



**PATIENT**

Sebastian Maximiano

**SPECIES**

Feline

**BREED**

DSH

**SEX**

Neutered Male

**AGE**

6 Years 10 Months

**WEIGHT**

9.28 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Vincent Ravancho, CVT

**HOSPITAL NAME**

Ridge Road Animal  
Hospital

**REFERRING VET**

Dr. Pathak

**INVOICE**

72342

**DATE**

12/4/25

**PRESENTING CLINICAL SIGNS**

Anorexia/Vomiting/Wt. Loss. Sick for over a month. Clinical findings: dehydration / painful cranial abdomen Current meds: Cerenia

Abnormal PE/Chem/CBC/UA Results: TP - 6.2 g/dL

**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 **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 3.09 cm. Right kidney measured 3.38 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. Right measured 0.26 cm. Left measured 0.31 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** presented concentric mural thickening (1.12 cm) with loss of structural detail and an overt pyloric mass, strongly consistent with infiltrative disease/round cell neoplasia. The pyloric mass in its entirety measured 3.17 cm. The small intestine and colon were unremarkable.



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**Pancreas**

Mild secondary hyperechoic **pancreatic** inflammatory changes noted.

**ULTRASONOGRAPHIC FINDINGS**

- Pyloric mass – strong concern for gastric lymphoma.
- Secondary pancreatic inflammation.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Sedation and ultrasound guided FNA of the pyloric mass indicated. This is not resectable.





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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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