



**PATIENT PRESENTING CLINICAL SIGNS**

Cookie Smethers History of soft stool, more frequent episodes since recent move, occasional blood, slight improvement with medical management

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

DSH

The urinary bladder was subnormal in size owing to lack of urine distention. Mild anechoic urine was present with mild dependent to nondependent hyperechoic sediment to mineral. Suspect areas of adhered mineral primarily along the ventral apical luminal surface were present. Mild yet variably thickened primarily ventral, apical, and dorsal urinary bladder walls were present, although full evaluation of the urinary bladder walls was limited owing to lack of urine distention. The ventral urinary bladder wall measured 0.53 cm width. The urethra was normal to a depth of 2.0 cm.

**SEX**

FS

The area of the aortic trifurcation was free of pathology. No overt pathology was noted in the area of the uterine remnant.

**AGE**

2016

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 pyelectasia. The left kidney measured 3.6 cm in length. The right kidney measured 3.8 cm in length.

**WEIGHT**

10.2

**Adrenal Glands**

**INTERPRETED BY**

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

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.30 cm width.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**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 0.95 cm width at the level of the hilus.

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Maple Hills VH

**Liver/ Gallbladder**

**REFERRING VET**

Dr. Eckman

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. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.25 cm.

**DATE**

7/19/22



**PATIENT**

Cookie Smethers

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 ileus, obstruction, or foreign material. The duodenum wall width measured 0.22 cm. The jejunum wall width measured 0.21 cm. No overt pathology was noted in the area of the ileocolic junction.

**SPECIES**

Feline

The colon exhibited generalized intact and sonographically unremarkable wall layering extending into the area of the distal colon and colorectum, which exhibited subtle prominent yet intact wall layering. Semi-formed to soft feces, consistent with reported diarrhea, was present in the distal colon.

**BREED**

***Pancreas***

DSH

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

**SEX**

FS

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

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**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

10.2

- Subjective mild colitis
- Sonographically unremarkable stomach and small bowel
- Mild to variably thickened urinary bladder with mild dependent to nondependent focally adhered mineral - suspect cystitis

**INTERPRETED BY**

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 DVM, DABVP  
 (Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Urinalysis +/- urine C/S ideally on a sterile urine sample is recommended. A rule out of potential hematuria as a contributing factor to reported bloody stool may be considered if clinically Indicated.

**IMAGING**

**PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

A novel protein or hydrolyzed diet with potential long-term dietary therapy, high colony count probiotics such as Provable +/- additional antibiotic trial, and assessment of clinical response would be reasonable. Assessment of cobalamin / folate levels and /or diarrhea PCR panel could be considered if persistent / progressive soft stool to diarrhea despite dietary therapy and colonic support.

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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.**

**BREED**

DSH

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.

**SEX**

FS

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