



PATIENT

Misfit Thoresen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

5.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Dr. Carlos Abdul-Chani

HOSPITAL NAME

Byram AH

REFERRING VET

Dr. Lind-Wilson

INVOICE

35279

DATE

1/8/26

PRESENTING CLINICAL SIGNS

History: Weight loss w/ ravenous appetite, currently on Methimazole 2.5mg BID (T4 0.5 on meds)
Abnormal PE/Chem/CBC/UA Results: AST 298 (10-100), ALT 1523 (10-100), AlkPhos 325 (6-102) T Bili 1.2 (0.1-0.4), T4 0.52 (0.8-4.0), Neuts 12879, Eos 1272 Abnormal U/A findings: NSF Urine Specific Gravity: 1.026

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 moderate 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 right kidney measured 4.45 cm. The left kidney measured 4.12 cm. Mineralization was noted in both kidneys, nonobstructive.

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. The left adrenal gland measured 0.36 cm. The right adrenal gland measured 0.34 cm.

Spleen

The **spleen** was moderately enlarged, measuring 1.8 cm in width. Subtle micronodular changes were noted.

Liver

The **liver** was normal in size with diffuse hyperechoic parenchyma and coarse architecture. Slight heterogenous parenchymal changes were noted. The gallbladder and common bile duct were unremarkable. No evidence of hepatic vein dilation.

Gastrointestinal

The **gastrointestinal tract** revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malassimilation of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content as unremarkable.

Pancreas



PATIENT

Misfit Thoresen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

5.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Dr. Carlos Abdul-Chani

HOSPITAL NAME

Byram AH

REFERRING VET

Dr. Lind-Wilson

INVOICE

35279

DATE

1/8/26

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

Free Abdomen

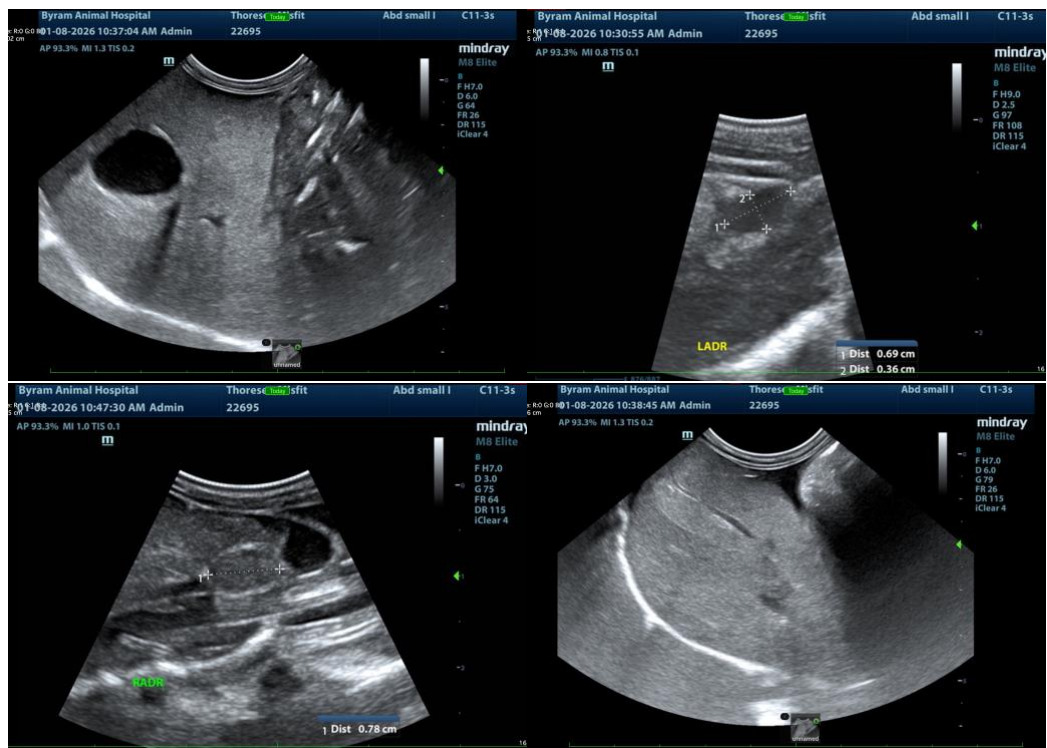
A mild amount of **free fluid** was noted.

ULTRASONOGRAPHIC FINDINGS

- Splenomegaly and free fluid
- Heterogenous parenchymal changes in the liver- This is a nonspecific presentation, however, given the hepatic failure, hepatic lipidosis, or more likely, underlying round cell neoplasia is an issue.
- Nonobstructive nephrolithiasis
- Geriatric abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Strong concern for splenic +/- hepatic neoplasia/round cell neoplasia, lymphoma, and similar. 25-gauge FNA after coagulation panel is indicated of the spleen and liver. Abdominocentesis and cytospin of any of the free fluid that is able to be obtained, would also be recommended. Prognosis is guarded. Benadryl injection prior to FNA is indicated in case of mast cell disease.





PATIENT

Misfit Thoresen

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

5.9 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Dr. Carlos Abdul-Chani

HOSPITAL NAME

Byram AH

REFERRING VET

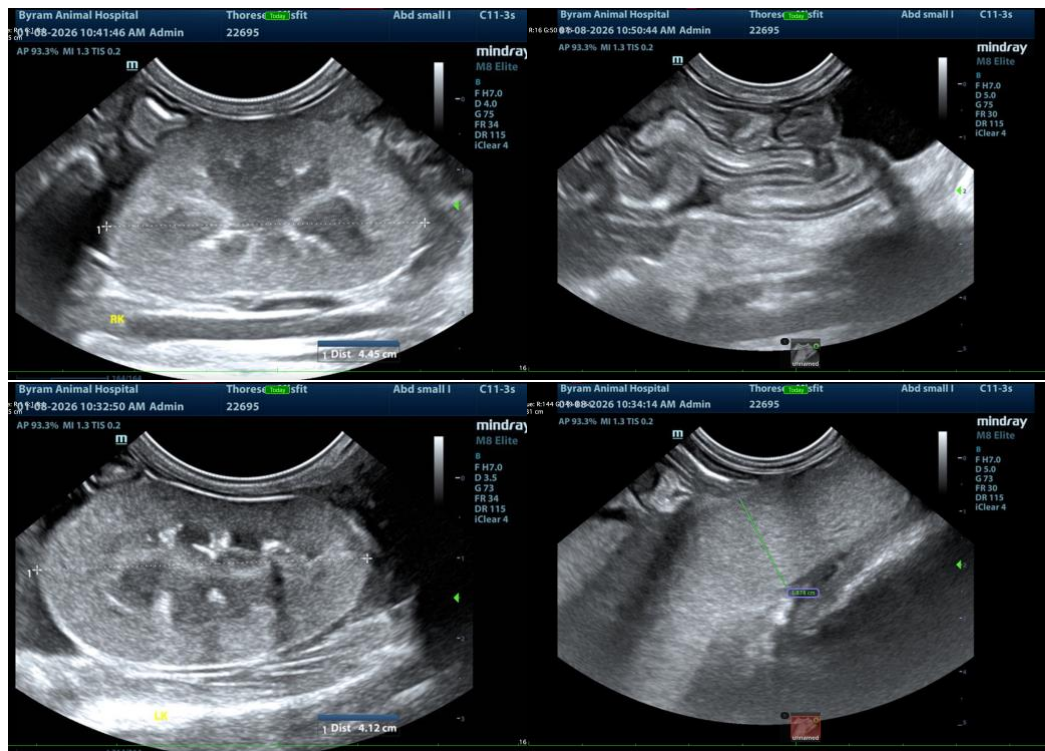
Dr. Lind-Wilson

INVOICE

35279

DATE

1/8/26



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, Owner, Founder -- SonoPath.com
info@SonoPath.com