



PATIENT	PRESENTING CLINICAL SIGNS
Marauder Frascella	Weight loss, Decreased appetite, anemia, thickened area/mass? palpated mid abdomen
SPECIES	Abnormal PE/Chem/CBC/UA Results: CBC: WBC 29.6, HCT 22, Hgb 7.1, Neutros 24.272/Monos 1480 T4 1.9, Chem WNL beside TP 5.9/ Albumin 2 U/A findings: WNL Urine specific gravity: 1.024
Feline	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
DSH	Urinary System
SEX	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. Nondependent, particulate, 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.
NM	
AGE	No evidence of pathology in the area of the aortic trifurcation.
14 years	
WEIGHT	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. Loss of corticomedullary border demarcation was also present. Nonhomogeneous corticomedullary nodules were noted in the right kidney, with an example measuring 1.4 cm diameter. The left kidney measured 4.0 cm in length. The right kidney measured 4.1 cm in length.
7.4 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The bilateral adrenal glands were normal in size and contour. Pinpoint areas of mineralization were present without capsular distortion or overt tumors. This is an age related finding and not pathological. The left adrenal gland measured 0.37 width and the right adrenal gland measured 0.39 width.
IMAGING PERFORMED BY	Spleen
Dr. Carlos Abdul-Chani	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 0.9 cm width at the level of the mid-spleen.
HOSPITAL NAME	Liver/ Gallbladder
Byram AH	The liver presented mildly enlarged in size. Normal hepatic vascular volume was present. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was contracted in appearance without evidence of overdistention. There is no evidence of post hepatic obstruction.
REFERRING VET	
Dr. Maria Cruz	
INVOICE	
10797	
DATE	
4/14/26	



PATIENT

Marauder Frascella

SPECIES

Feline

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DSH

SEX

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WEIGHT

7.4 lbs.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with minor retained gastric fluid without evidence of retained ingesta, fluid, or foreign material.

The small intestine presented primarily intact thickened wall layering owing to subjective thickened intestinal mucosa. The small Intestinal wall width measured 0.30 cm to the level of the ileum. An ill-defined, nonhomogeneous ileocolic mass was present, measuring ~5.6 cm x 3.5 cm.

Primarily intact visible colon walls were present with mildly thickened proximal colon wall. Generalized semi-formed to soft fecal matter was noted.

Pancreas

The pancreas exhibited ill-defined enlargement and capsule border. Nonhomogeneous, nodular pancreatic parenchyma was noted in the area of the left pancreas. The left pancreas measured ~3.6 cm width.

Free Abdomen

Intermittent, swollen, nonhomogeneous mesenteric lymph nodes were present, with an example measuring 1.4 cm x 1.0 cm. Generalized nonhomogeneous hyperechoic omentum as present. Mild volume peritoneal effusion was noted.

ULTRASONOGRAPHIC FINDINGS

- Ileocolic mass with generalized thickened small intestinal wall
- Ill-defined enlarged nonhomogeneous nodular pancreas
- Chronic renal changes with right kidney nodules
- Intermittent swollen nonhomogeneous mesenteric lymphadenopathy
- Nonhomogeneous hyperechoic omentum and peritoneal effusion
- Non-congested hepatomegaly

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, multicentric neoplastic criteria are met and consistent with carcinomatosis, lymphomatosis, or similar. Technically FIP is a potential yet considered unlikely given the patient's age. Further assessment may include, assuming normal clotting status, ileocolic mass FNA cytology and correlation with effusion analysis. However, this case is nonsurgical with an unfavorable prognosis.

INTERPRETED BY

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

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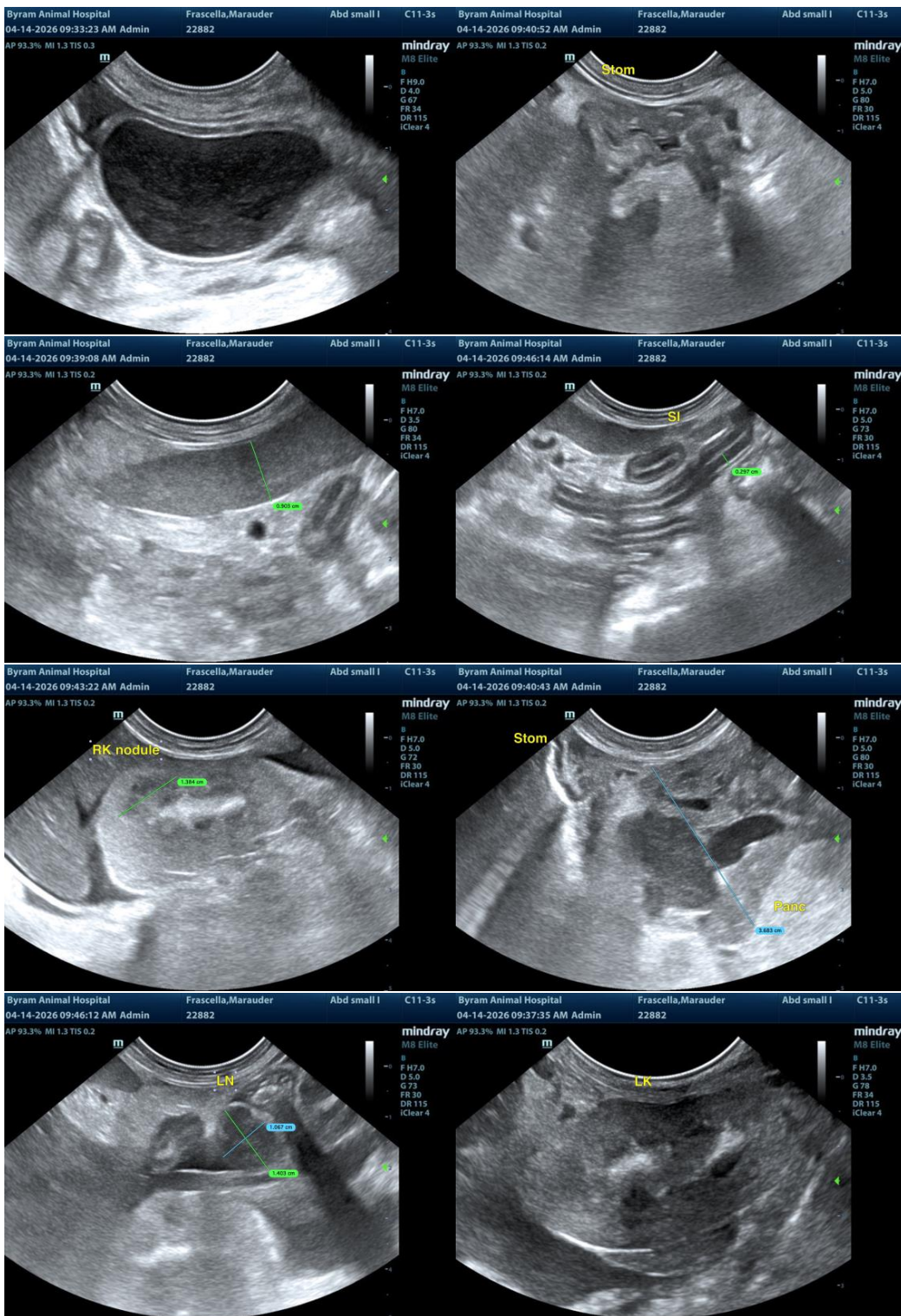
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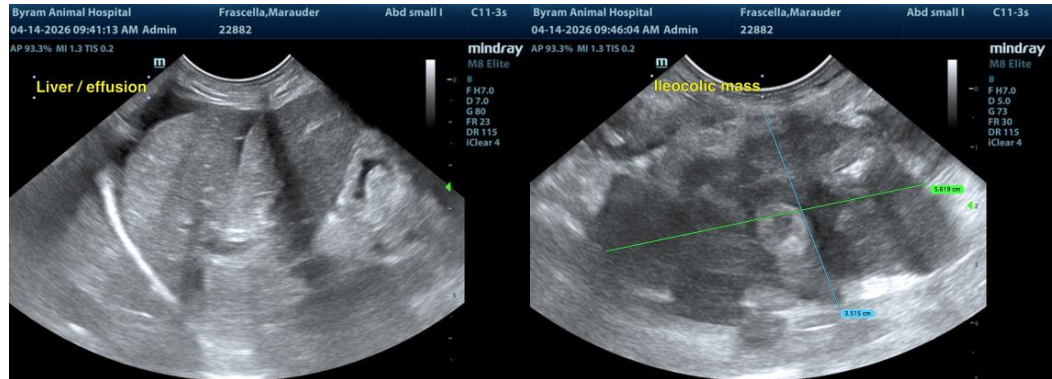
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@sonopath.com