



PATIENT

Yoda Rupley

SPECIES

Feline

BREED

Domesic Shorthair

SEX

Neutered male

AGE

1 year

WEIGHT

11.9 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Rupley

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

Dr. Rupley

INVOICE

68717

DATE

11/17/25

PRESENTING CLINICAL SIGNS

History: presented for adx and distended abdomen. Normal 11/10/25, became uncomfortable 11/11/25. Vitals: 11.8 pounds. Temperature: 104.5 (normal range is 100.0 F- 102.5 F) Heart Rate: 120 bpm (normal is 145-200) Respiratory Rate: 60 bpm (normal is 15-25) Mucous Membrane Color: pink Capillary Refill Time: <2sec Exam: Fluid wave in abdomen. Fever with temp 104.5. No neurologic or ophthalmic abnormalities found. Radiographs from 11/14/25 reveal likely free fluid in the abdomen. Labs: Chemistry panel revealed low albumin at 2.1, elevated amylase at 1201, and low sodium at 138. CBC results reveal a leukocytosis at 22.48 resulting from a mature neutrophilia at 19.588 and mild monocytosis at 1.124. The repeat fPLI is normal. The fSAA is 95.2. The albumin : globulin was 0.46 OF THE BLOOD PLASMA. Ultrasound revealed abundant free fluid. Ultrasound guided aspiration of the fluid performed withdrawing 4ml clear fluid. . Cytology revealed PCV of 0 with mostly non-degenerate neutrophils 46%, monocytes 29%, and lymphocytes 25% with mild blood. No platelets observed. Fluid TS 4.8 mg/dl; sp gr 1.032. The albumin : globulin 0.69 OF THE ABDOMINAL FLUID. Abdominal ultrasound submitted for evaluation. Cytology submitted for specialist., and abdominal fluid bacterial culture and susceptibility testing submitted. GS-441524 was ordered for treatment for Feline Infectious Peritonitis.

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 normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 4.2 cm. The right kidney measured 4.08 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 0.49 cm.

Spleen

The **spleen** was mildly enlarged and uniform measuring 0.95 cm.



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Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. There was no evidence of passive congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

A minor amount of non-shadowing, non-obstructive ingesta was noted in the **stomach**. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. The mesenteric lymph nodes were slightly enlarged measuring up to 1.0 cm each.

Pancreas

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 large amount of mildly echogenic free fluid was noted in the abdomen.

ULTRASONOGRAPHIC FINDINGS

- Free fluid.
- Slightly enlarged mesenteric lymph nodes.
- Slight splenic enlargement.
- Otherwise, unremarkable organs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a strong concern for FIP. An abdominocentesis and PCR for FIP is indicated. Cytospin of the abdominal fluid and immediate slide preparation is recommended to assess for granulomatous disease. Carcinomatosis and lymphomatosis are also potentials.



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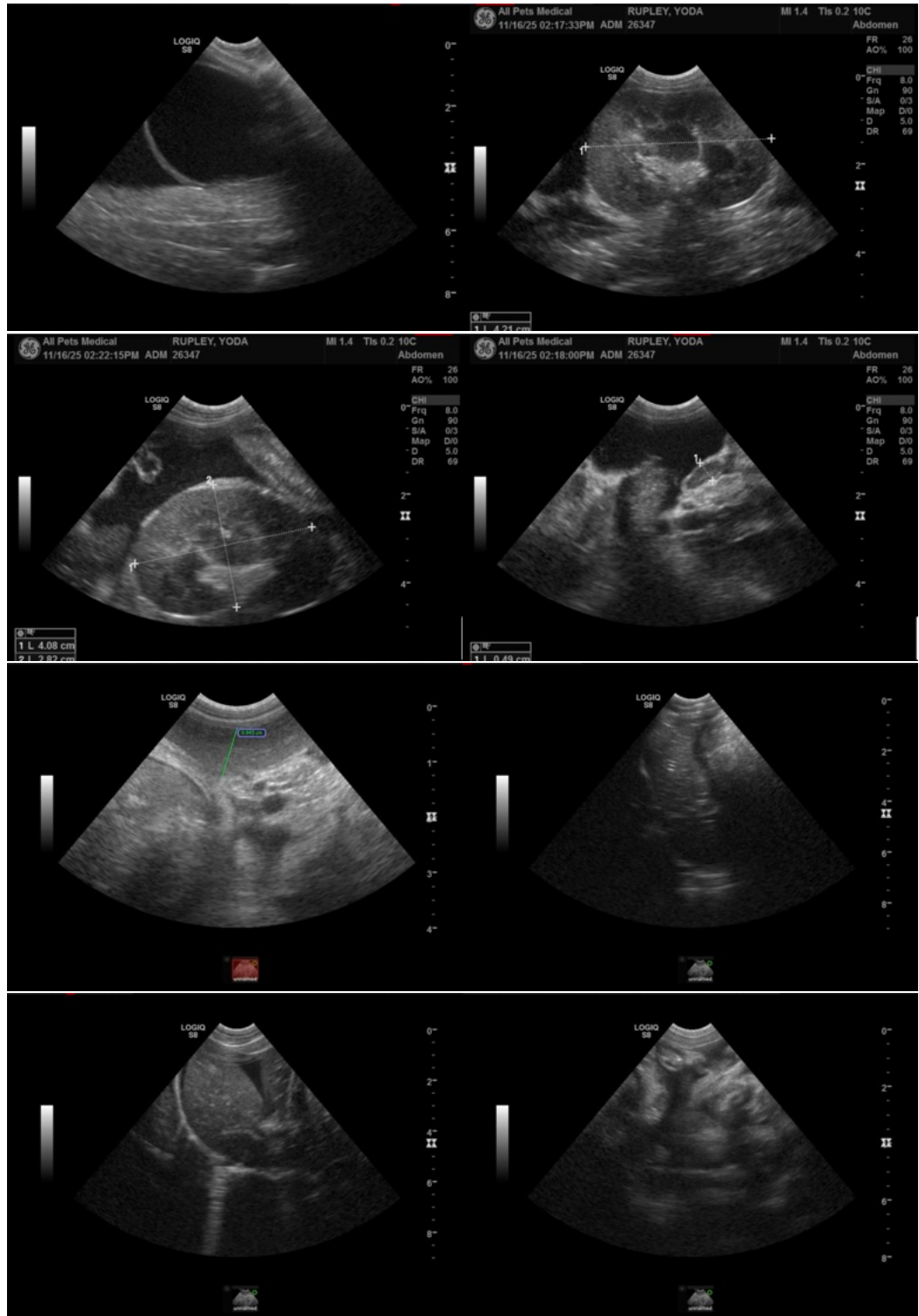
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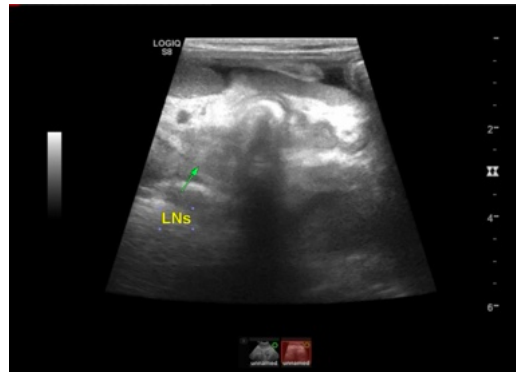
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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