



PATIENT

Sug Klinger

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 Years

WEIGHT

4.07 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr. Kiebler

INVOICE

12553

DATE

12/04/25

PRESENTING CLINICAL SIGNS

Seen at rDVM about 2 weeks ago for weight loss, hyporexia, lethargy. rDVM did blood work and urinalysis. vomited 1 time on 11/26, 2 times today. One month ago weighed 14 pounds, owner unsure weight from 2 weeks ago. On home scale he weighed 9.2 pounds. rDVM rx amlodipine. hospitalized at Shores 11/28-11/30. Here today for recheck blood work. Since discharge on 11/30 had diarrhea 1 time, continued not eating well, eating very small amounts of can food and tuna. owner is unsure of any other bowel movements. Anorexia today. History of wt. loss, azotemia, pancreatitis, dehydration, constipation. Medications: buprenorphine, emeprev, amoxi/clav, mirataz transdermal; amlodipine was discontinued. *Concern for azotemia, pancreatitis, GI disease, IBD, other

PE: subtle pain 1/4; BCS 3/9; hydration 8-10% retracted globes within orbits; 1-2/6 murmur; intestines palpate thickened; muscle atrophy *11/11 rDVM U/A: pH 7.0, US 1.014, Inactive sediment CBC: WNL CHEM17/LYTES: BUN 49, ALK < 10, TBIL 2.2 SDMA: 14 TT4: WNL *11/28: CBC WNL CHEM12: BUN 58 CREA 2.4 EPOC: CI 131, BUN 44, CREA 2.81 T4: WNL *Rads: thickened stomach lining. small irregular kidneys; small irregular liver; decrease detail in cranial abdomen; large amount of gas in very distended colon; several pieces of dense stool in distal colon (size of tootsie rolls) *11/29: EPOC: BUN 38, CREA 2.71 fPL: 17.4 (Consistent with pancreatitis) *11/30: EPOC: BUN 29 (WNL), CREA 2.59, LAC 3.25 *12/1: EPOC: Na 147, AG 7, BUN 34, CREA 2.56 FPL 20.4 (up from 17.4) 12/1 BP: 151/114 Map 129

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra (to a depth of 1.0 cm) presented normal thicknesses and normal tone. The ureters were not visible which is normal. A minor amount of suspended debris was noted. No evidence of inflammatory or neoplastic changes were 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 mild to moderate 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.0 cm in length. The right kidney measured 4.0 cm in length.

Adrenal Glands

Both **adrenal glands** were not visualized.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed. The spleen measured 0.64 cm width.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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 presented some dependent debris with essentially normal



PATIENT

Sug Klinger

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 Years

WEIGHT

4.07 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr. Kiebler

INVOICE

12553

DATE

12/04/25

contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

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. The stomach lumen was empty.

Pancreas

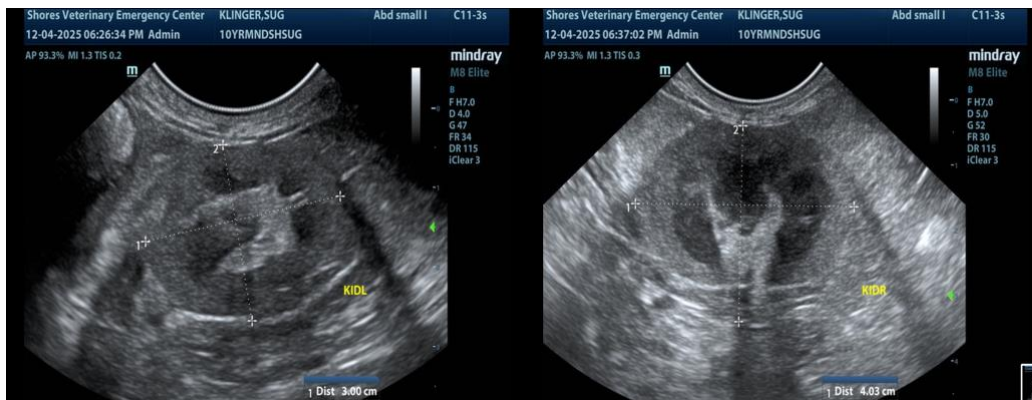
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Age-related abdominal changes.
- Volume contracted spleen.
- Mild gastroenteritis pattern.
- Structurally unremarkable abdomen otherwise.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend reassessing the bilirubin elevations that may be artifactual. Structurally, the liver is largely unremarkable. The kidneys appear to have mild degenerative changes yet largely age-related and do not appear subjectively end stage. Pre-renal insult is suspected. 72-hour IV fluid protocol is indicated. No structural evidence of 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

Sug Klinger

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 Years

WEIGHT

4.07 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

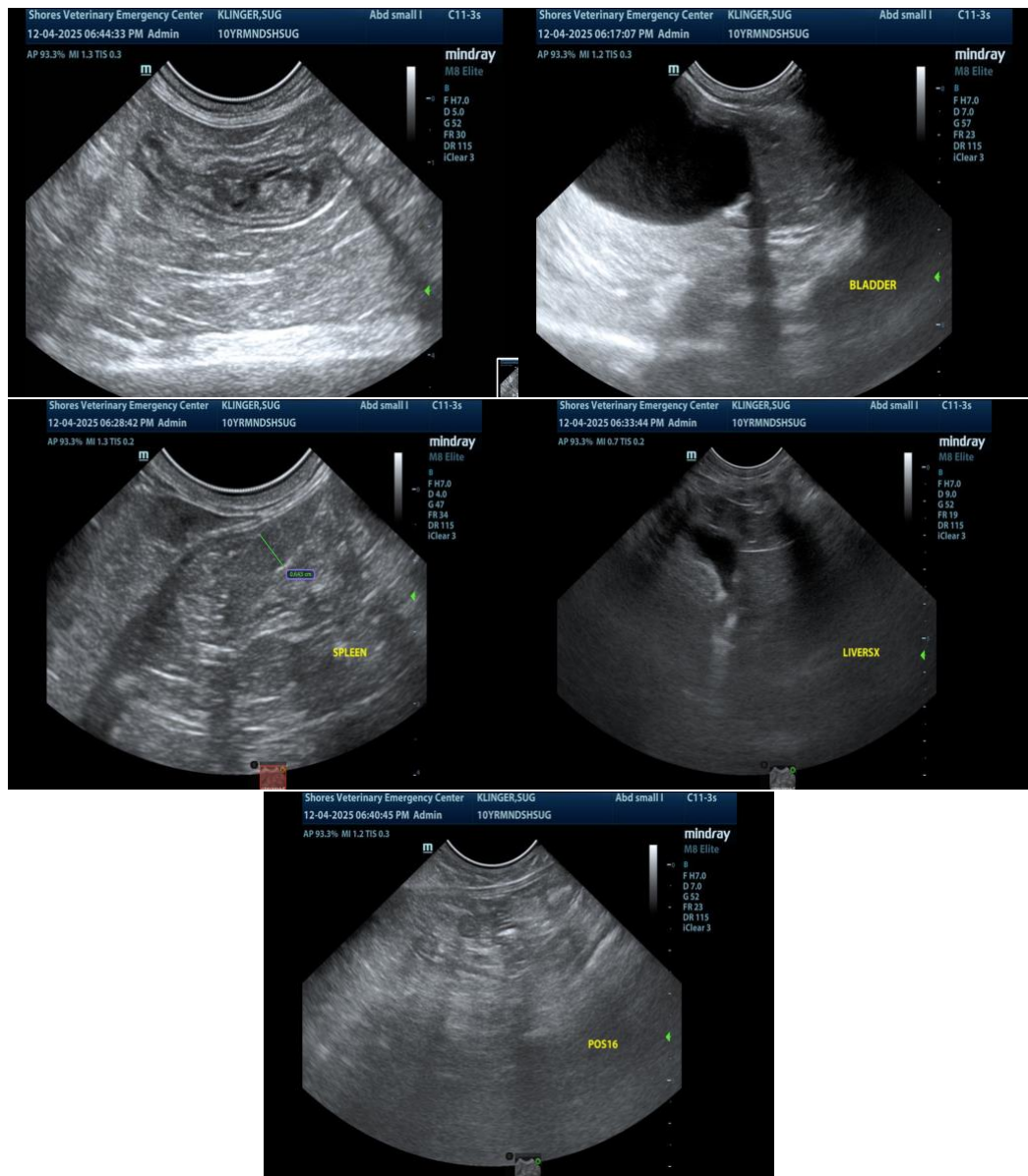
Dr. Kiebler

INVOICE

12553

DATE

12/04/25



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, Owner, Founder -- SonoPath.com

info@SonoPath.com



PATIENT

Sug Klinger

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

10 Years

WEIGHT

4.07 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr. Kiebler

INVOICE

12553

DATE

12/04/25