



## PATIENT

Linus Telesca

## SPECIES

Feline

## BREED

DSH

## SEX

Neutered Male

## AGE

8 Years

## WEIGHT

12 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Anthony Smatt

## HOSPITAL NAME

The Pets I Love

## REFERRING VET

Dr. Debra Szpicek

## INVOICE

73905

## DATE

3/21/26

## PRESENTING CLINICAL SIGNS

O has noticed vomit for a week (once a day). On wednesday noticed cat projectile vomit with dry food and vomited again that same evening. O has an autofeeder and noticed level hasn't really gone down, still eating the canned food. ate ~ hand full of dry food this am. pu/pd x ~ 1 week, however, urine is very dark, no diarrhea. o has plants in the house but none that are new or toxic to cats. o is unaware of anything he could have gotten into, including missing any of his toys. Coat seems shaggy and P is sitting in places that aren't normal. Patient has been hospitalized for blood work and therapy

Abnormal PE/Chem/CBC/UA Results: 3/20 CBC: wnl Chem: ALT high GGT: high bilirubin: high U/A: SG: 1.051 bacteria suspected 3/21 CBC:wnl Chem: ALT: high but improved GGT: high Bilirubin: high but improved

## 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 **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. Left kidney measured 4.1 cm. Right kidney measured 4.4 cm.

### Adrenal Glands

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

### Liver

The **liver** presented coarse architecture and increased portal markings. Thickened echogenic gallbladder wall noted. This is most consistent with cholangiohepatitis.

### Gastrointestinal

Some retention of ingesta noted in the **stomach**. 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 **pancreas** was hypoechoic and irregular with dilated duct.



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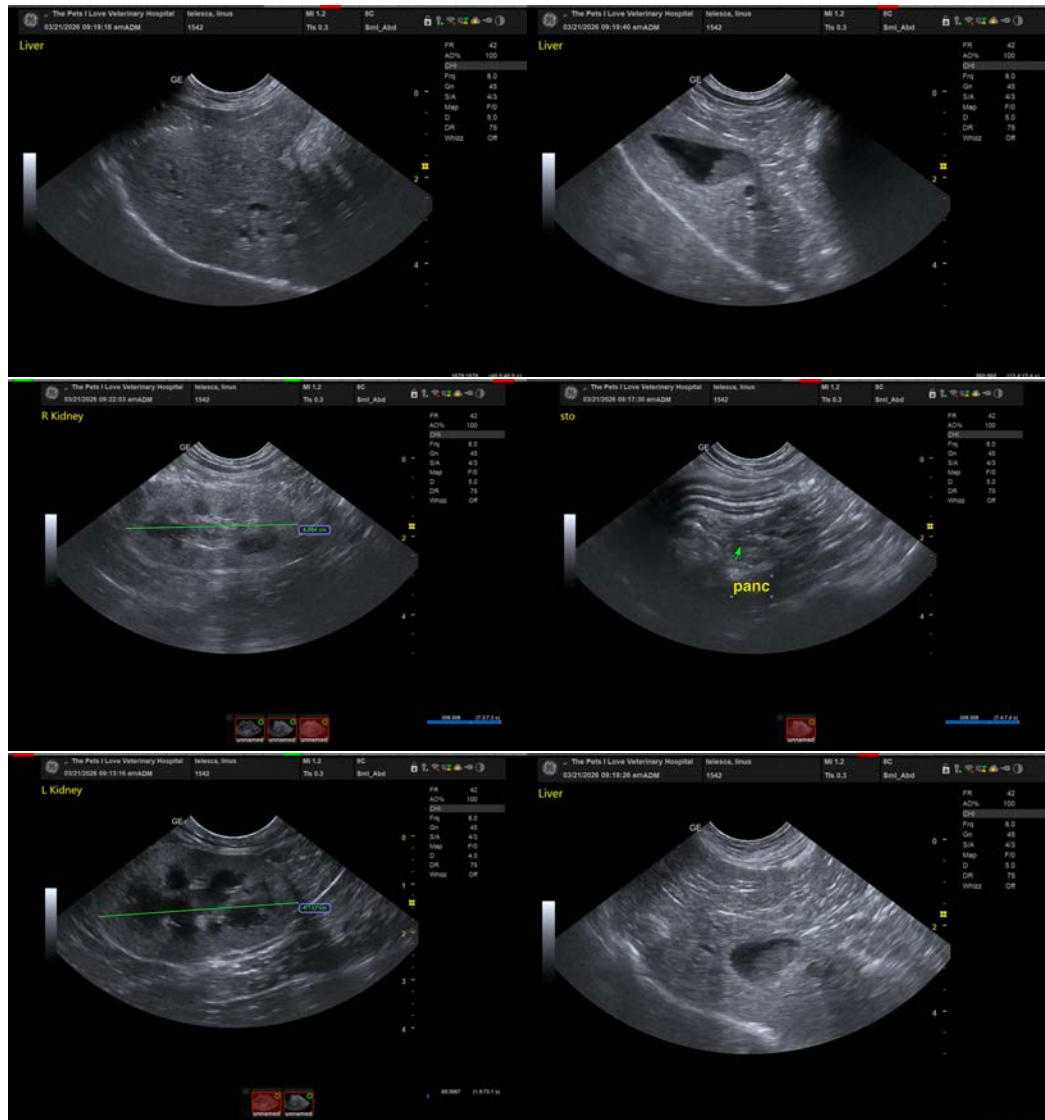
3/21/26

## ULTRASONOGRAPHIC FINDINGS

- Cholangiohepatitis pattern.
- Potential chronic pancreatitis.
- Retention of ingesta in the stomach.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence or suspicion of neoplasia. FNA of the liver indicated for further definition. Cholecystocentesis and culture would also be appropriate.





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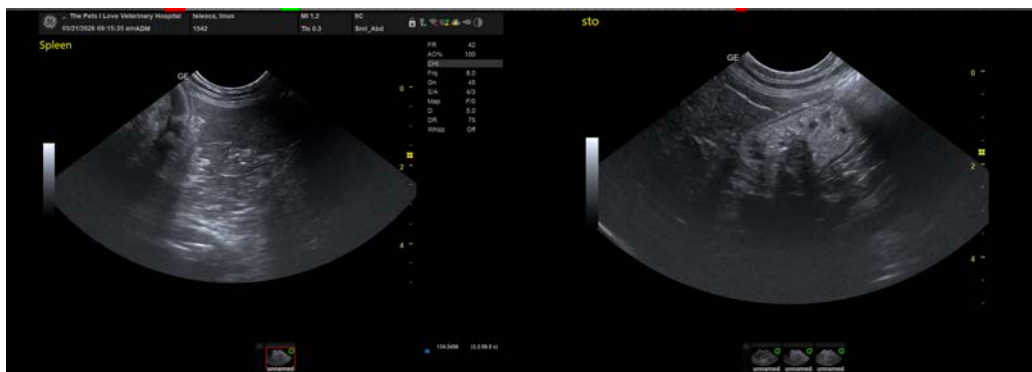
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)