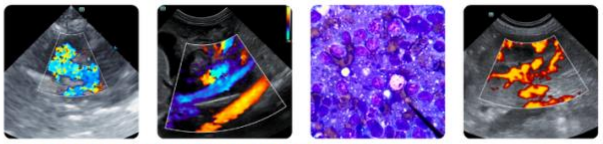


PATIENT

Olive Frye

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

2 Years

WEIGHT

8.9 lbs

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Shauna Gross

HOSPITAL NAME

TotalBond Veterinary Hospital Paw Creek

REFERRING VET

Dr. Shauna Gross

INVOICE

16018

DATE

05/09/26

PRESENTING CLINICAL SIGNS

On 5/1 P ate eucalyptus leaves and started vomiting. X-rays taken with no overt concerns of obstruction. Treated with fluids and Cerenia. Improved but vomiting returned on 5/4 - see at emergency hospital and then again on 5/5 at our hospital for recurrent vomiting. Repeat x-rays and still no overt concern of obstruction. Treated with SQ fluids, Cerenia, and lactulose and P improved for several days. On 5/8 started vomiting again and has now become lethargic. Roommate in house is possibly feeding human food to Olive (O witnessed roommate offer cream cheese) so possibility of food sensitivity

PE: unremarkable. Comfortable abdominal palpation at each exam. Varying degrees of dehydration but never severe. BAR

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. Echogenic to particulate nondependent sediment was present without evidence of calculus formation which may indicate cellular crystalline debris or lipid droplets. 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 aortic trifurcation was free of pathology.

Normal size and margination was 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 3.5 cm in length. The right kidney measured 3.7 cm in length.

Adrenal Glands

No obvious pathology in the area of the left adrenal gland.

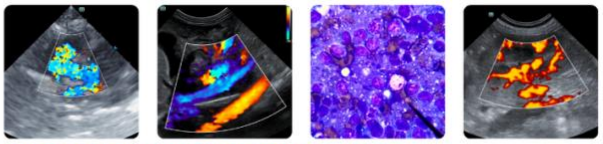
The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.35 cm width.

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. 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.



PATIENT

Olive Frye

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

2 Years

WEIGHT

8.9 lbs

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Shauna Gross

HOSPITAL NAME

TotalBond Veterinary Hospital Paw Creek

REFERRING VET

Dr. Shauna Gross

INVOICE

16018

DATE

05/09/26

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 mild thickened wall. Intact wall layering was maintained and distinct primarily secondary to subjective mildly thickened gastric mucosa. The gastric lumen contained mild primarily anechoic fluid and lumen gas without obstruction to pyloric outflow.

The intestinal walls demonstrated overall intact wall layers with mildly thickened walls and segmental to generalized mild altered wall layer ratio owing to propensity for mildly thickened muscularis layer. Minor segmental duodenojejunal corrugation and nonobstructive ileus with segmental intestinal gas. The duodenum wall measured potentially 0.43 cm wall width, possibly in the area of the duodenal corrugation. The jejunum wall measured 0.30 cm wall width.

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

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

Intermittent mildly enlarged colic to jejunocolic lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Mild perilymphatic hyperechoic omentum. An example of lymph node size was 1.4 c x 0.40 cm. No evidence of peritoneal effusion.

ULTRASONOGRAPHIC FINDINGS

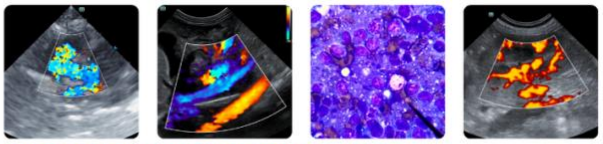
- Mild hypomotile gastritis pattern.
- Enteropathy exhibiting mildly thickened intact intestinal wall and minor segmental corrugation and nonobstructive ileus.
- Normal area of the pancreas.
- Mild colic/jejunocolic lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although history of dietary indiscretion yet given recurrent vomiting, non-specific gastroenteropathy with considerations including persistent gastroenteritis secondary to dietary indiscretion, infectious disease or similar, IBD or other inflammatory enteropathy, less likely emerging to occult intestinal neoplasia are all potentials. No current evidence of mechanical gastrointestinal obstruction or definitive foreign material.

A GI panel is warranted for further clarification and assessment for possible mild pancreatitis which may present sonographically normal. Continued gastrointestinal support is indicated with clinical monitoring. Gastrointestinal biopsies should be considered for further clarification if persistent gastrointestinal signs.

SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Olive Frye

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

2 Years

WEIGHT

8.9 lbs

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Shauna Gross

HOSPITAL NAME

TotalBond Veterinary Hospital Paw Creek

REFERRING VET

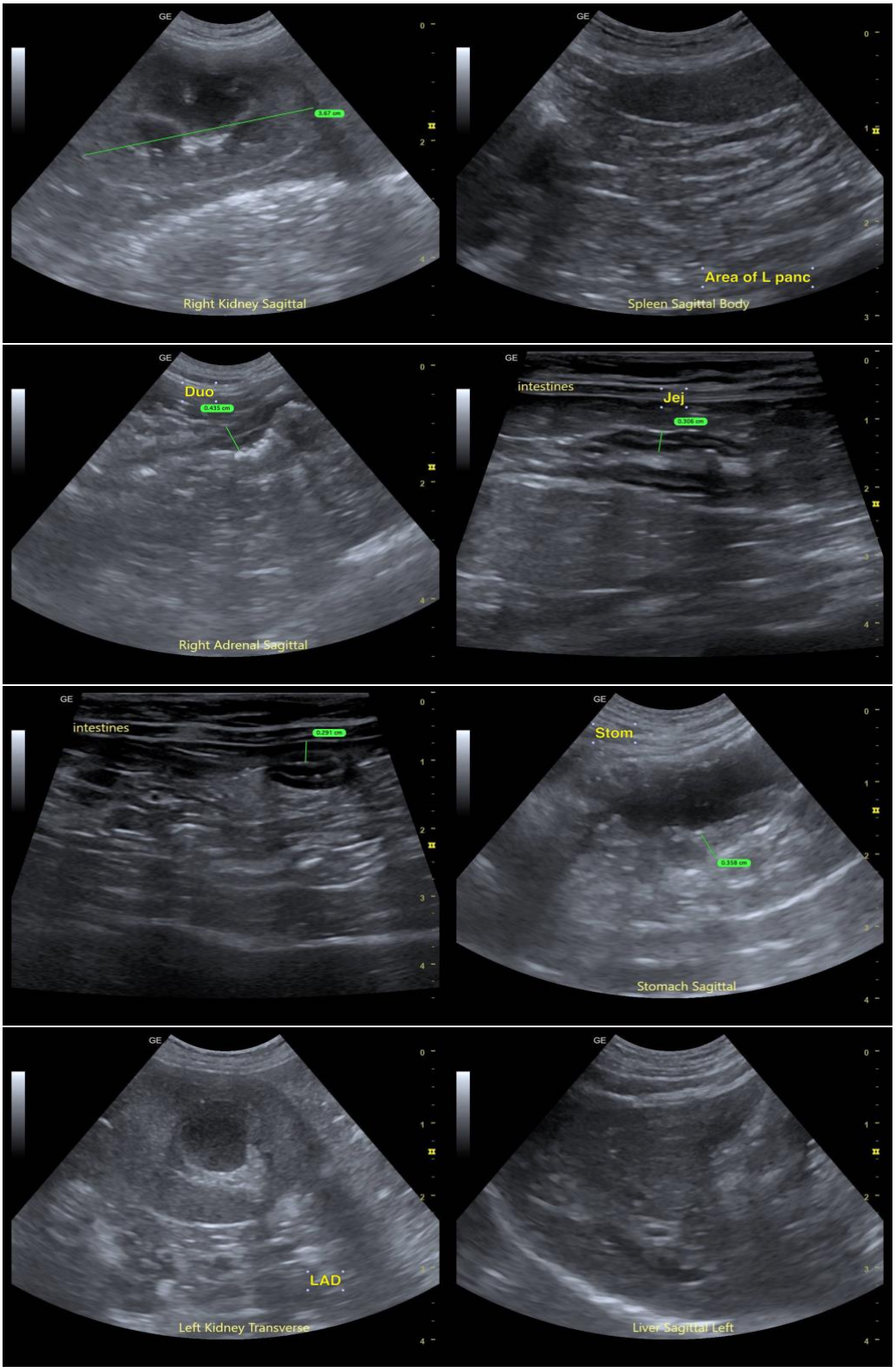
Dr. Shauna Gross

INVOICE

16018

DATE

05/09/26



PATIENT

Olive Frye

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

2 Years

WEIGHT

8.9 lbs

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

IMAGING PERFORMED BY

Dr. Shauna Gross

HOSPITAL NAME

TotalBond Veterinary Hospital Paw Creek

REFERRING VET

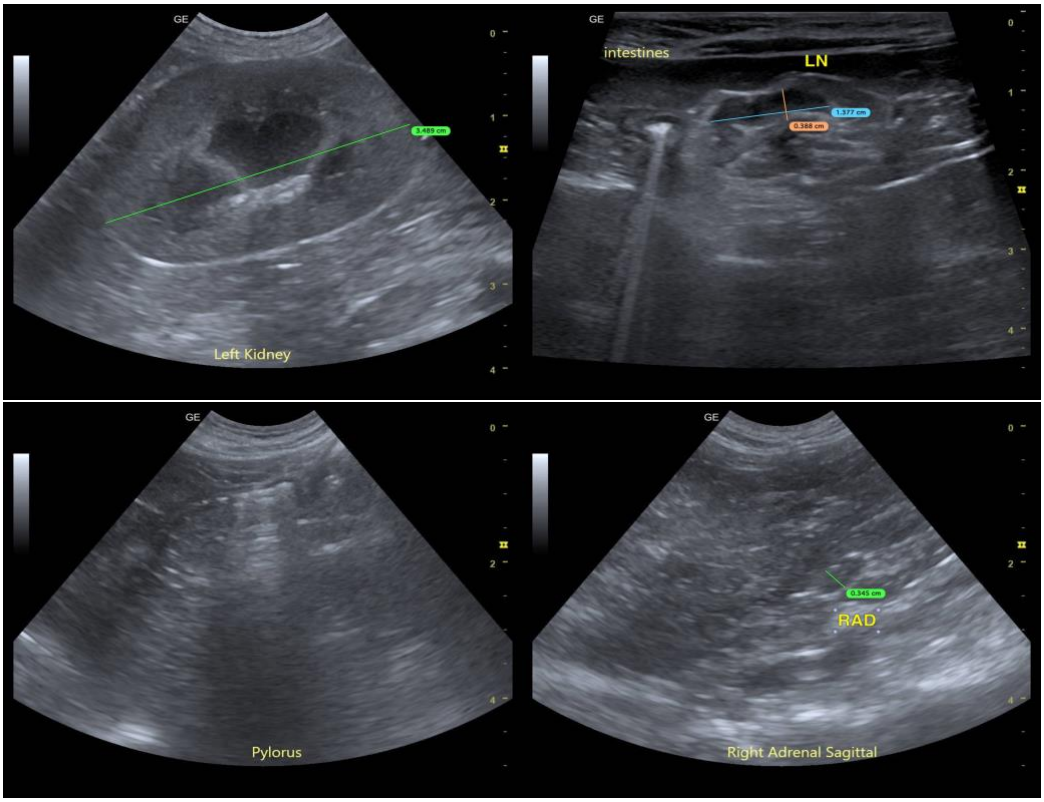
Dr. Shauna Gross

INVOICE

16018

DATE

05/09/26



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