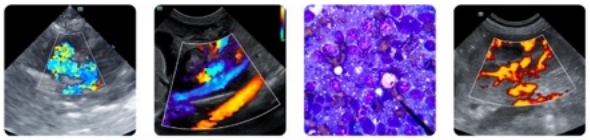


PATIENT

Mac Thibaudeau

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered male

AGE

13 years

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amelie Thibaudeau

HOSPITAL NAME

Mojo Vet

REFERRING VET

Dr. Thibaudeau

INVOICE

70042

DATE

1/12/26

PRESENTING CLINICAL SIGNS

History: Increased appetite, marked weight loss from 16lbs to 12 lbs in 4 months, thyroid normal, bw: mild to moderate elevations in liver enzymes, tbili 1.2; rest of bw and ua non significant.
Abnormal PE/Chem/CBC/UA Results: marked weight loss, mildly jaundiced

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.4 cm. The right kidney measured 4.6 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

Slight, coarse hepatic architecture was noted. However, the liver parenchyma itself appeared to be normal. The gallbladder was congested and over distended with mildly echogenic wall and excessive coalesced bile. The common bile duct was severely dilated in this patient measuring up to 0.96 cm. The common bile duct was followed to the level of the duodenal papilla in union with the pancreatic duct. Excessive mucous debris was noted at the common bile duct. This is consistent with mucoduct. Lobar biliary dilation was also noted.

PATIENT

Mac Thibaudeau

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered male

AGE

13 years

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amelie Thibaudeau

HOSPITAL NAME

Mojo Vet

REFERRING VET

Dr. Thibaudeau

INVOICE

70042

DATE

1/12/26

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

The **pancreas** revealed coarse architecture and irregular contour. Pancreatic duct was not dilated as the common bile duct appeared to taper and was somewhat strictured at the level of the duodenal papilla. No overt calculi or masses were noted.

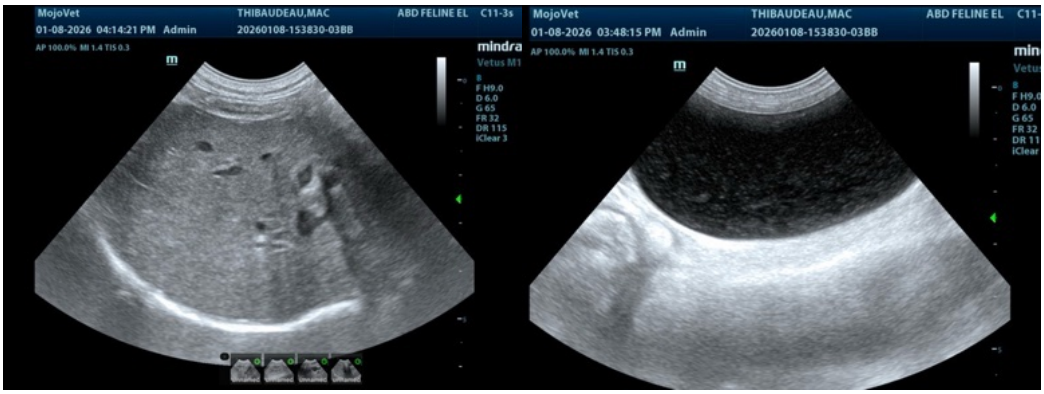
ULTRASONOGRAPHIC FINDINGS

Cholecystitis with progressive post hepatic obstruction.

Some level pancreatitis may be present.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Subxiphoid palpation is recommended to assess for pain in the region of the pancreas. Surgical intervention with bile duct deviation procedure may be appropriate. Cholecystocentesis with culture would be appropriate. Medical management for cholangiohepatitis can also be considered. However, I am concerned about long term viability of the biliary tree in this patient. The cause of weight loss is unclear unless the liver failure is the primary cause. There was no overt evidence of neoplasia however, an underlying neoplastic event cannot be ruled out without histopathology of the liver and further inspection of the biliary tree and pancreas upon surgery.



PATIENT

Mac Thibaudeau

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered male

AGE

13 years

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amelie Thibaudeau

HOSPITAL NAME

Mojo Vet

REFERRING VET

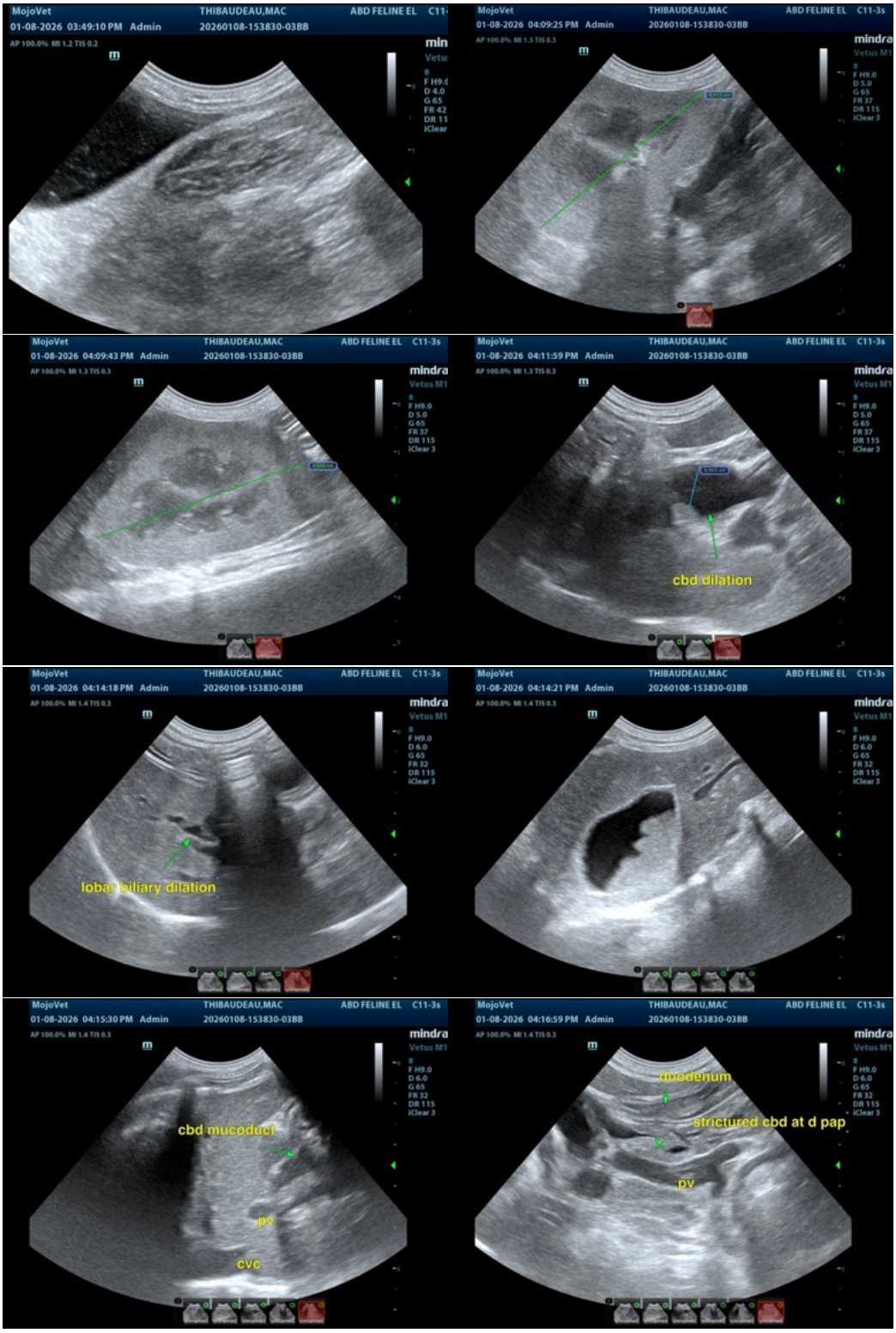
Dr. Thibaudeau

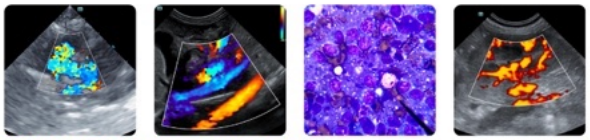
INVOICE

70042

DATE

1/12/26





PATIENT

Mac Thibaudeau

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered male

AGE

13 years

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amelie Thibaudeau

HOSPITAL NAME

Mojo Vet

REFERRING VET

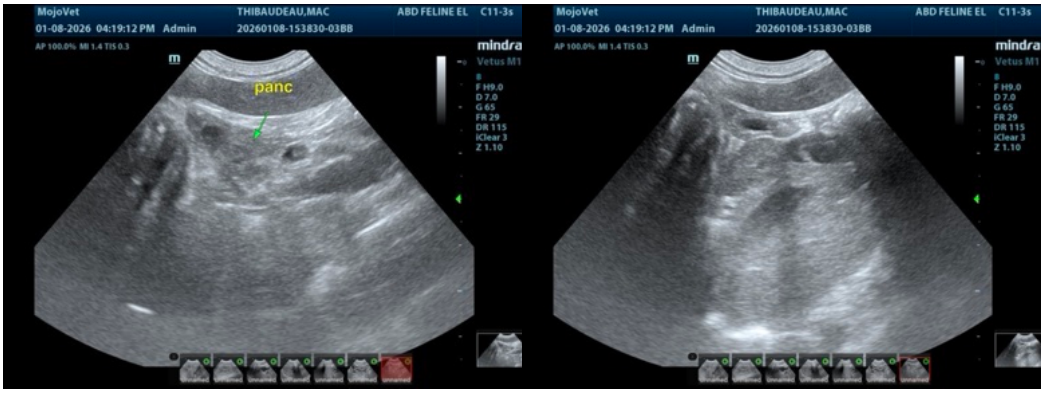
Dr. Thibaudeau

INVOICE

70042

DATE

1/12/26



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.

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com