



PATIENT

Bentley Smith

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Neutered Male

AGE

13 Years 6 Months

WEIGHT

19.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson Animal Clinic

REFERRING VET

Dr. Kristen Levine

INVOICE

71689

DATE

11/11/25

PRESENTING CLINICAL SIGNS

Elevated liver enzymes, decreased appetite,
Abnormal PE/Chem/CBC/UA Results: ALT 990

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.8 cm. The left kidney measured 4.5 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. The left adrenal gland measured 0.30 cm. The right adrenal gland measured 0.30 cm.

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 were noted.

Liver

The **liver** presented slight increased portal markings and minor coarse architecture. Normal size and vascularity. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

The **stomach** revealed progressively shadowing luminal material consistent with likely hairball accumulation +/- ingesta. The small intestines and colon were unremarkable with normal curvilinear mural patterns and content.

Pancreas

The right limb of the **pancreas** revealed a minor amount of remodeling in a region of approximately 1.5-2.0 cm.



PATIENT

Bentley Smith

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Neutered Male

AGE

13 Years 6 Months

WEIGHT

19.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson Animal Clinic

REFERRING VET

Dr. Kristen Levine

INVOICE

71689

DATE

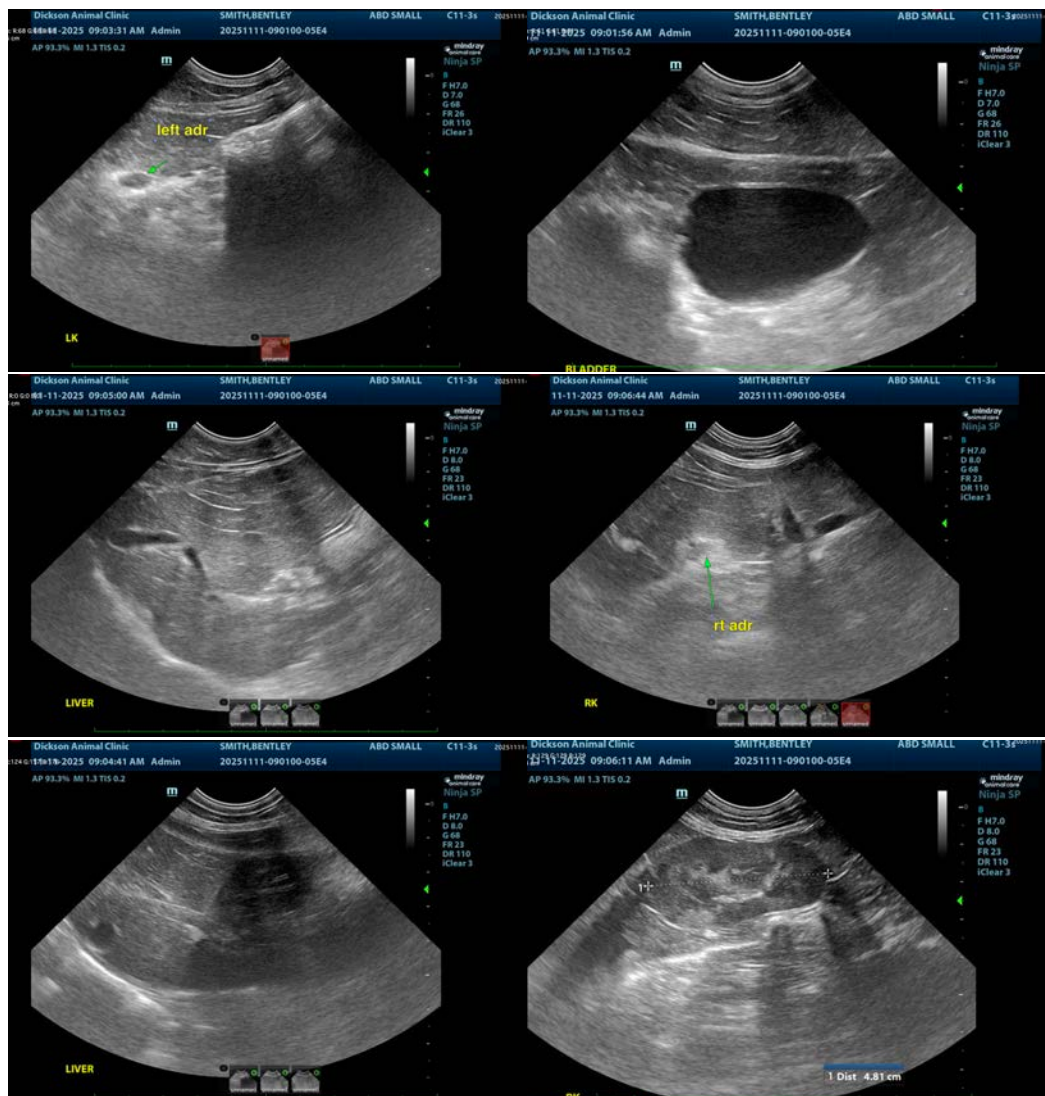
11/11/25

ULTRASONOGRAPHIC FINDINGS

- Non-specific inflammatory hepatopathy.
- Hairball density in the stomach.
- Remodeled right pancreatic limb, possible low-grade inflammation, which may be feeding the inflammatory hepatopathy presentation.
- Age related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the liver indicated to assess for inflammatory cell type. No evidence of neoplasia. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas. Diet change to hydrolyzed diet, broad-spectrum antibiotic trial, low-dose Prednisolone trial all valid interventions in this patient.





PATIENT

Bentley Smith

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Neutered Male

AGE

13 Years 6 Months

WEIGHT

19.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson Animal Clinic

REFERRING VET

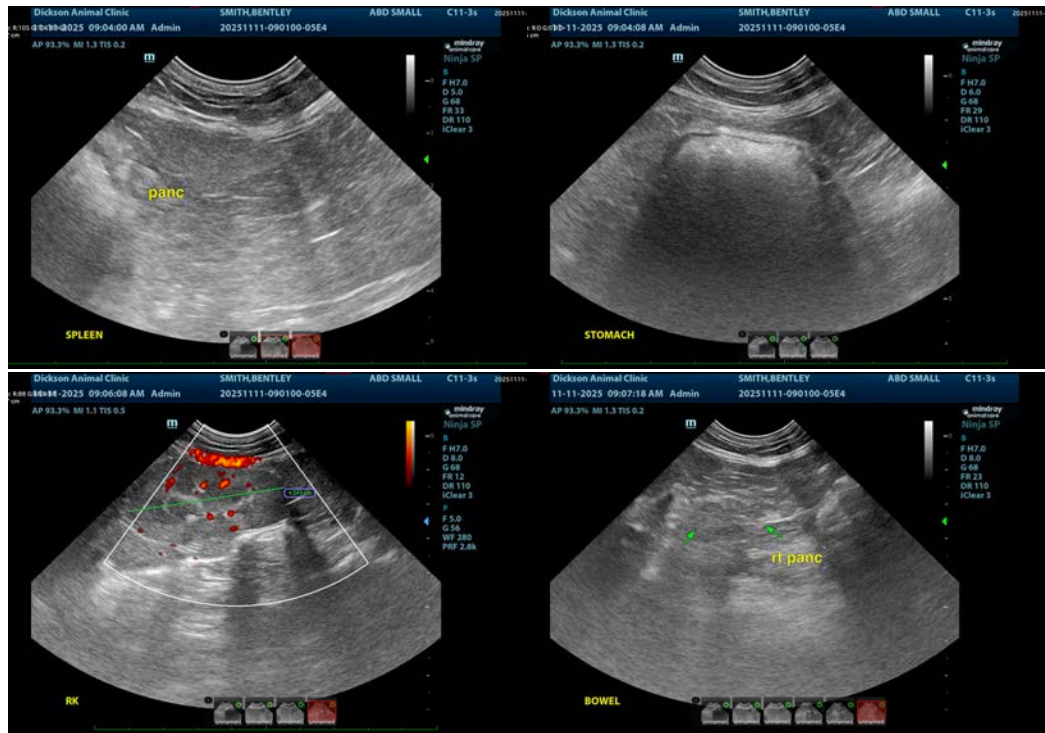
Dr. Kristen Levine

INVOICE

71689

DATE

11/11/25



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