



## PATIENT

Molly Anstett

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

10 years

## WEIGHT

12.44 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Dr. Jenni Tudini  
MRCVS, SDEP Cert

## HOSPITAL NAME

East Aurora VH

## REFERRING VET

Dr. Huckabone

## INVOICE

69603

## DATE

12/11/25

## PRESENTING CLINICAL SIGNS

History: Patient scheduled for an abdominal ultrasound as there have been ongoing issues with reduced appetite and straining to defecate and owner has concerns she is chronically constipated. She is receiving 1/2 tsp Miralax BID. Patient has also had some chronic vomiting and since starting the miralax she has vomited up 3-4 hairballs. O wondering if this could be part of the issue. Owner believes that patient hasn't defecated since Monday (4 days ago). She is eating well but has lost a little weight. DVM doesn't share the concerns of constipation and it may be tenesmus that is being misinterpreted by owner.

Abnormal PE/Chem/CBC/UA Results: - Exam: unremarkable, patient voided soft formed stool at initiation of scan following sedation. Not consistent with constipation - CBC: unremarkable - Biochem: SDMA 16 (0-14) - BNP: WNL - T4: WNL - Texas A&M GI Panel: Pending

## 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 right kidney measured 4.1 cm. The left kidney measured 3.7 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 0.48 cm. The right adrenal gland measured 0.38 cm.

### Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner. The spleen was mildly enlarged and measured 1.25 cm. This would be normal if the patient was sedated at the time of the sonogram.



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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. 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

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. The visible descending colon was unremarkable and visualized to the level of the proximal pelvic urethra. Soft stool was noted in the colon. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

## 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

The iliac lymph nodes were unremarkable.

## ULTRASONOGRAPHIC FINDINGS

Mild splenic enlargement, potential sedation induced.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen is indicated given the patient's history, yet there was no evidence of significant disease otherwise. There was no evidence of hairball accumulation at this time.



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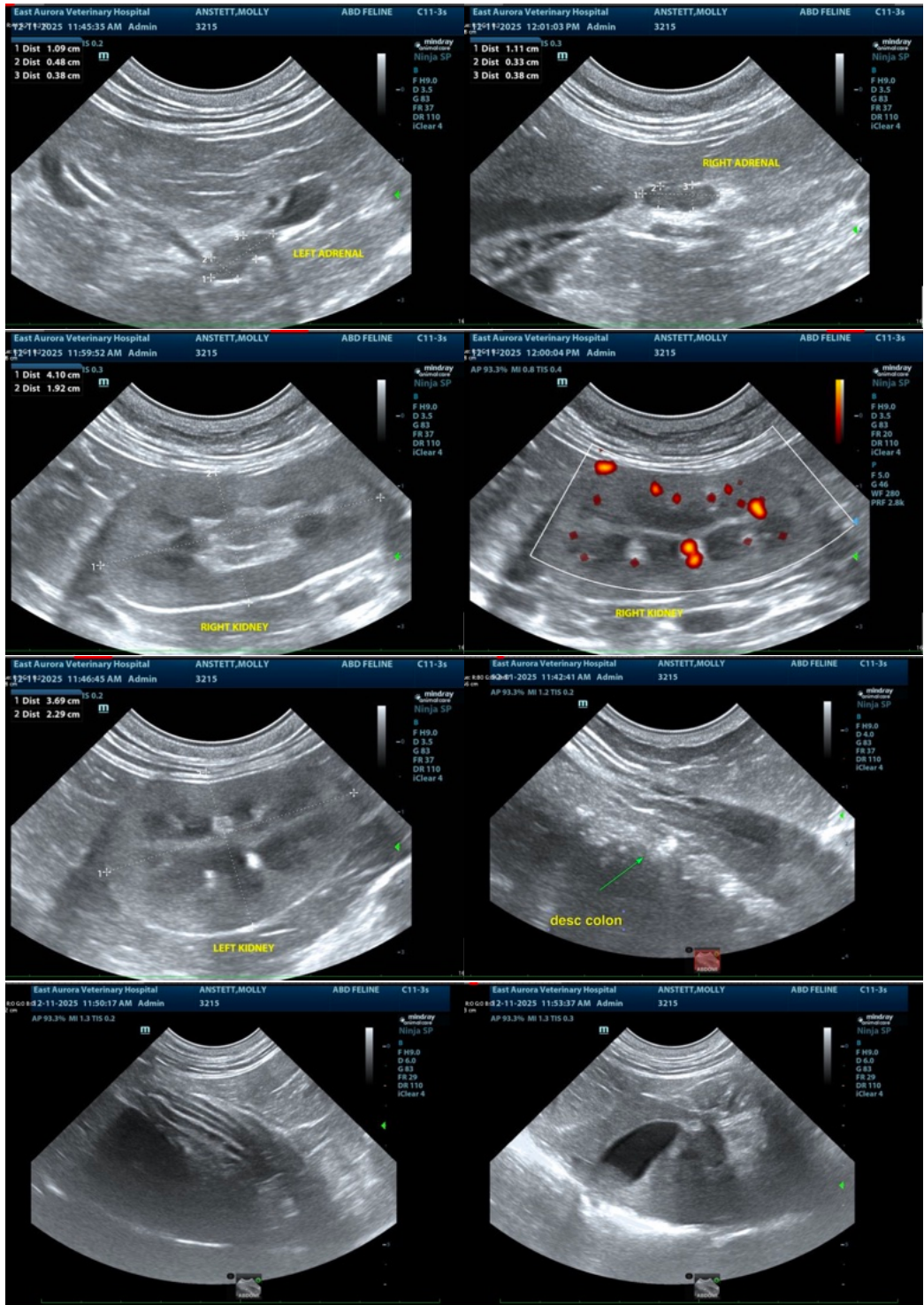
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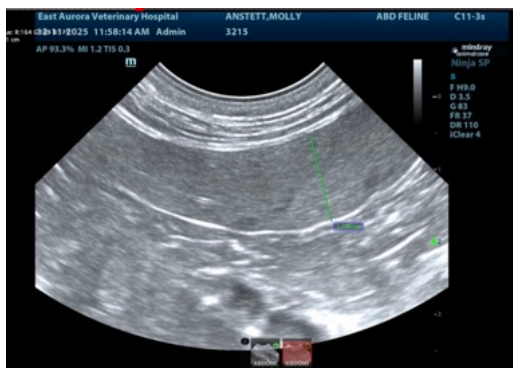
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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