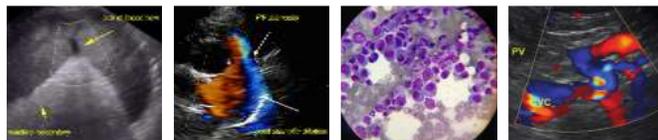


<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Spencer Stone	vomited once, one week gastric thickening
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Feline	<b>Urinary System</b>
<b>BREED</b>	The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. 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 was noted.
DSH	The area of the aortic trifurcation was free of pathology.
<b>SEX</b>	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 3.8 cm in length. The right kidney measured 4.0 cm in length.
Spayed Female	<b>Adrenal Glands</b>
<b>AGE</b>	The left and right adrenal glands were not definitively visualized.
7	<b>Spleen</b>
<b>WEIGHT</b>	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.
12	<b>Liver/ Gallbladder</b>
<b>INTERPRETED BY</b>	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.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<b>Gastrointestinal</b>
<b>IMAGING PERFORMED BY</b>	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. No evidence of retained ingesta, fluid or gastric mural thickening was noted. The gastric body wall width measured 0.24 cm.
Jenn	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 measured 0.25 cm width. The jejunum wall measured 0.22 cm width.
<b>HOSPITAL NAME</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
Rockaway AH	
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
12098	
<b>DATE</b>	
8/10/21	



**PATIENT**

**Pancreas**

Spencer Stone

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.

**SPECIES**

Feline

**Free Abdomen**

**BREED**

No overt lymphadenopathy or peritoneal effusion was present.

DSH

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

**Primary Findings**

Spayed Female

- Sonographically unremarkable abdomen

**AGE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

7

No overt evidence of significant visceral or specifically gastrointestinal pathology. Potential for low-grade pancreatitis may be present yet ultrasonographically normal.

**WEIGHT**

12

Continued as-needed gastrointestinal supportive care would be appropriate. If evidence of weight loss or persistent gastrointestinal signs, a GI panel to include PLI/TLI/Cobalamin/Folate may be considered to assess for evidence of nonstructural gastrointestinal disease.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

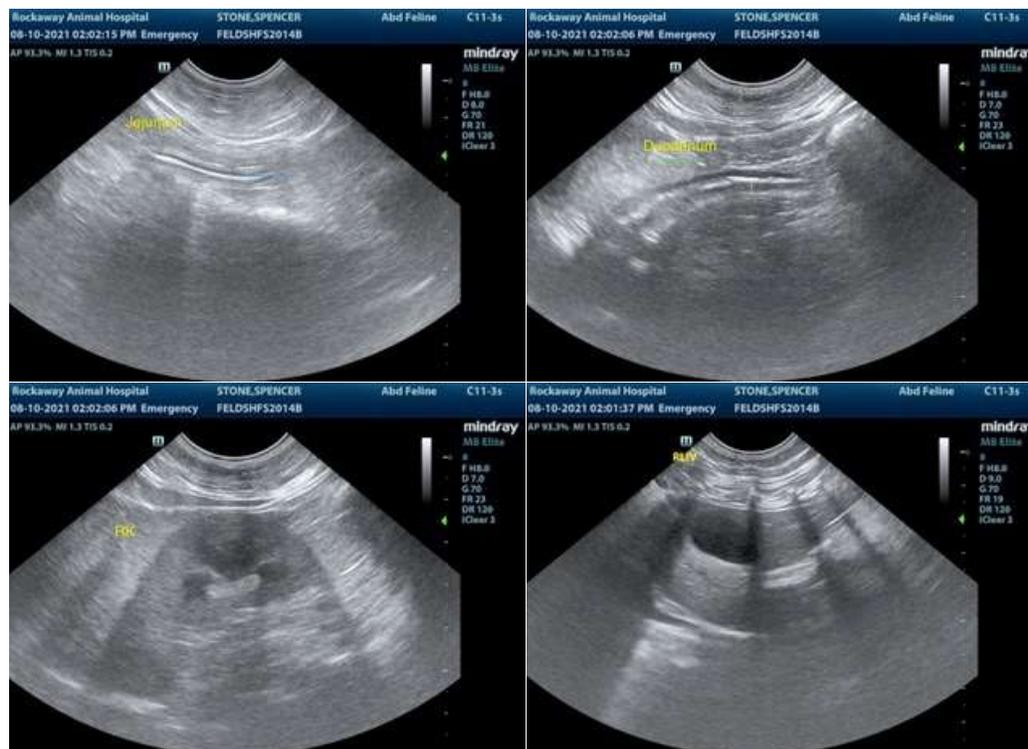
Dr. Maniar

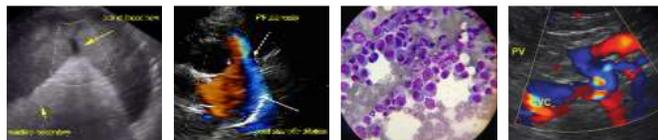
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## PATIENT

Spencer Stone

## SPECIES

Feline

## BREED

DSH

## SEX

Spayed Female

## AGE

7

## WEIGHT

12

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway AH

## REFERRING VET

Dr. Maniar

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## DATE

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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.

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
info@SonoPath.com