



PATIENT	PRESENTING CLINICAL SIGNS
Toon Scerbo	See echo report
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Feline	<i>Urinary System</i>
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 changes were noted.
DSH	
SEX	The area of the iliac trifurcation was free of pathology.
FS	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 3.9 cm in length. The right kidney measured 4.0 cm in length.
AGE	
14 years	
WEIGHT	<i>Adrenal Glands</i>
5.08 lbs.	The left and right adrenal glands were overtly normal in size, position, and shape. The left adrenal gland measured 0.42 cm width and the right adrenal gland measured 0.40 cm width.
INTERPRETED BY	<i>Spleen</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen was enlarged in size with maintained symmetrical mildly rounded capsule contour and areas of subtle splenic parenchyma heterogeneity. There were no visualized splenic masses or nodules. The spleen measured 1.6 cm width.
IMAGING PERFORMED BY	<i>Liver/ Gallbladder</i>
Kerri Becker	The liver was mildly enlarged with symmetrical contour and maintained homogeneous parenchyma. Normal hepatic vascular volume was present without evidence of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild gallbladder debris. No evidence of gallbladder wall edema. The cystic and common bile ducts were normal.
HOSPITAL NAME	<i>Gastrointestinal</i>
Lake Hopatcong AH	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, nonshadowing ingesta, consistent with food echogenicity without signs of obstruction or foreign material.
REFERRING VET	
Dr. Navarru	The small intestine presented intact borderline thickened wall exhibiting subjective mild altered wall layer ratio owing to propensity for borderline prominent intestine, submucosa and muscularis layer. The small Intestinal wall width measured 0.25 cm. Segmental similar appearing mild intestinal nonshadowing ingesta was noted to the level of the colon.
INVOICE	
10811	
DATE	
4/15/26	Normal visible colon wall layers were present with semi-formed fecal matter in lumen.



PATIENT

Pancreas

Toon Scerbo

The area of the pancreas was sonographically normal.

SPECIES

Free Abdomen

Feline

Previously noted peritoneal effusion was present with normal omental echogenicity. No significant or swollen mesenteric lymphadenopathy was visualized.

BREED

DSH

- Hepato-splenomegaly with normal hepatic vascular volume and mild heterogeneous splenic parenchyma

SEX

FS

- Previously noted peritoneal effusion
- Borderline thickened small intestine with nonshadowing gastrointestinal ingesta – consistent with food echogenicity

AGE

14 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

5.08 lbs.

There is no evidence of hepatic congestion in conjunction with echocardiogram. Assuming no subnormal albumin level, primary consideration for nonspecific neoplasia, less likely FIP given patient age may be suspected. Assuming normal clotting status and using a 25-gauge needle, hepatosplenic FNA cytology is warranted in conjunction with effusion analysis, cytology, +/- C/S, or FIP titer / PCR.

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Lake Hopatcong AH

REFERRING VET

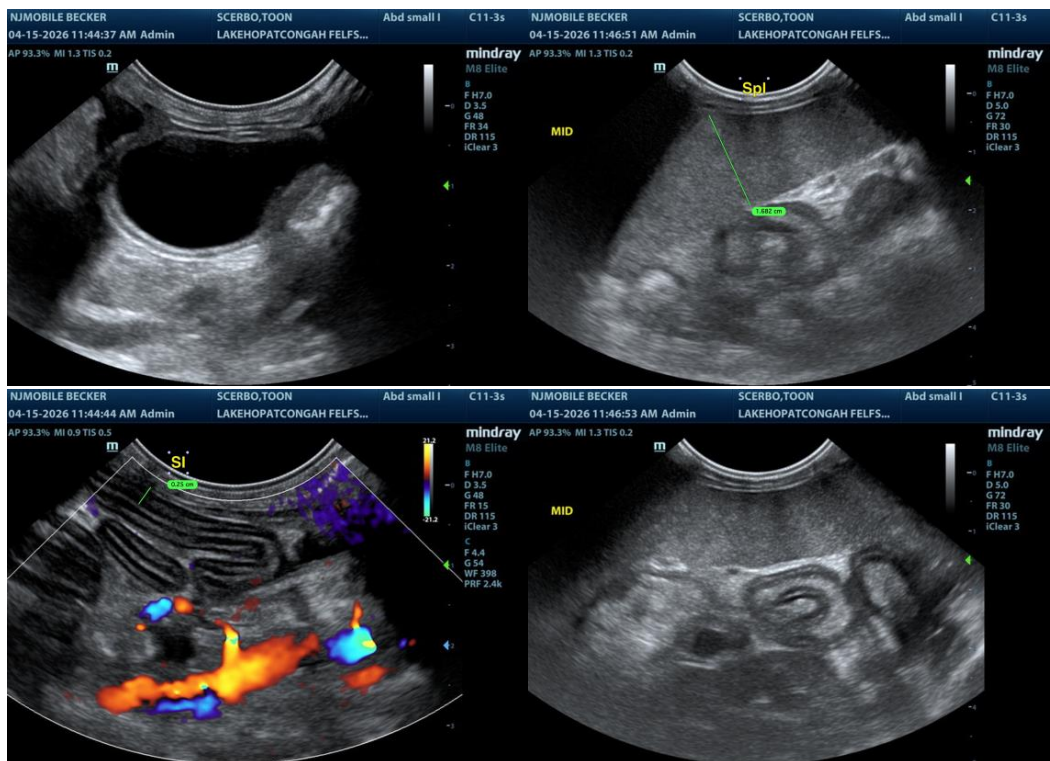
Dr. Navarru

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DATE

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PATIENT

Toon Scerbo

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

14 years

WEIGHT

5.08 lbs.

INTERPRETED BY

R. McKenzie Daniel,
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 (Canine and Feline)

IMAGING PERFORMED BY

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HOSPITAL NAME

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REFERRING VET

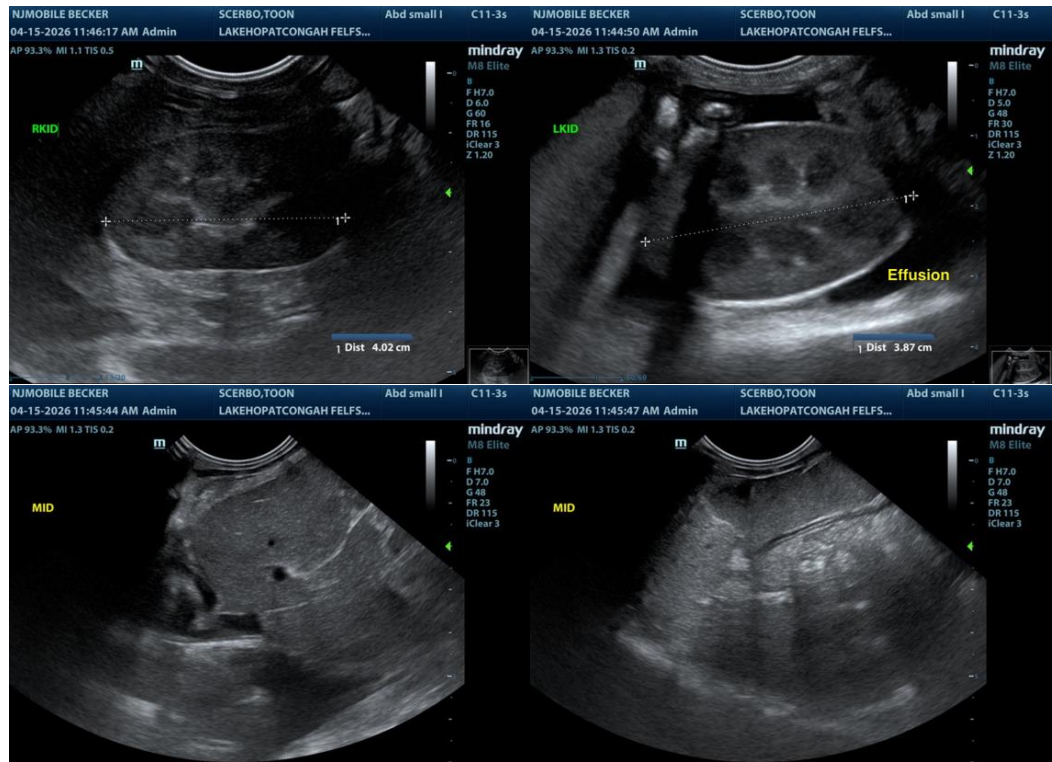
Dr. Navarru

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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