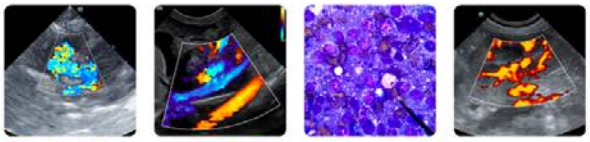

PATIENT

Luke Geraghty

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

4.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Honsted

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Honsted

INVOICE

72932

DATE

2/12/26

PRESENTING CLINICAL SIGNS

Patient presented for inappropriate urination which is very unusual for him and being generally uncomfortable. Owner mentioned that last week there was some blood in patients stool but has resolved now.

Patient recently had a subtotal colectomy. There has been persistent splenomegaly on radiographs please compare spleen and size of spleen to most recent ultrasound (performed on 01/08/2026).

Abnormal PE/Chem/CBC/UA Results: Please see attached diagnostics results

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 **right kidney** presented normal size and contour with mild increased cortical echogenicity, expected for this age patient. Right kidney measured 4.5 cm.

The **left kidney** was persistently dystrophic, measuring 2.1 cm, with mineralizations noted.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

Spleen

The **spleen** has decreased in size to 1.2 cm from 1.4 cm on prior sonogram.

Liver

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 presented some dependent debris with essentially normal 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. Similar presentation as on prior sonogram.

Gastrointestinal

The **stomach** was empty. Variable small intestinal thickening noted without loss of mural detail. Muscularis hypertrophy noted.

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

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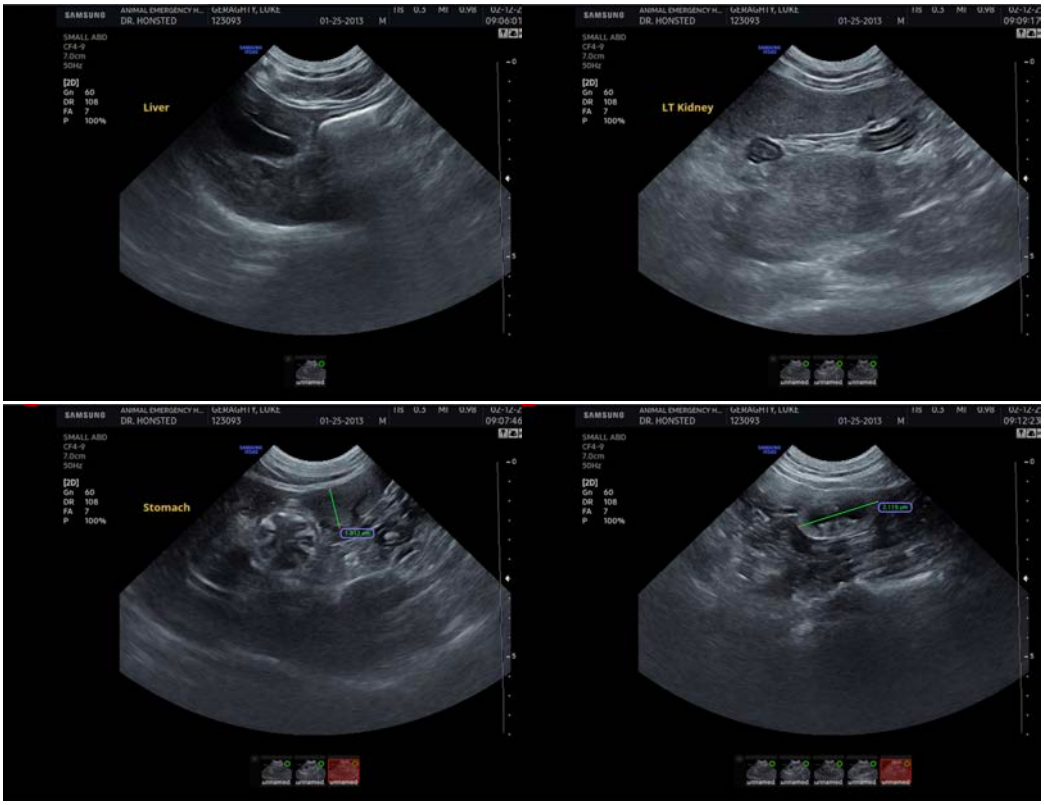
upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

- Improved spleen.
- Persistently thickened intestine.
- Dystrophic left kidney, age related right kidney changes.
- Age related hepatic and pancreatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient may be passing calculi periodically even though no calculi were present at the time of the sonogram. There are no complications noted from the subtotal colectomy.



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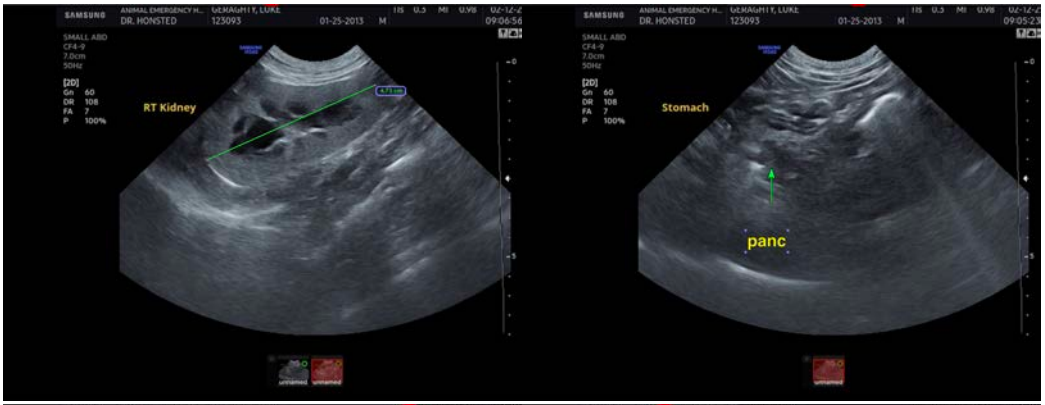

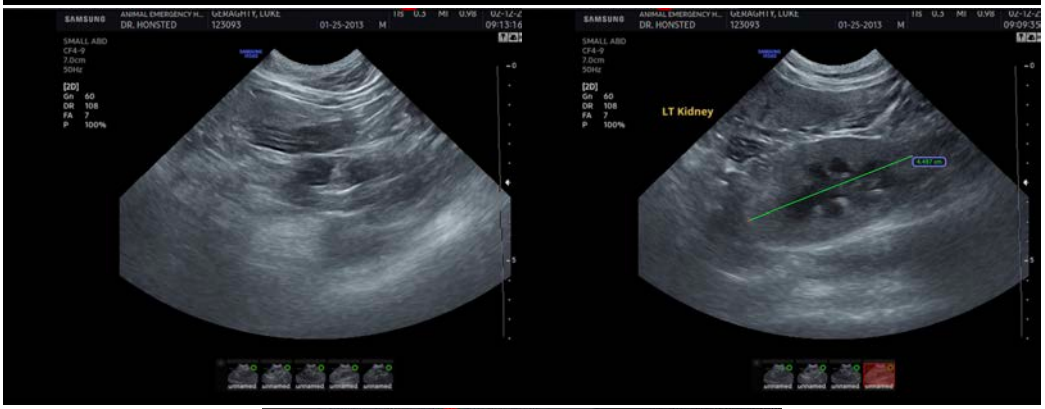

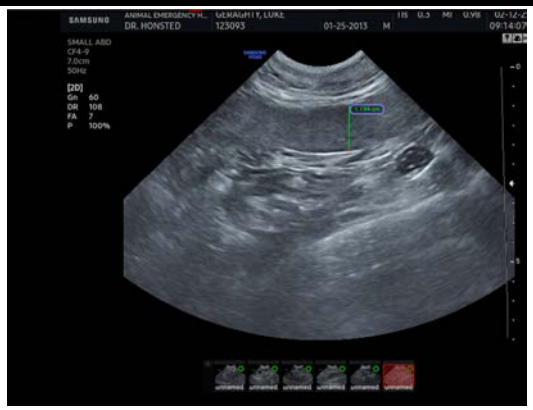

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com
info@SonoPath.com