



PATIENT

Wally Kaplan

SPECIES

Feline

BREED

Persian

SEX

Neutered male

AGE

17 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kyoung Han

HOSPITAL NAME

Tenafly VC

REFERRING VET

Dr. Han

INVOICE

69473

DATE

12/19/25

PRESENTING CLINICAL SIGNS

History: Wally- 17 yr old neutered male cat. he has grade 3 heart murmur but no cardiac medication is recommended. he is a chronic constipation and was on rc gastrointestinal fiber diet, which worked for him pretty well. he is not interested in rc gastrointestinal diet any more. lost weight gradually 4 lbs for a year. loss of appetite for the past couple of month on and off. blood work result is normal.

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. A slight, hypoechoic nodule was noted in the caudal pole of the left kidney measuring 0.54 cm. The left kidney measured 4.2 cm and the right kidney measured 3.8 cm.

Adrenal Glands

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted. The left adrenal gland measured 0.57 cm. The right adrenal gland measured 0.6 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 measured 1.2 cm.

Liver



PATIENT

Wally Kaplan

SPECIES

Feline

BREED

Persian

SEX

Neutered male

AGE

17 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kyoung Han

HOSPITAL NAME

Tenafly VC

REFERRING VET

Dr. Han

INVOICE

69473

DATE

12/19/25

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder wall was slightly echogenic. The cystic duct was slightly tortuous, yet the common bile duct was normal tapering into the small intestine.

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

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 and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

Slight renal nodule and mildly enlarged spleen.

Non-specific chronic GI changes.

Otherwise, geriatric abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend splenic FNA in this patient to assess for hyperplasia versus emerging round cell neoplasia.

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.



PATIENT

Wally Kaplan

SPECIES

Feline

BREED

Persian

SEX

Neutered male

AGE

17 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kyoung Han

HOSPITAL NAME

Tenafly VC

REFERRING VET

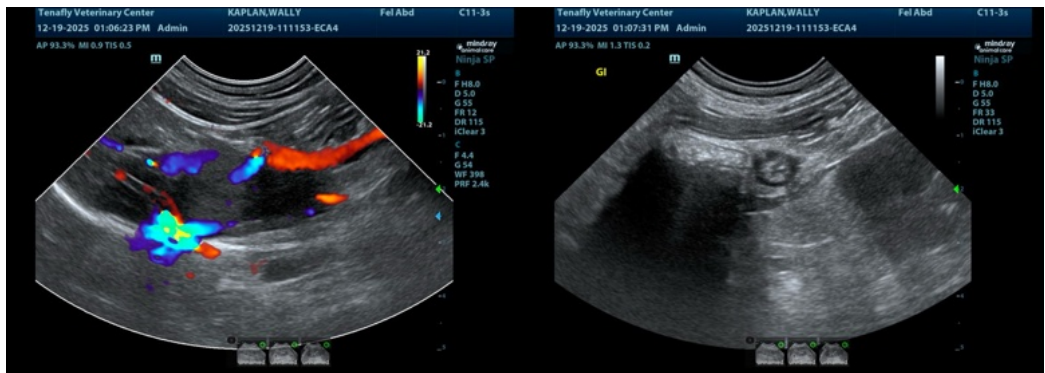
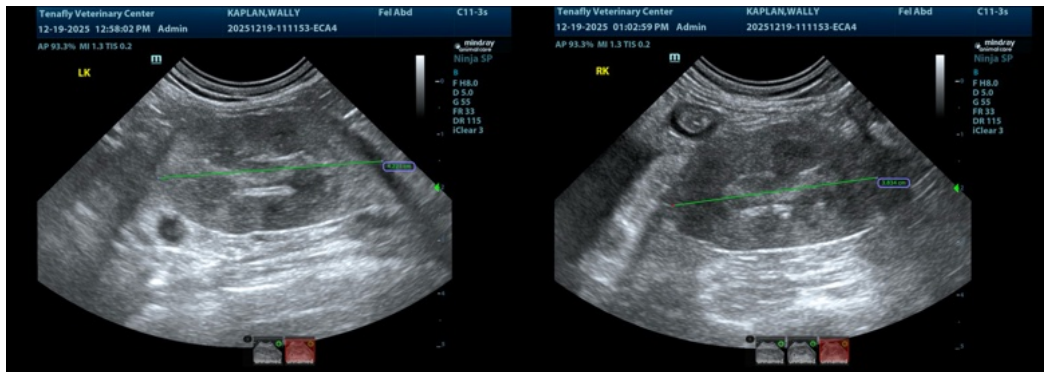
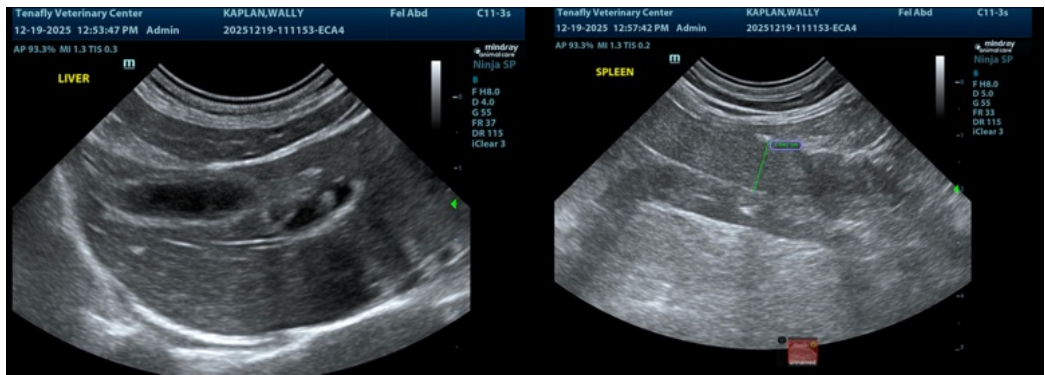
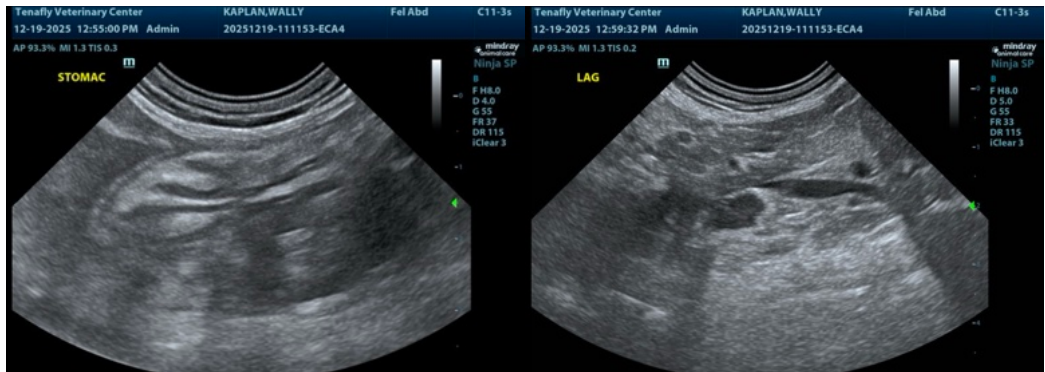
Dr. Han

INVOICE

69473

DATE

12/19/25





PATIENT

Wally Kaplan

SPECIES

Feline

BREED

Persian

SEX

Neutered male

AGE

17 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kyoung Han

HOSPITAL NAME

Tenafly VC

REFERRING VET

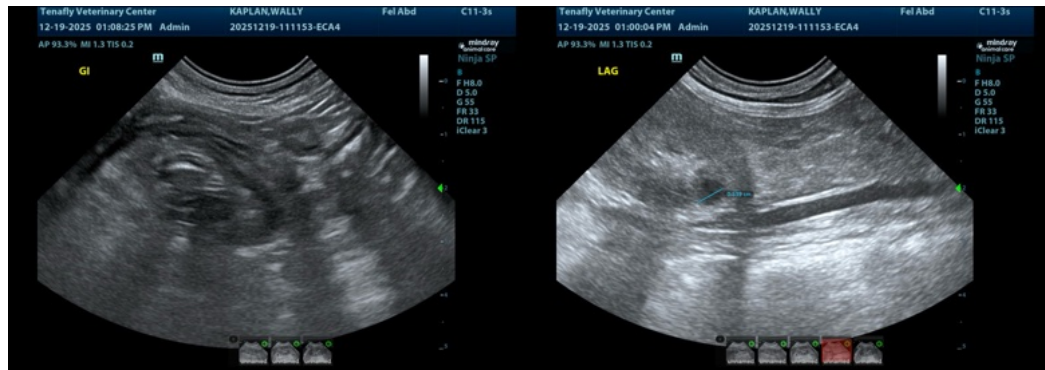
Dr. Han

INVOICE

69473

DATE

12/19/25



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 of SonoPath.com

info@SonoPath.com