



PATIENT

Joey Malone

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jeremiah Gabriel

HOSPITAL NAME

Central Jersey AH

REFERRING VET

Dr. Jeremiah Gabriel

INVOICE

35680

DATE

2/3/26

PRESENTING CLINICAL SIGNS

- fever 106 F
- anorexia
- lethargic
- abdominal fluid (removed 600 ml)
- Abnormal PE/Chem/CBC/UA Results: WBC 57.0 3.5-16.0 103/mL HIGH BUN 57 14-36 mg/dL HIGH CREATININE 1.0 0.6-2.4 mg/dL SDMA 12.5 <15.0 UG/dL BUN/CREAT RATIO 57 4-33 HIGH PHOSPHORUS 6.9 2.4-8.2 mg/dL GLUCOSE 140 64-170 mg/dL CALCIUM 8.9 8.2-10.8 mg/dL MAGNESIUM 4.0 1.5-2.5 mEq/L HIGH SODIUM 142 145-158 mEq/L LOW POTASSIUM 5.3 3.4-5.6 mEq/L NA/K RATIO 27 32-41 LOW T4 0.5 0.8-4.0 mg/dL LOW

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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The **kidneys** were mildly swollen with slightly thickened and heterogenous cortices. Minor medullary rim sign was noted. The left kidney measured 4.3 cm. The right kidney measured 4.3 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. The adrenal glands measured 0.4 cm each.

Spleen

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

Liver

The **liver** was swollen, irregular in contour, and heterogenous with multiple nodules noted throughout the liver. The gallbladder was largely collapsed and empty.

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



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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.

Free Abdomen

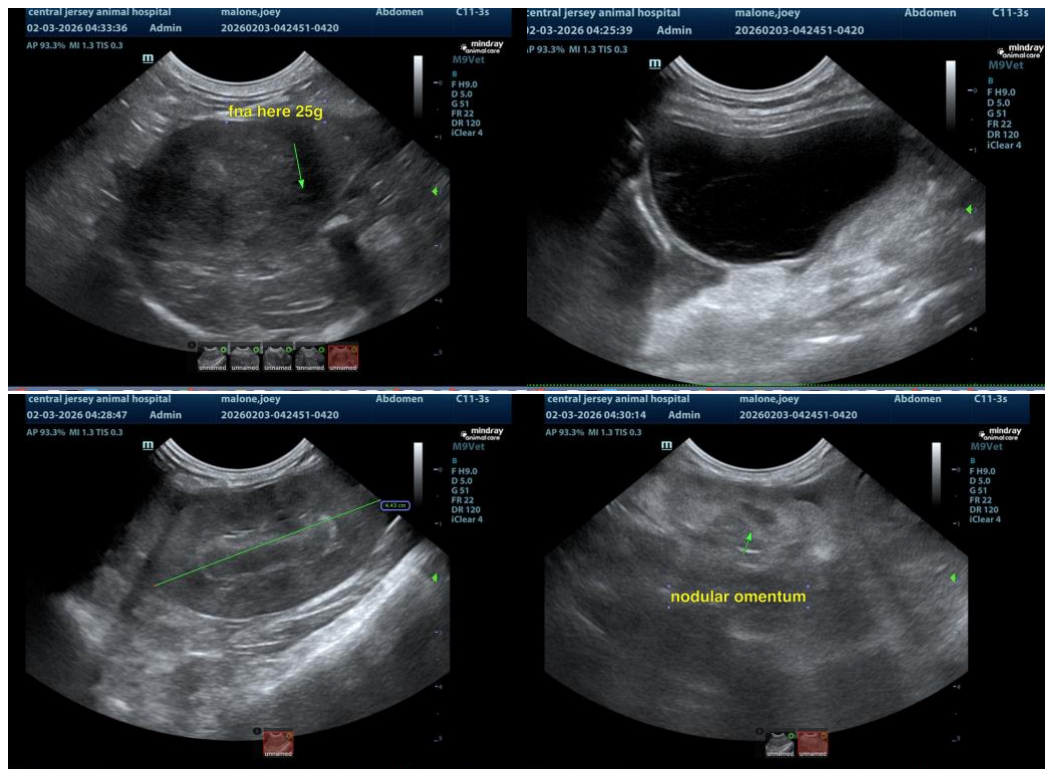
Nodular coalesced **omentum** was noted in the cranial abdomen with a large amount of free fluid.

ULTRASONOGRAPHIC FINDINGS

- Nodular omentum
- Nodular liver
- Free fluid
- Thickened renal cortices
- Volume contracted spleen
- Largely collapsed gallbladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Strong concern for lymphomatosis, carcinomatosis, or similar. Ultrasound guided abdominocentesis of the free fluid, as well as FNA of the liver nodules is recommended. Prognosis is very guarded.





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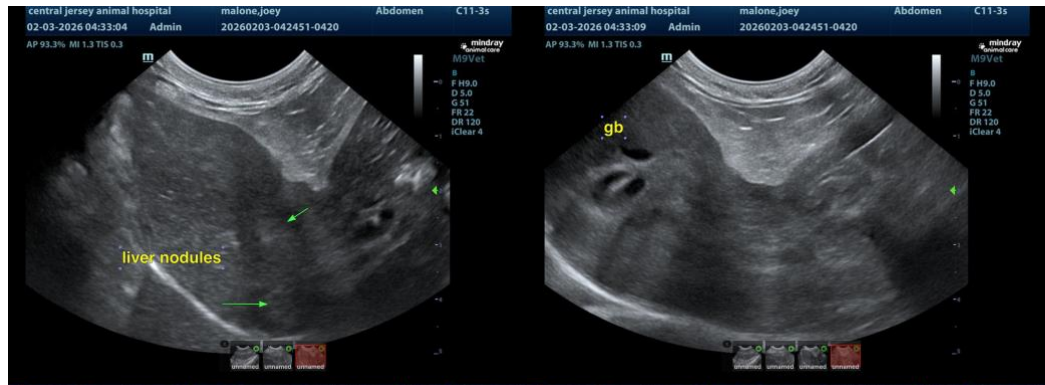
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,
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