

**PATIENT**

Danny Huber

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

14yr

WEIGHT

11.7lb

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING
PERFORMED BY**

Julie Kang

HOSPITAL NAME

Sabino Veterinary Care

REFERRING VET

Tom Johnston

**INVOICE
24419****DATE**
04/07/2026**PRESENTING CLINICAL SIGNS**

3/11/26 Exam Hx: Progressive wt loss despite polyphagia for several months; food-seeking behavior new. Hx PU; prior BW r/o hyperthyroidism (7/2025). O notes pt very thin. Stool normal, no tenesmus. No C/S. Occasional V (baseline per O). No D.

Abnormal PE/Chem/CBC/UA Results: 7/2025: CBC - Lymphocytes 1054. Chem21 - Alb 4.1, IRIS stage 2 (BUN 37/Creat 1.9/SDMA 14.5), Ca 11.1, PSL 28. TT4 - 1.9. UA - USG 1.038, 1+ proteinuria. Triple - negx3. Wt trends: 7/2025 14.1lbs --> 3/11/26 12.1lbs --> 4/7/26 11.7lbs. 4/7/26: PE: Transient grade 1-2/6 left-sided systolic heart murmur was appreciated. Mild/Mod generalized muscle atrophy. BCS 5/9.

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 mild non-dependent particulate sediment. 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 mild asymmetrical margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was present. Areas of hyperechoic medullary parenchyma to indistinct hyperechoic medullary striations and pinpoint medullary mineral. The left kidney measured 3.6 cm in length. The right kidney measured 3.8 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 0.40 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.40 cm width

Spleen

The spleen was normal in size and contour. Variably echogenic hyperechoic to discreetly hypoechoic non-capsule deforming nodules were present, an example of nodules measured 0.2-0.3 cm.

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 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 gas and pyloric fluid with no signs of obstruction or foreign material.



PATIENT

Danny Huber

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material. The small intestinal wall measured 0.23 cm in width.

SPECIES

Feline

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

Pancreas

The area of the pancreas was sonographically normal.

BREED

DSH

Free Abdomen

No evidence of peritoneal effusion was present.

SEX

MN

Intermittent mildly prominent to enlarged jejunocolic lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

AGE

14yr

ULTRASONOGRAPHIC FINDINGS

Primary

- Normal urinary bladder with mild urine sediment
- Bilateral chronic renal changes.
- Sonographically unremarkable gastrointestinal tract with mild pyloric fluid
- Normal area of the pancreas
- Non-enlarged spleen with discrete variably echogenic nodules
- Intermittent mild jejunocolic lymphadenopathy suggestive of benign criteria i.e. mild reactive hyperplasia or lymphadenitis

WEIGHT

11.7lb

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Despite lack of sonographic gastrointestinal mural pathology, underlying mild chronic enteropathy or pancreatitis may present sonographically normal. Correlation with a GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. No overt evidence of abdominal neoplastic criteria.

IMAGING PERFORMED BY

Julie Kang

HOSPITAL NAME

Sabino Veterinary Care

REFERRING VET

Tom Johnston

INVOICE

24419

DATE

04/07/2026



PATIENT

Danny Huber

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

14yr

WEIGHT

11.7lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Julie Kang

HOSPITAL NAME

Sabino Veterinairy Care

REFERRING VET

Tom Johnston

INVOICE

24419

DATE

04/07/2026





PATIENT

Danny Huber

SPECIES

Feline

BREED

DSH

SEX

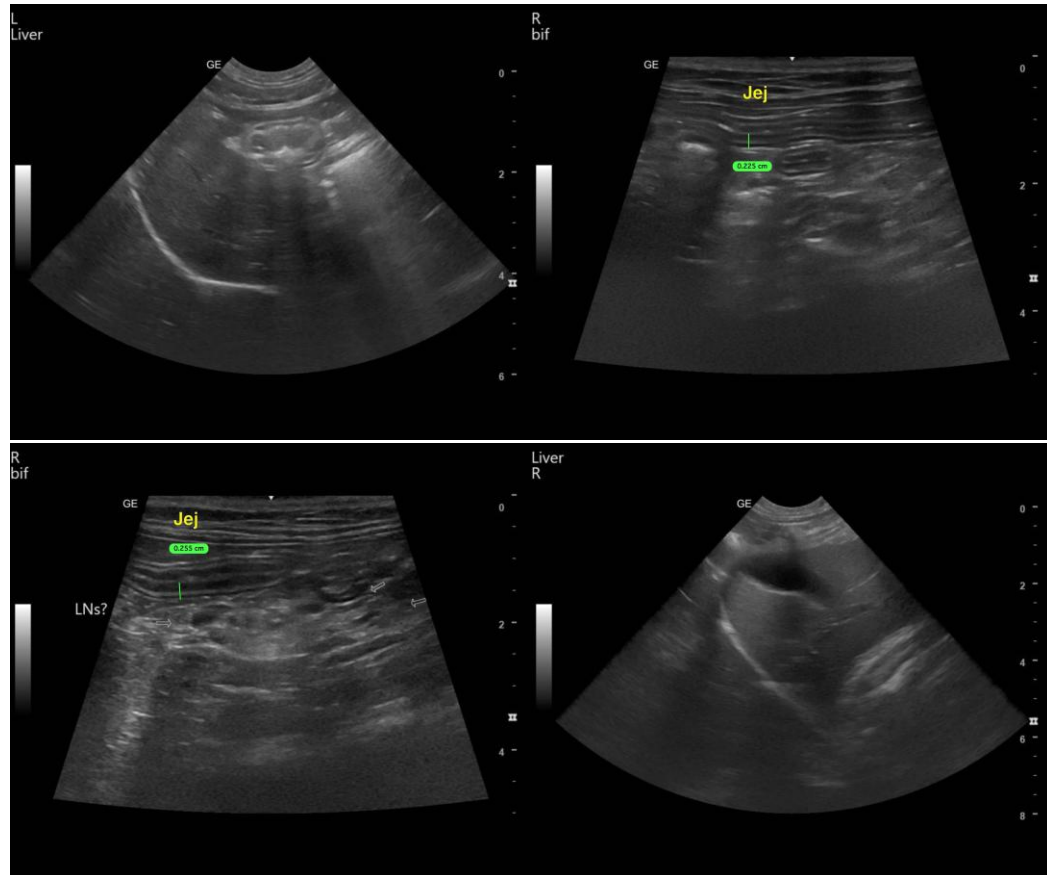
MN

AGE

14yr

WEIGHT

11.7lb



INTERPRETED BY

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

IMAGING PERFORMED BY

Julie Kang

HOSPITAL NAME

Sabino Veterinary Care

REFERRING VET

Tom Johnston

INVOICE

24419

DATE

04/07/2026

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