



**PATIENT**

Lily Merwin

**PRESENTING CLINICAL SIGNS**

History: Weight loss. Normal labs and digestive profile. Low platelet (157). Radiographs (radiologist read): suspect duodenal foreign body

**SPECIES**

Feline

**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. Primarily dependent to mildly nondependent particulate 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.

**BREED**

Domestic Shorthair

**SEX**

Spayed Female

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present in the left kidney. Minor pyelectasia was noted in the right kidney. The left kidney measured 3.8 cm in length. The right kidney measured 3.0 cm in length.

**AGE**

14 Years

**Adrenal Glands**

**WEIGHT**

14 Pounds

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.39 cm.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.37 cm.

**INTERPRETED BY**

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

**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. The spleen measured 0,84 cm in width.

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS

**Liver**

**HOSPITAL NAME**

Mashpee VH

The liver was normal in size and contour. Normal hepatic parenchyma echogenicity, exhibiting mild to moderate coarse echotexture. A solitary nonhomogeneous to cystic intraparenchymal nodule was noted caudal to the gallbladder, measuring 1.3 cm in diameter.

The gallbladder was non distended in size with primarily anechoic content with mild debris. The cystic duct and common bile ducts were normal without evidence of dilation.

**REFERRING VET**

Mark Oldham, DVM

**Gastrointestinal**

The stomach exhibited intact yet subjective prominent wall layering. The lumen of the stomach contained a mild amount of nonspecific ingesta, exhibiting areas of distal acoustic shadowing, along with luminal gas. The gastric body wall measured 0.30 cm.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no evidence of small intestinal mechanical/metabolic ileus or overt

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5/16/22



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foreign material, as well as no loss of intestinal wall layering or intestinal masses. The duodenum wall measured 0.27 cm. The jejunum wall measured 0.21 cm. The ileocolic wall measured 0.32 cm.

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

**SPECIES**

Feline

***Pancreas***

The pancreas was normal in size and contour with heterogeneous to mildly hypoechoic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

**BREED**

Domestic Shorthair

***Free Abdomen***

No overt lymphadenopathy or peritoneal free fluid was present.

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Spayed Female

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

- Subjective mild gastritis pattern with mild nonspecific yet not overtly obstructive ingesta to potential echoes.
- Overtly normal small bowel- no overt evidence of small bowel foreign material
- Possible low-grade pancreatitis

**AGE**

14 Years

**Secondary Findings**

- Mild chronic renal changes
- Urinary bladder sediment
- Solitary nonspecific yet likely benign cystic hepatic nodule- likely consistent with benign cystic biliary adenoma.

**WEIGHT**

14 Pounds

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mild yet focally shadowing gastric ingesta to echoes were nonspecific yet the possibility of small nonobstructive gastric foreign material in conjunction with radiographic assessment could be present. Likewise, mild pancreatitis or structurally insignificant inflammatory bowel, which may present sonographically normal, as potential contributing factors to the patients weight loss, cannot be excluded.

**IMAGING PERFORMED BY**

Pamela Harrigan, RDMS

Further assessment may include a GI panel to include PLI/TLI/Cobalamin/Folate, chest radiographs (if not done) to rule out occult thoracic pathology, as well as sonographic monitoring of the stomach for evidence of persistent shadowing gastric luminal echoes. Endoscopy could be considered if strong clinical concern for gastric foreign material. Correlation with clinical history, especially if evidence of vomiting or inappetence is recommended.

**HOSPITAL NAME**

Mashpee VH

**REFERRING VET**

Mark Oldham, DVM

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

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**HOSPITAL NAME**

Mashpee VH

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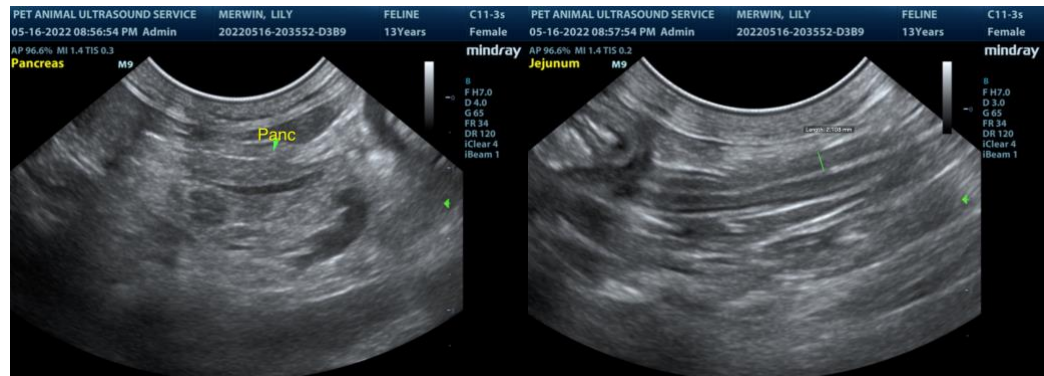
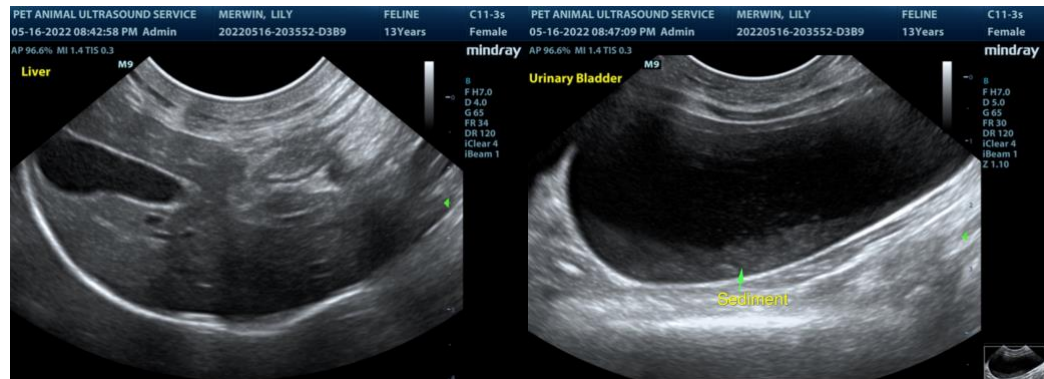
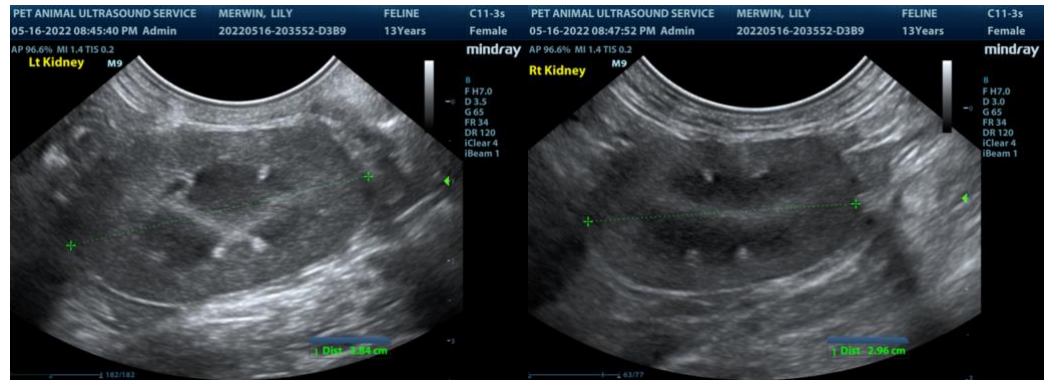
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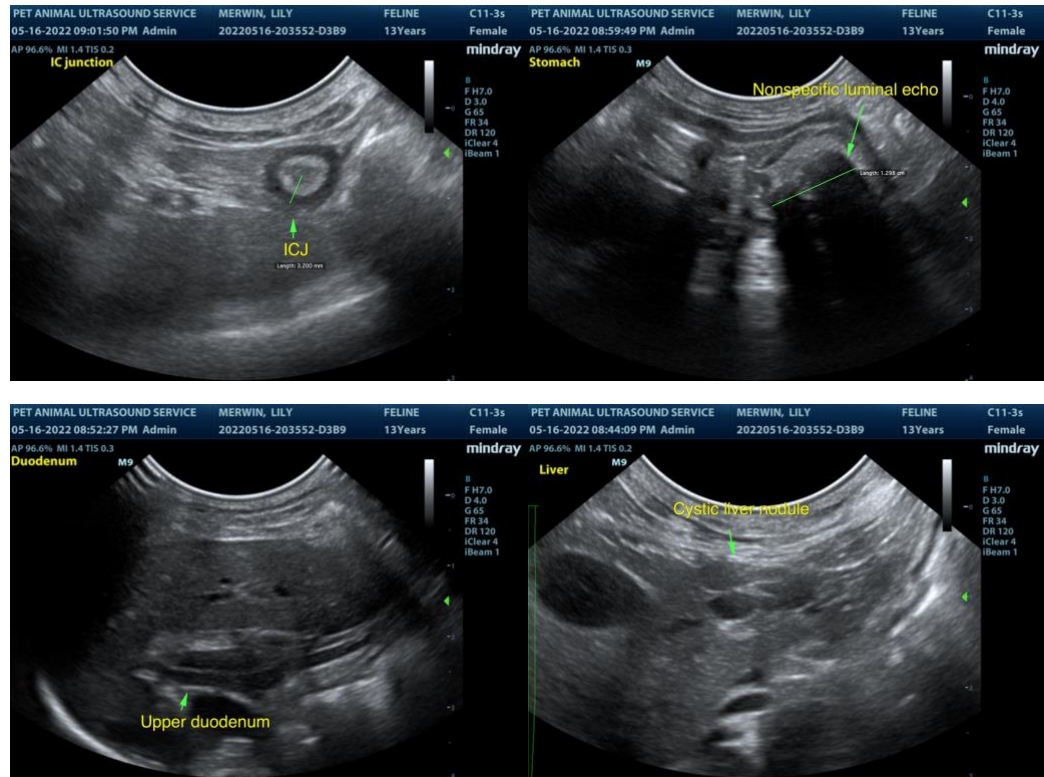
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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 info@SonoPath.com