



**PATIENT**

Zoe Lally

**PRESENTING CLINICAL SIGNS**

Ate string 24-48hrs ago. Today there was blood in the stool today. Otherwise PE WNL.

Abnormal PE/Chem/CBC/UA Results: PE WNL

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

DSH

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 no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

**SEX**

FS

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 3.6 cm in length.

**AGE**

2.5yr

The area of the aortic trifurcation was free of pathology.

**Adrenal Glands**

**WEIGHT**

9.5lbs

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.35 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.36 cm width.

**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.

**IMAGING PERFORMED BY**

A. Rodriguez

**Liver**

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.

**HOSPITAL NAME**

Foxfield Veterinary  
Services

**Gastrointestinal**

**REFERRING VET**

A. Rodriguez

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 measured 0.24 cm in width.

**INVOICE**

11476ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental chyme with no signs of ileus, obstruction or foreign material. The duodenum measured 0.23 cm in width. The jejunum measured 0.21 cm in width.

**DATE**

08/23/2022

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

**Pancreas**



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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 was evident.

**SPECIES**

Feline

**Free Abdomen**

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

DSH

**ULTRASONOGRAPHIC FINDINGS**

**Primary**

**SEX**

FS

- Sonographically normal empty stomach
- Overtly normal GI tract with minor segmental intestinal chyme-no evidence of mechanical/metabolic ileus or foreign material
- Overtly normal colon, potential for minor colitis

**AGE**

2.5yr

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

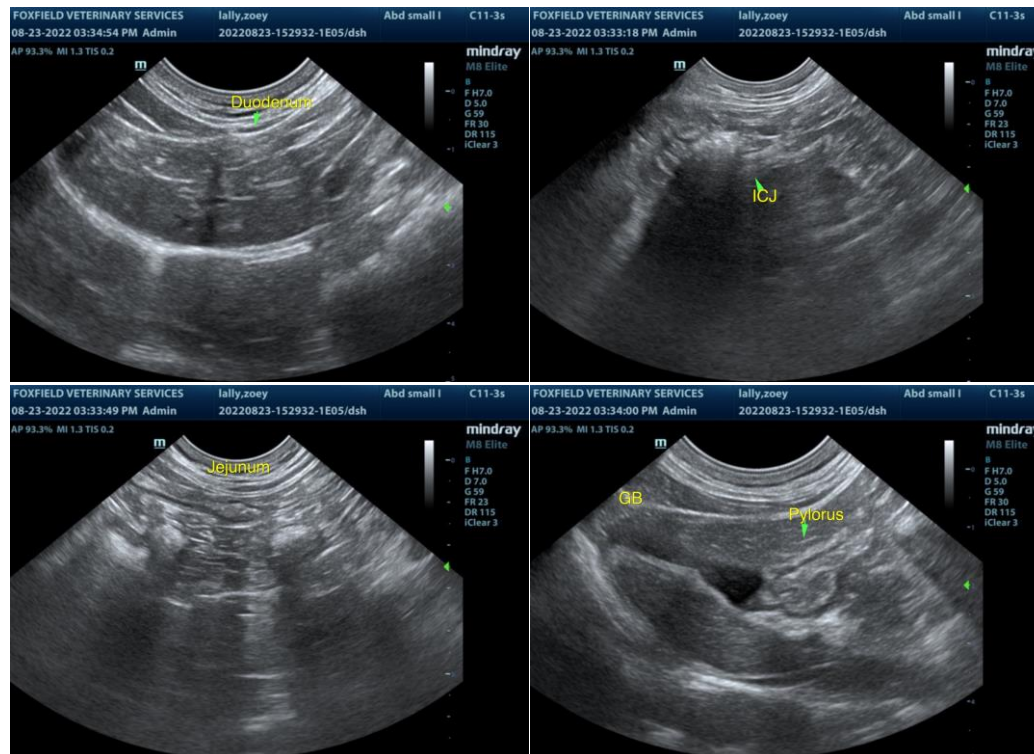
Overall, no evidence of significant abdominal visceral pathology was present in this study as a definitive cause of the patient's clinical signs. No evidence of intestinal or colonic foreign material. The possibility of a small amount of passed foreign material in the colon cannot be definitively excluded. Empirically GI support and conservative therapy for low grade pancreatitis and monitoring of fecal output is recommended. No indication for surgical intervention based on this study.

**WEIGHT**

9.5lbs

**INTERPRETED BY**

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



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**WEIGHT**

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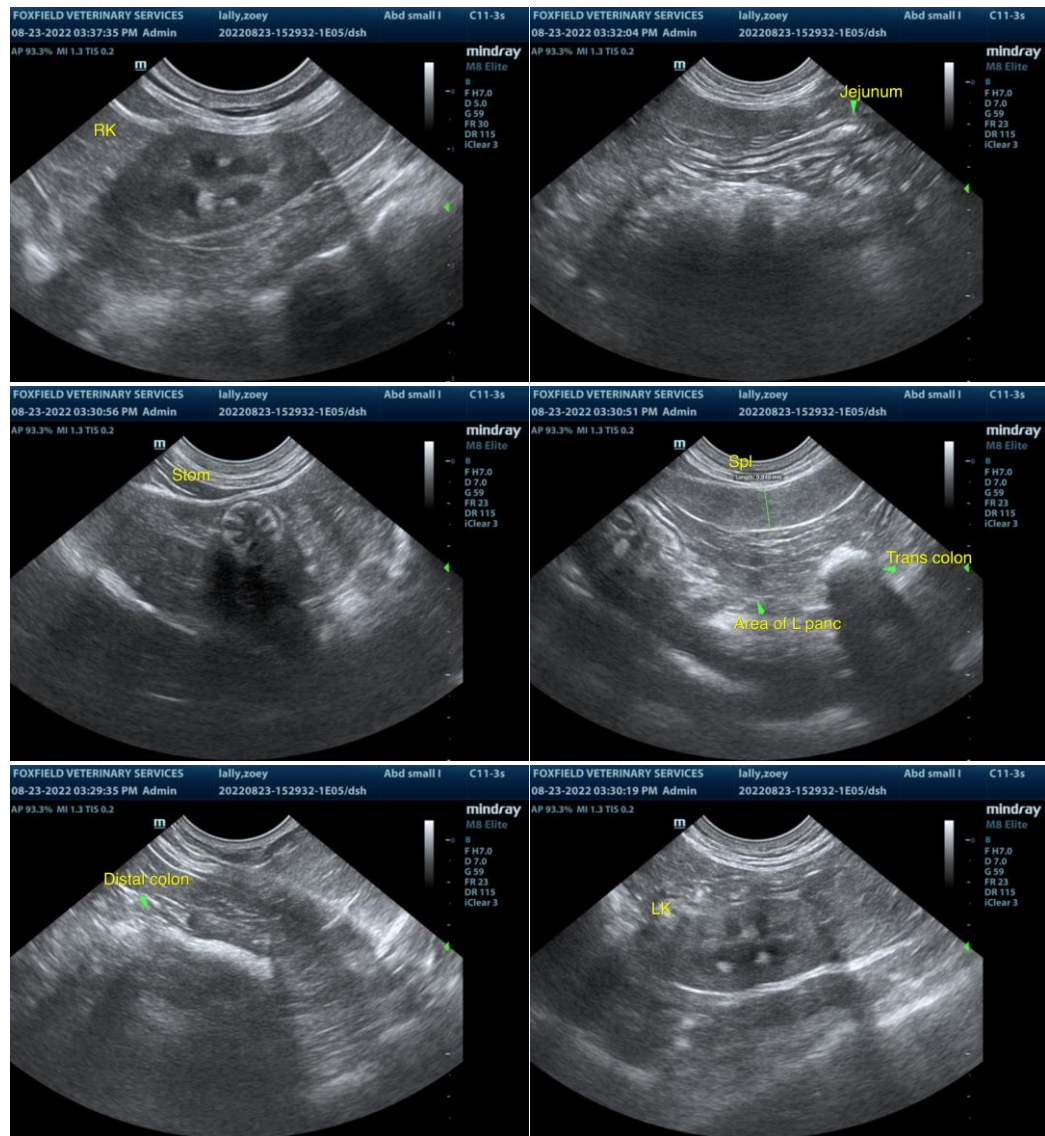
A. Rodriguez

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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.

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