



PATIENT

Chloe McKeown

SPECIES

Feline

BREED

Tortie Domestic
Longhair

SEX

Spayed female

AGE

15 years

WEIGHT

7.3 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Wasserman

HOSPITAL NAME

Morningside AH

REFERRING VET

Dr. Wasserman

INVOICE

71949

DATE

2/25/26

PRESENTING CLINICAL SIGNS

- Sedated for Sonogram today with 0.05ml equal volume of the following drugs. Dexmedetomidine 0.5mg/ml, butorphanol 10mg/ml, ketamine 100mg/ml. Adequate sedation for sonogram.
- Pertinent history. Family concerned with weight loss for Chloe and two other house mates. They are geriatric as well. Starting weight for Chloe approximately 8.8lbs in 8/2025. Now 7.3lbs. No vomiting, diarrhea or any clinical signs of disease. Recent dental performed. Clinical suspicion for competitive eating with two other felines in the house but report from family is that all felines are eating.
- Current Medications: 1/4 of a 5mg methimazole tablet PO BID
- Purpose of Sonogram, evaluate abdomen for causes of weight loss, IBD, assess for neoplastic criteria, consult on case.
- BCS 3-4/9 Thyroid Data: 2/17/26 TT4 3.0 mg/dL, 10/2025 TT4 2.9 mg/dL, 8/2025 4.2mg/dl and Free t4 by equilibrium >100pmol/L (BEFORE therapy initiated). Fecal to reference lab (float): No ova seen, sufficient sample sent CBC/chem/lytes and SDMA all WNL from 8/2025 until present.

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 was 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 age-related loss of curvilinear patterns regarding the capsule and C/M junction. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.22 cm with minor cortical infarcts. The right kidney measured 3.6 cm. Blood flow to the kidneys appeared to be adequate on power Doppler assessment.

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 left adrenal gland measured 0.39 cm. The right adrenal gland measured 0.3 cm.

Spleen

The **spleen** was uniformly enlarged with relatively uniform parenchyma without evidence of masses. The spleen was folded upon itself cranially. The capsule was mildly swollen. The spleen measured 1.24 cm. This may be owing to sedation.



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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.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. 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. 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 upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

Geriatric abdomen (renal, hepatic and pancreatic).

Enlarged spleen, may be owing to sedation.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of specific pathology.



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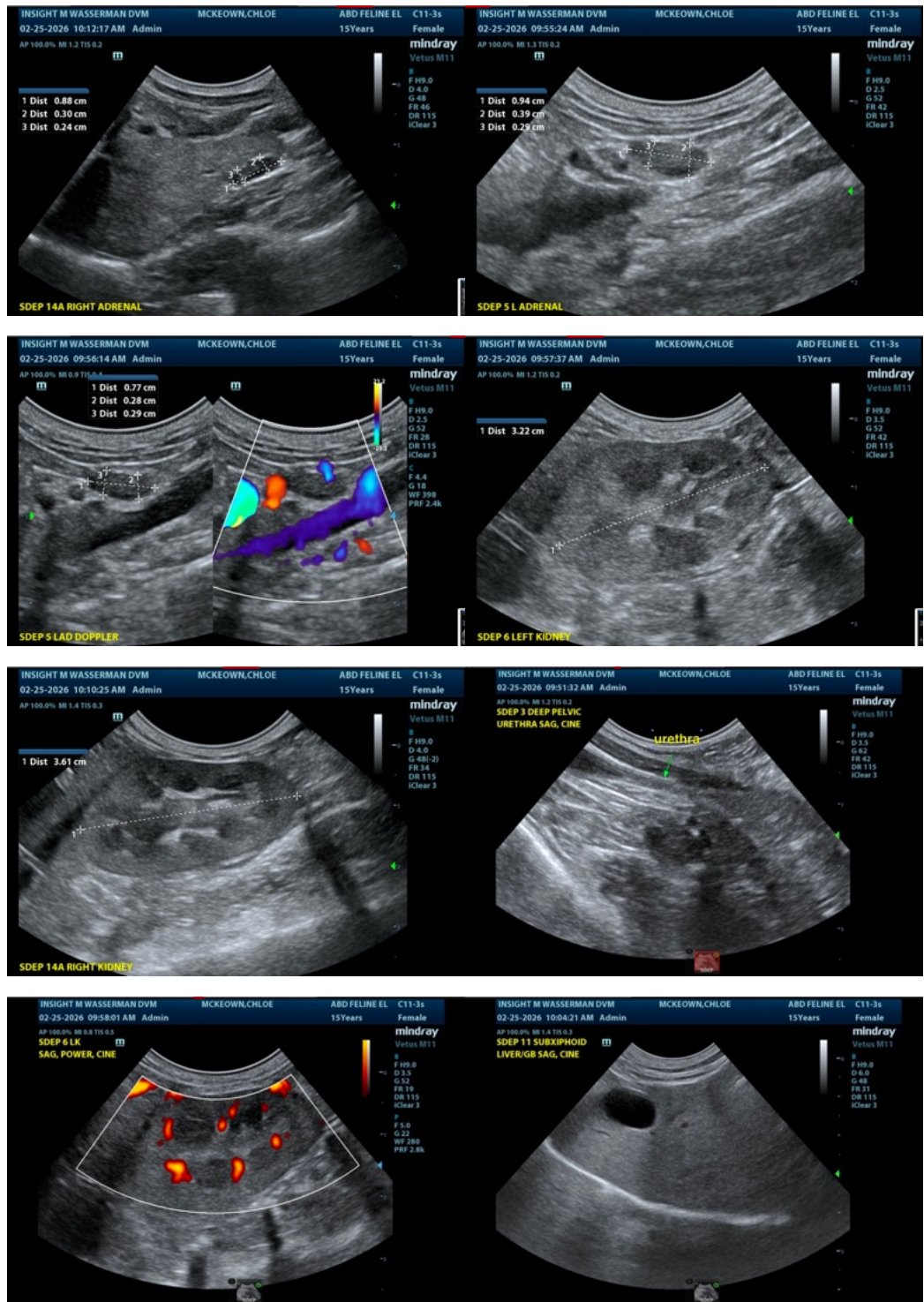
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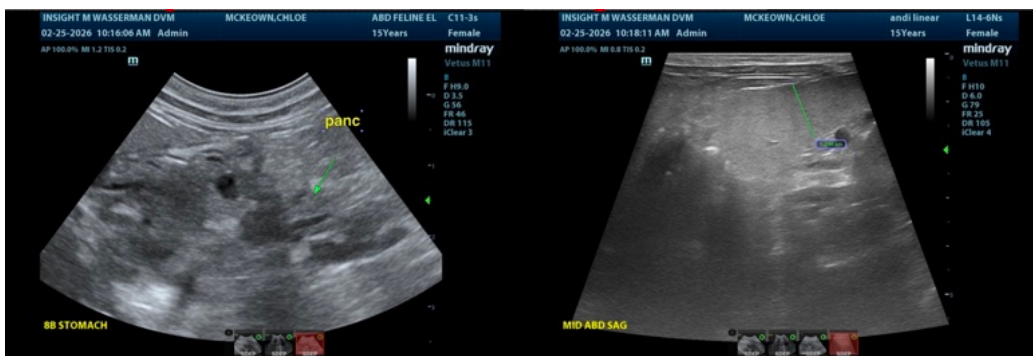
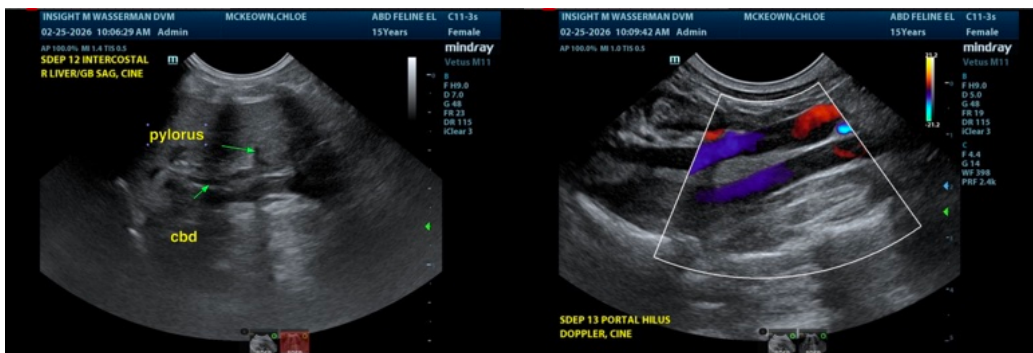
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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