



**DATE PRESENTING CLINICAL SIGNS**

11/26/25

**Patient History:** Hypercalcemia, elevated ALT noted on preanesthetic labwork. No clinical signs reported

**PATIENT**

**Current Medications:** REVOLUTION PLUS FELINE 11.1-22LBS SINGLE DOSE

**Labwork Results:** Labwork attached, reported as: ALT - 125, Ca - 11.6

**Date of Previous IntraPet Ultrasound:** No previous.

**Sedation:** Not required to complete full diagnostic ultrasound.

**Stat Report:** Not requested.

**Imaging Performed by:** Stephanie Warga RDCS, RVT.

Sebastian Wenger

**SPECIES**

Feline

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Domestic Shorthair

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.

**SEX**

Neutered male

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. Slight pinpoint mineralization was noted. The right kidney measured 4.02 cm. The left kidney measured 4.04 cm.

**AGE**

10/11/15

**WEIGHT**

14.44 lbs

**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 right adrenal gland measured 0.39 cm. The left adrenal gland measured 0.39 cm.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**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.

**HOSPITAL NAME**

Everhart VH

**REFERRING VET**

Dr. Hess

**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. 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.

**INVOICE**

69170

### ***Gastrointestinal***

The **gastrointestinal** presentation revealed normal gastric mucosa. The distal small intestine revealed muscularis thickening. The wall thickness measured up to 0.35 cm. The mesenteric lymph node was reactive and measured 1.5 x 0.43 cm.

### ***Pancreas***

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct dilation was noted.

### ***Thyroid***

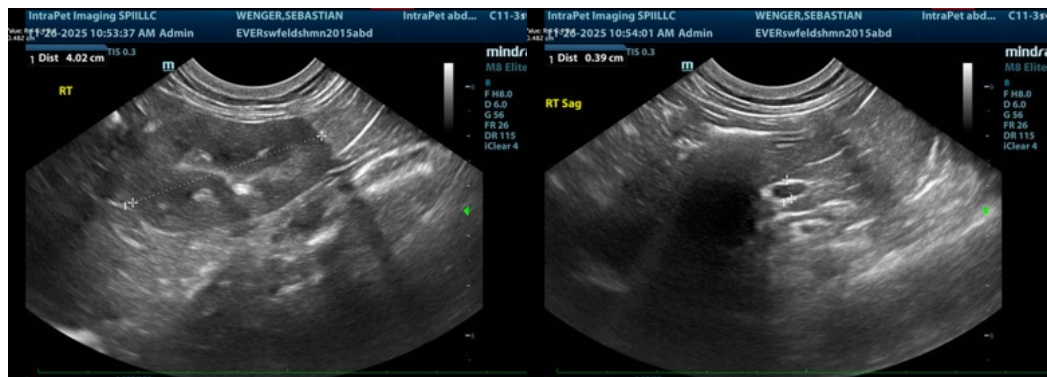
The thyroid lobes were imaged in this patient. Normal parathyroids were present and measured up to 0.11 cm on the left. The left thyroid lobe measured 2.2 x 0.4 cm. The left visible parathyroid appeared normal. The right thyroid and parathyroids were normal with uniform parenchyma and no evidence of masses. The trachea, esophagus and salivary glands were all normal.

## **ULTRASONOGRAPHIC FINDINGS**

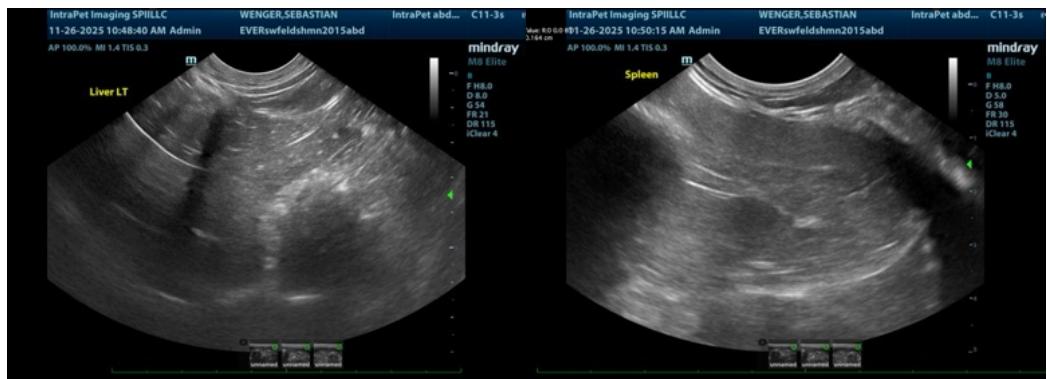
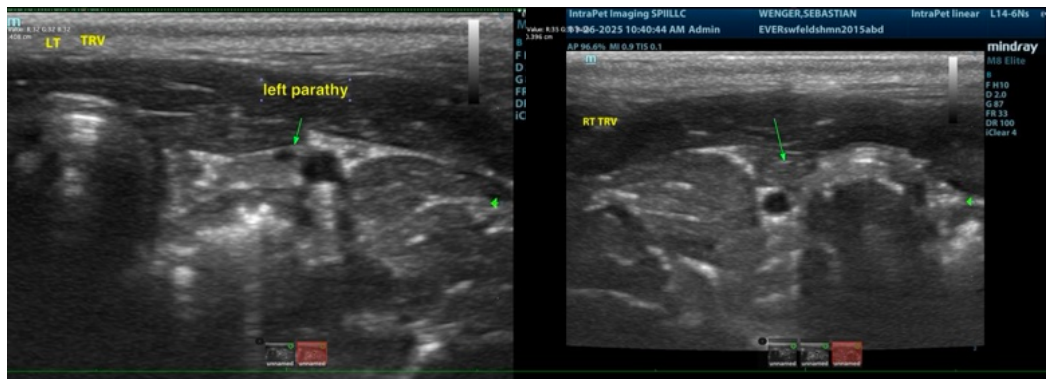
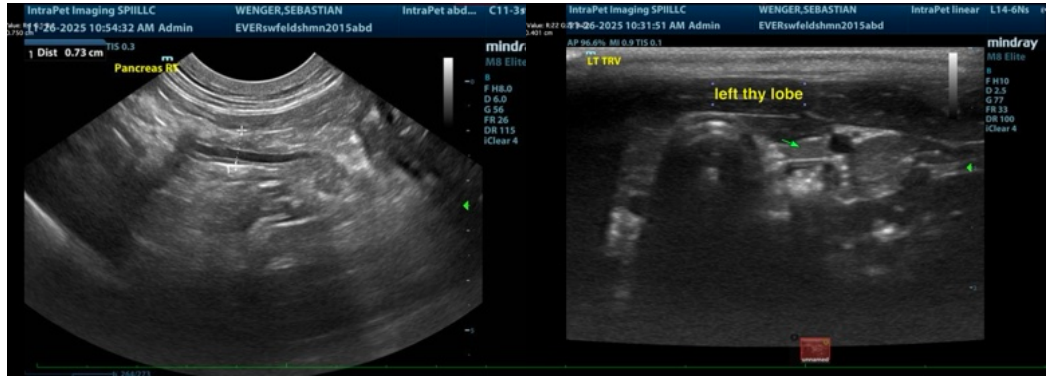
Normal thyroid and parathyroid with slightly prominent left medial parathyroid.  
Normal abdomen with minor renal mineralization, likely idiopathic feline hypercalcemia.  
Minor distal small intestinal muscularis thickening without loss of mural detail.

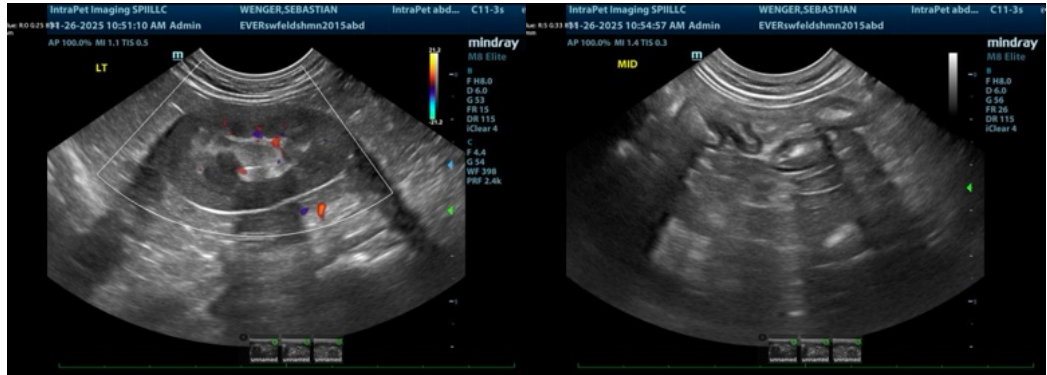
## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Idiopathic feline hypercalcemia is suspected as there was no evidence of structural disease directly related to the hypercalcemia other than very minor mineralization in the kidneys. I cannot rule out an emerging neoplastic state however, no direct neoplastic state associated with hypercalcemia is present.









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, Cert. IVUSS, CEO of SonoPath.com  
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