



PATIENT

PJ Kelly

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

17 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Mary Pearce

HOSPITAL NAME

Chambersburg Animal
Hospital

REFERRING VET

Dr. Mary Pearce

INVOICE

73712

DATE

3/13/26

PRESENTING CLINICAL SIGNS

2/23/26 presented 4d hx hyporexia and vomiting, and gagging. No diarrhea. Radiographs performed at that time, unremarkable thorax and abdomen, no evidence of FB/obstruction or masses. BW was performed which was unremarkable. Symptomatic care with Cerenia, fluids, and mirtazapine initiated. Initially, vomiting stopped but hyporexia continued, however o had trouble medicating p orally, switched to transdermal mirtazapine. Symptoms improved with appetite returning, however p began vomiting again and had a weak/gurgling meow. Further diagnostics with ultrasound recommended. Continued monitoring at home, noted over the last week p vomited 8 times occurring immediately after eating, o tried both dry and canned food (OTC Proplan) and he will vomit both. Otherwise, his energy level, appetite, bowel movements and urination returned to normal. Reiterated rec. for US and GI panel, o ultimately elected to proceed. Mild weight loss has occurred between visits of 0.6lb. Current tx plan – transition to hydrolyzed protein diet. Ondansetron q12hr. Gave Cerenia and IVF in hosp and p has not vomited, ate well after ultrasound.

Abnormal PE/Chem/CBC/UA Results: 3/13/26: recheck radiographs found no concerns, unremarkable abdomen. Sedated oral exam during ultrasound found normal oral cavity, no evidence of FB, pharyngeal disease or other concerns. Cobalamin, folate, TLI pending. UA and culture pending. BW 2/23/26: HCT 37.1%, normal CBC. Chem and lytes normal. fPL normal. T4 normal (1.9).

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 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. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Left kidney measured 4.2 cm. Right kidney measured 4.5 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. Left measured 0.40 cm.

The region of the **right adrenal gland** was unremarkable.

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.



PATIENT

PJ Kelly

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

17 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Mary Pearce

HOSPITAL NAME

Chambersburg Animal
Hospital

REFERRING VET

Dr. Mary Pearce

INVOICE

73712

DATE

3/13/26

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

The **stomach** revealed chronic mucosal remodeling with hyperechoic mucosal hypertrophy and multifocal hyperechoic inclusions consistent with chronic gastritis, likely of ulcerative nature. No overt neoplasia noted. However, I cannot rule out a gastric carcinoma or similar developing. The small intestine and colon were unremarkable.

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

- Chronic gastritis pattern, no evidence of foreign body.
- Age related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

GI protectant protocol, bland diet, coverage for helicobacter or similar recommended. The changes appear to be most prominent in the gastric fundus.

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.





PATIENT

PJ Kelly

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

12 Years

WEIGHT

17 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Mary Pearce

HOSPITAL NAME

Chambersburg Animal
Hospital

REFERRING VET

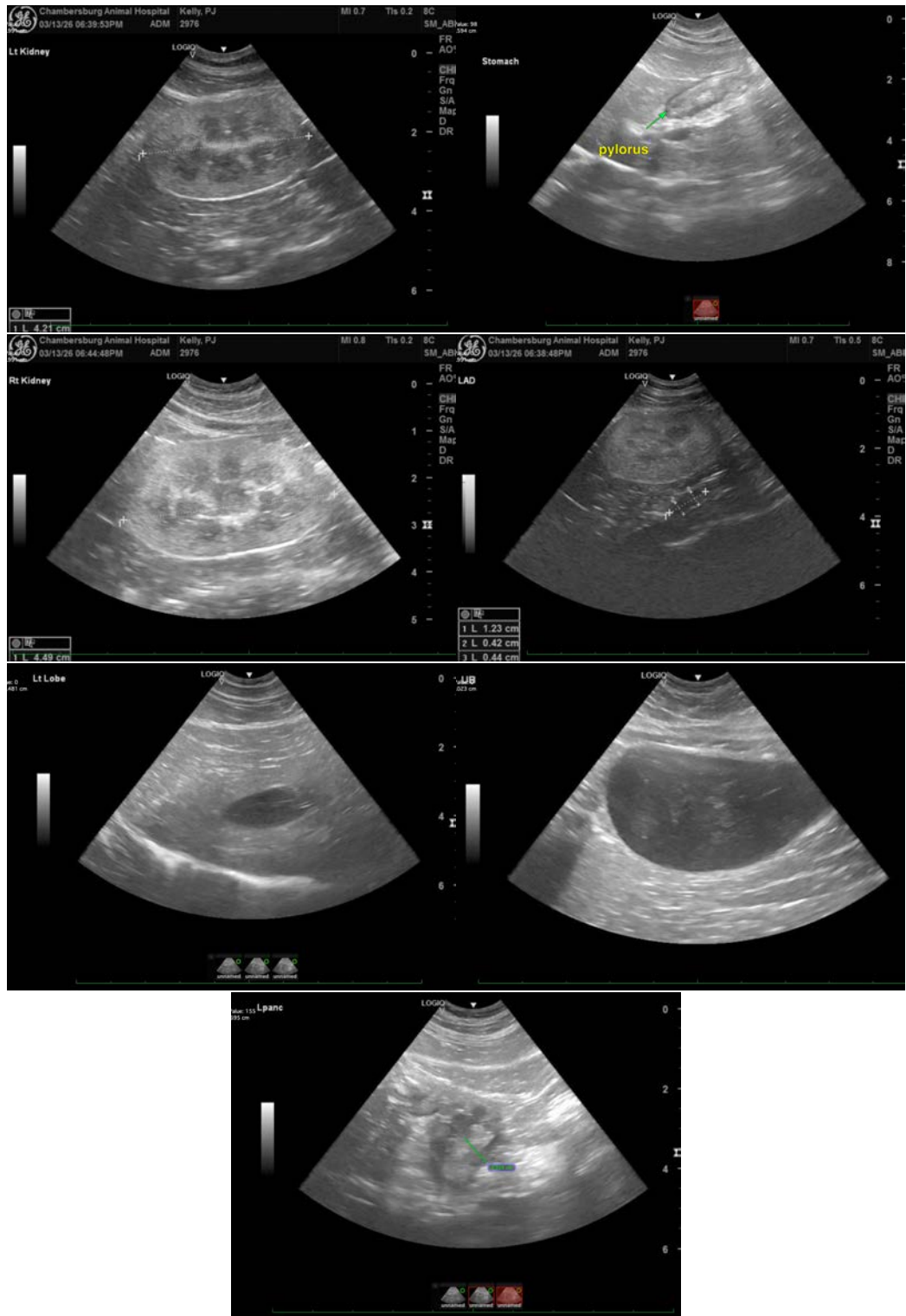
Dr. Mary Pearce

INVOICE

73712

DATE

3/13/26





PATIENT

PJ Kelly

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.

SPECIES

Feline

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.

BREED

DSH

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,
CEO, Owner, Founder -- SonoPath.com

info@SonoPath.com

SEX

Neutered Male

AGE

12 Years

WEIGHT

17 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Mary Pearce

HOSPITAL NAME

Chambersburg Animal
Hospital

REFERRING VET

Dr. Mary Pearce

INVOICE

73712

DATE

3/13/26