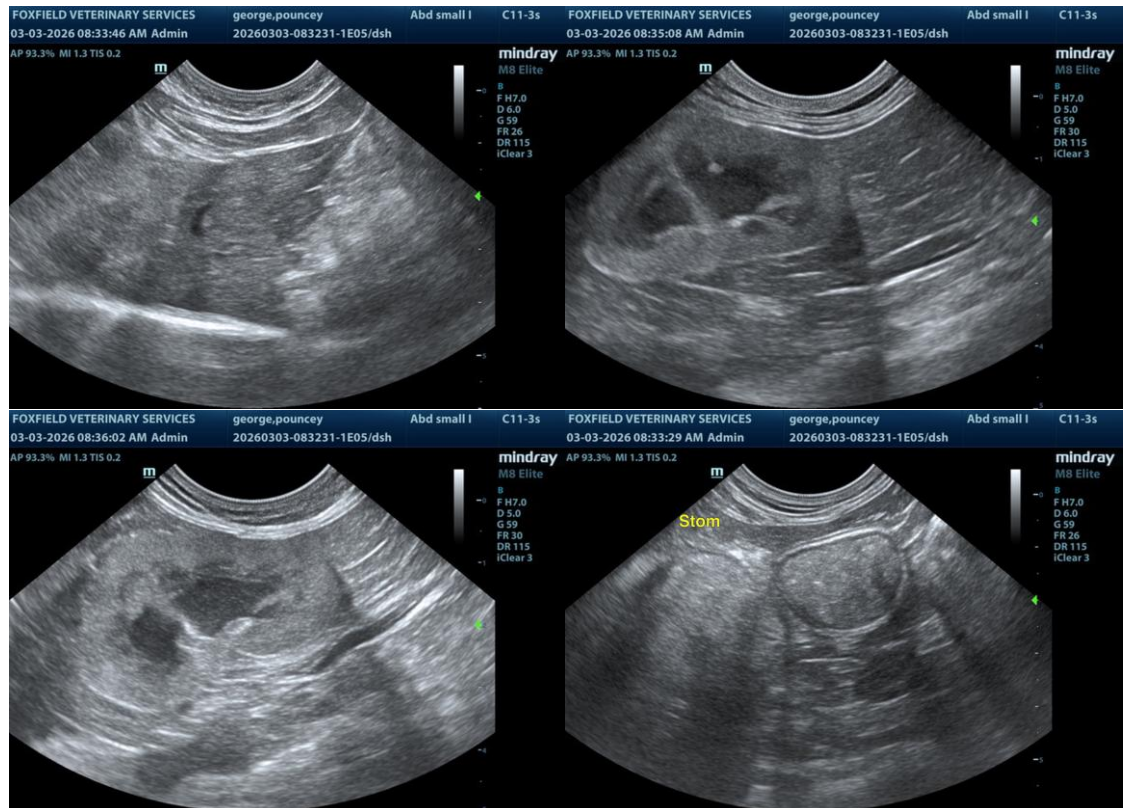
Rodriguez

INVOICE

74019

DATE

3-3-26



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