



PATIENT

Dehertog Luke Walker

SPECIES

Feline

BREED

Siamese x

SEX

Neutered Male

AGE

9.1 Years

WEIGHT

11.9 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ginny Dodd, DVM,D,
 ABVP (CFP)

HOSPITAL NAME

Ironton Animal
 Hospital

REFERRING VET

Dr. Tony Levine

INVOICE

72729

DATE

12/23/25

PRESENTING CLINICAL SIGNS

Exam several weeks ago and suspected an abdominal mass cranial to bladder. Rechecked today and still suspect a mass.

Abnormal PE/Chem/CBC/UA Results: PE: no abdominal pain, BCS 5/9, some stool palpated in region of dorsal mid abdomen.

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 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. Left kidney measured 3.5 cm. Right kidney measured 4.0 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 right adrenal gland measured 0.28 cm. The left adrenal gland measured 0.40 cm.

Spleen

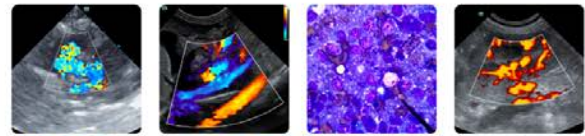
The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** 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

The **stomach** revealed progressively shadowing luminal material, consistent with likely hairball accumulation, likely medically manageable. Transit of chyme into the small intestine appeared to be normal. No evidence of structural GI disease. Stool consistency in the colon was normal.



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Pancreas

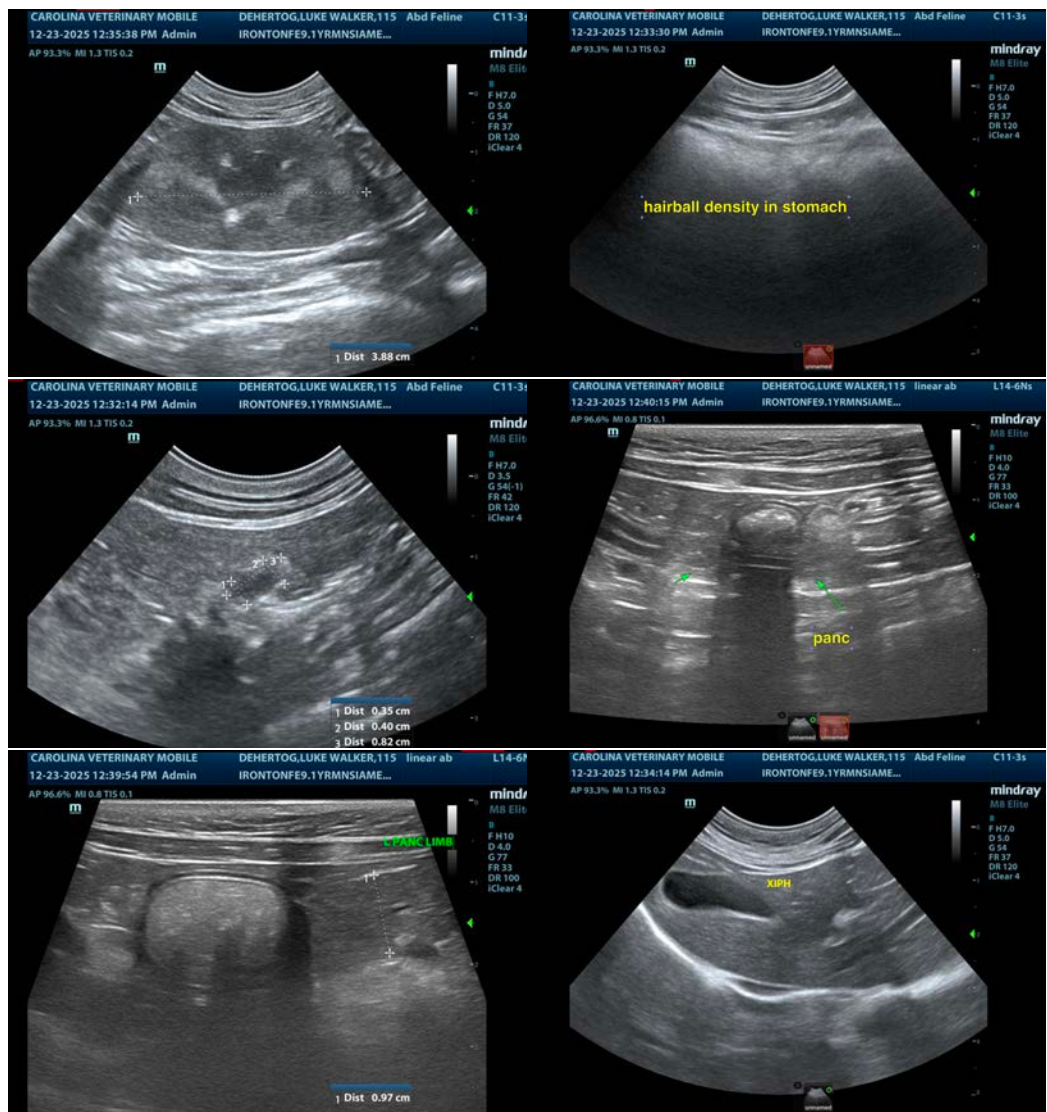
The left limb of the **pancreas** was prominent and hypoechoic, measuring 0.97 cm. No evidence of active inflammation.

ULTRASONOGRAPHIC FINDINGS

- Hairball density in the stomach with prominent pancreas.
- Prominent, hypoechoic left pancreatic limb.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of neoplasia in the abdomen. Hairball management recommended.





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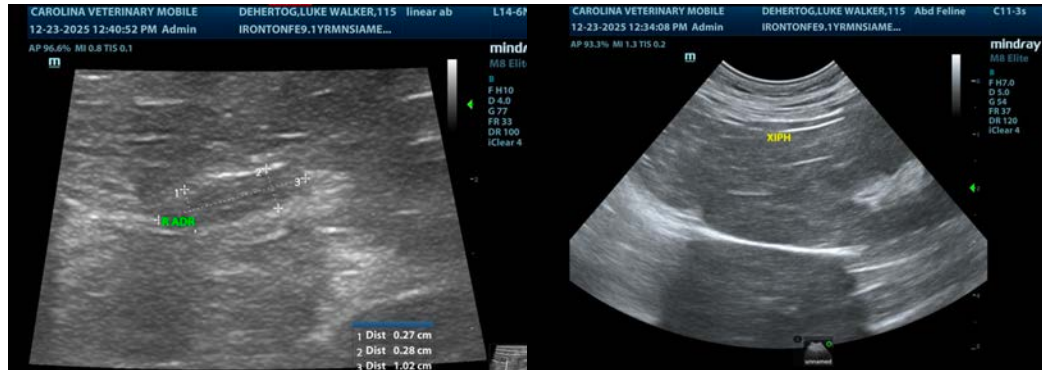
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,
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