

PATIENT

Toby Miller

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

4 Years 11 Months

WEIGHT

9.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Chloe Lowe, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

36174

DATE

3/10/26

PRESENTING CLINICAL SIGNS

- Lethargy
- Decreased appetite

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 2.0 cm beyond the cystourethral junction.

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 4.45 cm. The left kidney measured 4.55 cm.

Adrenal Glands

The **left adrenal gland** was 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 0.38 cm.

The **right adrenal gland** measured the upper limits of normal. The right adrenal gland measured 0.67 cm.

Spleen

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

Liver

The **liver** was mildly heterogenous, potentially involved in the neoplastic process. The gallbladder and common bile duct were unremarkable. The hepatic lymph nodes were enlarged.

Gastrointestinal

A concentric **gastric** mass (nonresectable) was noted in this patient with wall thickness measuring up to 1.7 cm, with a regional lymph node enlarged (up to 2.8 cm). Reactive mesentery and localized free fluid were noted. The small intestine and colon were unremarkable with normal curvilinear patterns and content.

Pancreas



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Mixed echogenic **pancreatic** inflammation was noted.

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ULTRASONOGRAPHIC FINDINGS

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- Gastric mass with regional lymphadenopathy, strongly consistent with round cell neoplasia
- Multicentric hepatic lymphadenopathy with regional inflammation
- Mixed echogenic pancreatic inflammation
- Heterogenous liver
- Right adrenal gland upper limits of normal

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Ultrasound guided FNA of the gastric wall and lymph nodes with immediate chemotherapeutic intervention recommended. Lymphoma is likely. Granulomatous disease is possible yet not suspected. Dry form FIP is a mild potential.

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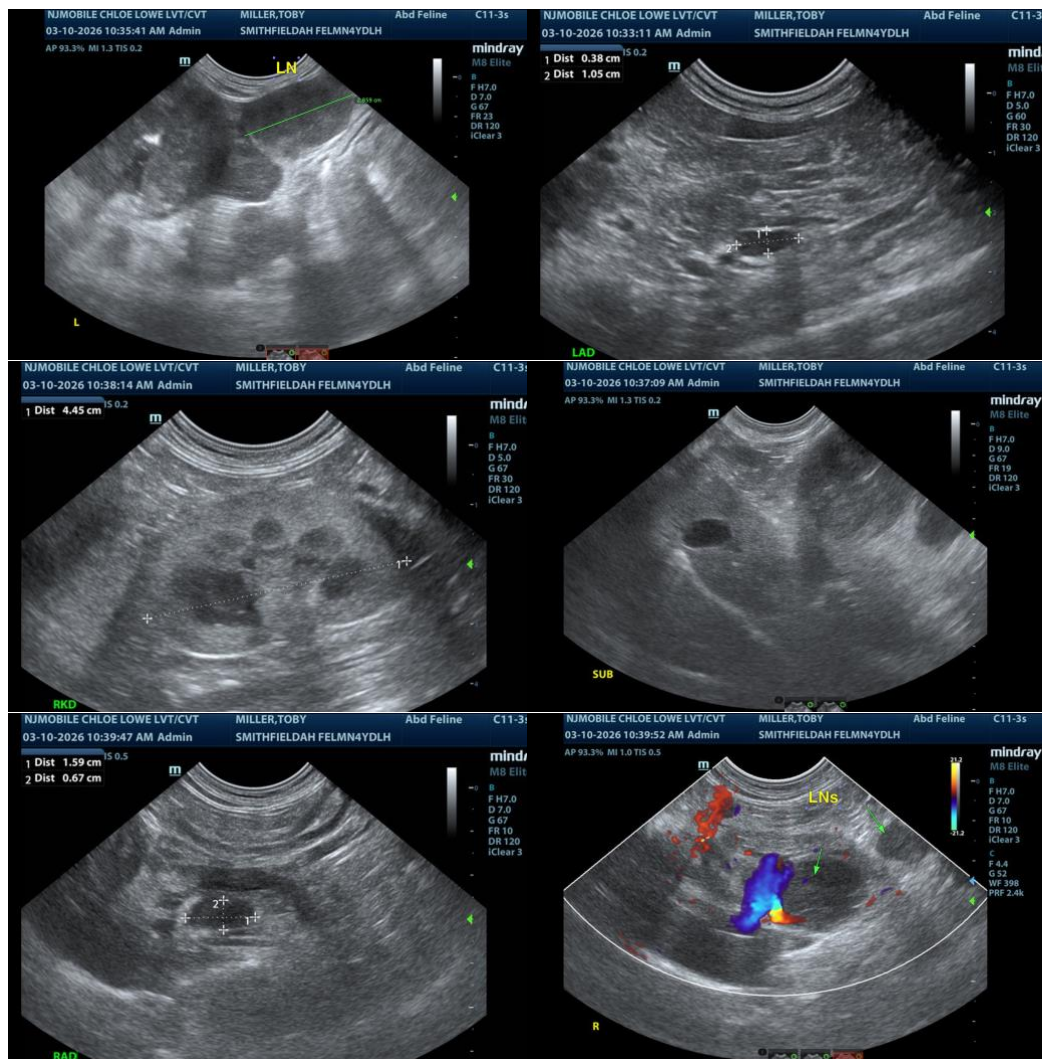
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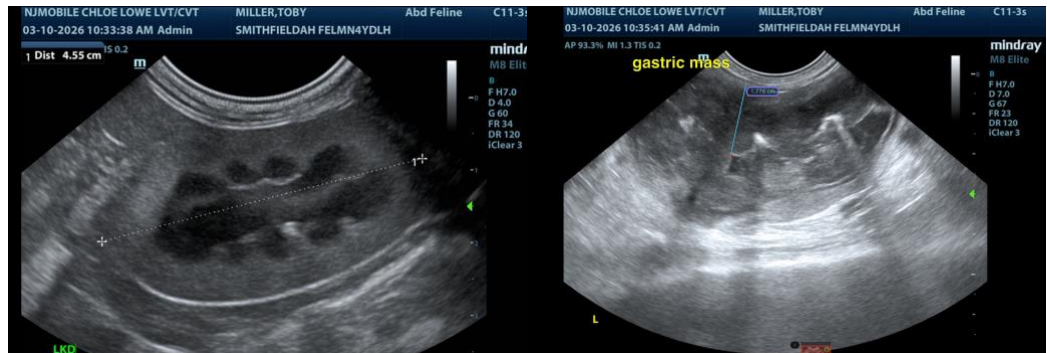
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,
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