



PATIENT

Finick Roesmer

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Neutered male

AGE

6 years

WEIGHT

12 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Trudeau

HOSPITAL NAME

Vetcetera AH

REFERRING VET

Dr. Trudeau

INVOICE

71508

DATE

2/11/26

PRESENTING CLINICAL SIGNS

- O reports they can feel lumps on his belly and has hyporexia and lethargy last few days
- Receiving Clavaseptin, Zentoni, and ursodiol as prescribed 2 days ago
- when clipping the ventral abdomen for the ultrasound - bruising was noted across the mid abdomen and the cat was very painful - making it more difficult to get images as he was not sedated - suspect bruised/inflamed fatty tissue causing the palpable "lumps" the owner could feel - asked the owner while here if there was any known trauma - none that they are aware of at this time (indoor cat)
- CBC - very mild thrombocytopenia 124 (125-618); otherwise NSF Chem: mild increase ALT 105 (20-100) marked hyperbilirubinemia 32 (2-10) , mild azotemia BUN 16.3 (3.6-10.7); Creat 193 (27-186); otherwise NSF

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

26 still images and 6 videos were submitted. I strongly recommend video based protocol such as SDEP to ensure that lesions are not omitted.

BASED ON THE IMAGE SET PROVIDED:

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 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. The right kidney measured 4.08 cm. The left kidney measured 4.7 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.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. Multiple hyperechoic lipid plaques were noted. 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 was noted.



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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

A minor amount of shadowing, non-obstructive ingesta was noted in the **stomach**. This may represent hairball accumulation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. 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.

ULTRASONOGRAPHIC FINDINGS

Full stomach. Potential hairball accumulation.

Otherwise, unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of significant disease. I recommend reassessment of the bilirubin elevation as it cannot be justified from a sonographic standpoint. Urinalysis is warranted to assess isosthenuria as to prerenal azotemia versus azotemia. However, the abdomen is largely unremarkable based on the image set provided.



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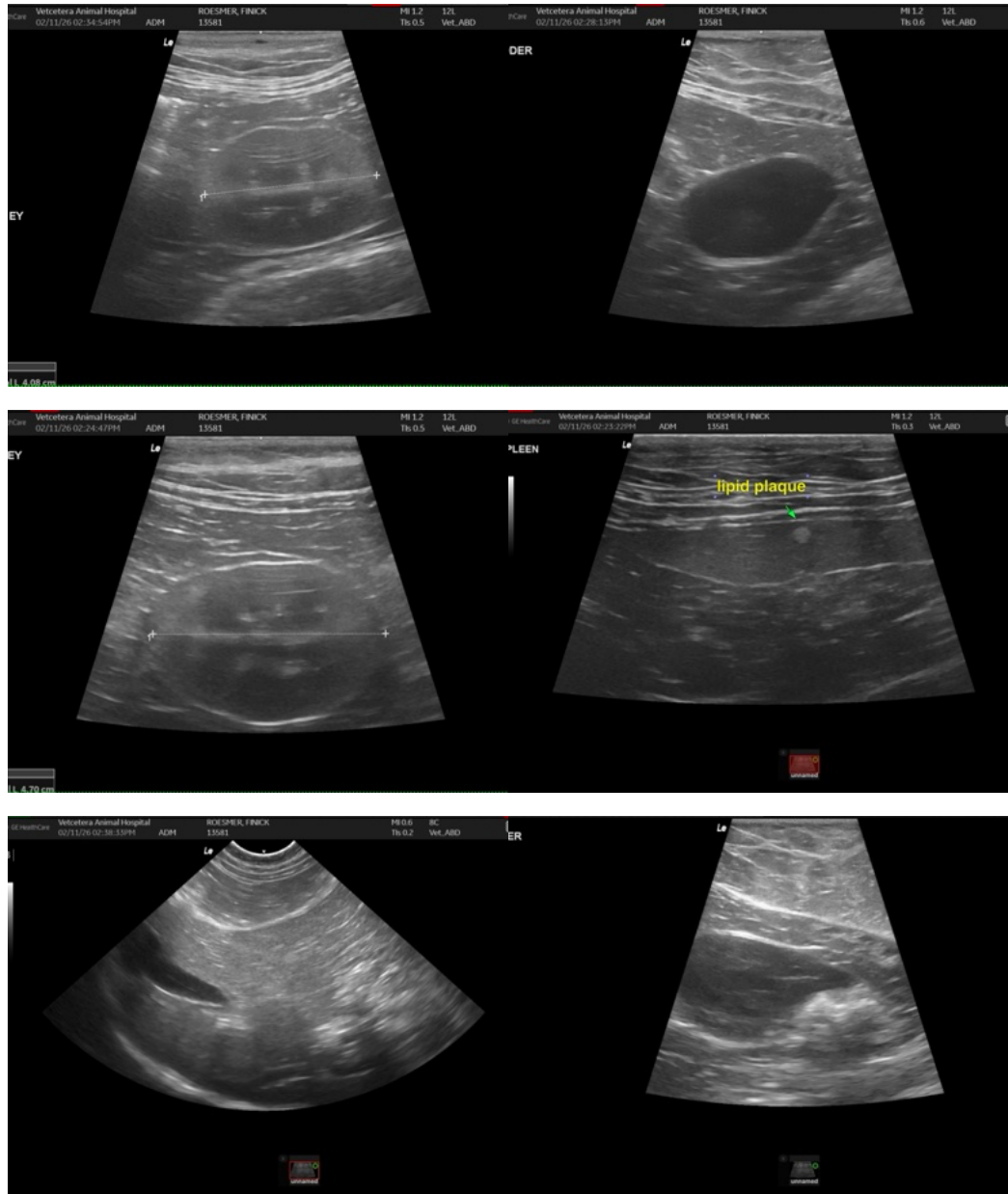
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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