



PATIENT

Spooky Gruhler

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

17 years

WEIGHT

7.1 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Mary Pearce

HOSPITAL NAME

Chambersburg AH

REFERRING VET

Dr. Eckert

INVOICE

78368

DATE

3/30/26

PRESENTING CLINICAL SIGNS

- Presenting Symptoms: Weight loss with mild azotemia; chronic bilateral otitis externa
- Presented 02-23-26 for awe & chronic bilateral otitis for at least the past year.
- Weight loss noted on exam, pt was 10lb in 2023, 8.2lb in 08-2025, 7 lb at time of visit, no change in water intake noted, vomiting small amounts of fluid a few times weekly.
- On miralax, indoor only, no other medications.
- Some improvement with tresaderm clinically but still significant infection/otitis present, withdrew topicals and plan culture of ear(s) at this visit.
- Have recommended UA (pt would not use nosorb, o is planning to have cystocentesis done at this visit), but concern that degree of azotemia may not be commensurate with degree of weight loss and that there may be a larger underlying issue such as IBD, neoplasia, etc.
- On exam generalized muscle loss over topline, abdominal palpation soft/nonreactive with some firm stool in colon (no distension), no obvious mass/free fluid; periodontal disease; suspect OA/DJD stifles; moderate inflammation & brown debris AU w/ no obvious polyps noted, BCS 2.5/5. On labwork, SDMA 18 (0-14), creat 2.0 (0.9-2.3), BUN 36 (16-37); T4 1.9 (0.8-4.7; below grey zone for 2.3 and above for sick euthyroid)); monocytes 1.076 (0.042-0.467). Possible murmur briefly on a followup exam on 03-16, not repeatable.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction and appeared normal. 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. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.2 cm. The right kidney measured 2.87 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 right adrenal gland measured 0.38 cm. The left adrenal gland measured 0.4 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



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congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

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Liver

The **liver** revealed coarse architecture with increased portal markings and a moderate amount of remodeling. There were no overt masses noted. The gallbladder presented inspissated bile without over distension. The cystic and common bile duct were both tortuous. This is an age related change. There was no overt obstruction present.

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Gastrointestinal

The **stomach** was filled with progressively shadowing luminal material. This is consistent with a hairball density. Transit of chyme into the small intestine was normal. Minor intestinal thickening was noted without loss of mural detail. The mesenteric lymph nodes were slightly enlarged measuring 1.1 cm.

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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.

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ULTRASONOGRAPHIC FINDINGS

Chronic dilation of the common bile duct and cystic duct without overt obstruction.

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Mesenteric lymphadenopathy.

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Hairball density in the stomach.

Mild intestinal thickening.

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Moderate degenerative renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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There was no overt evidence of neoplasia.

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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.



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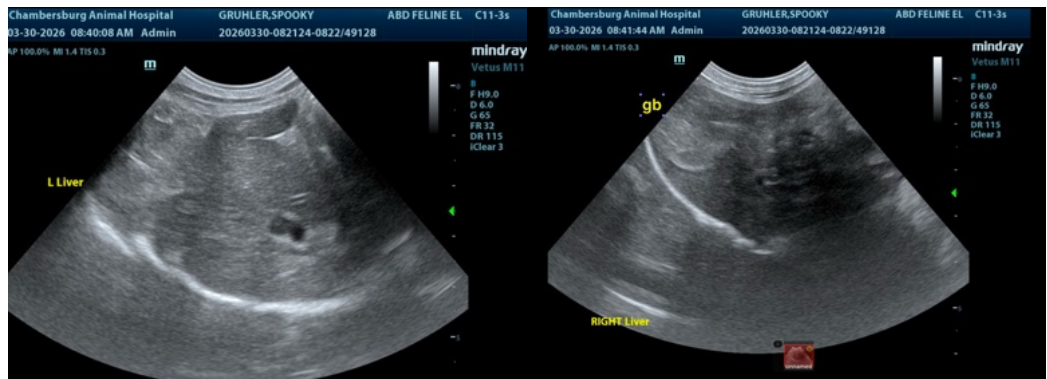
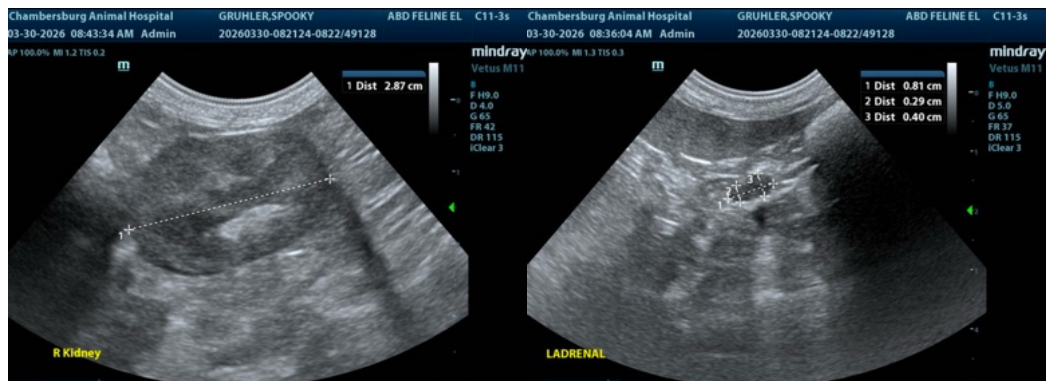
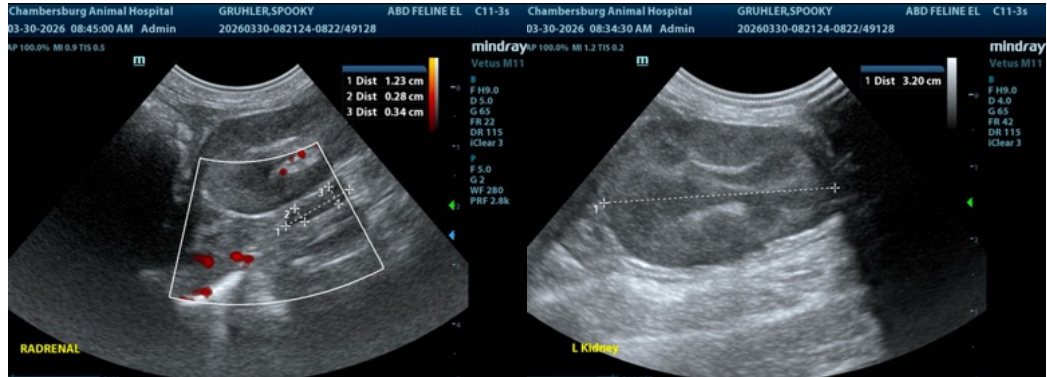
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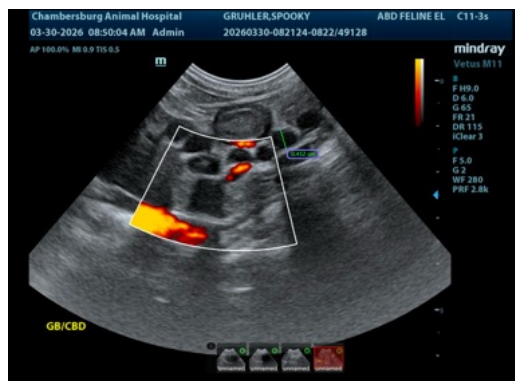
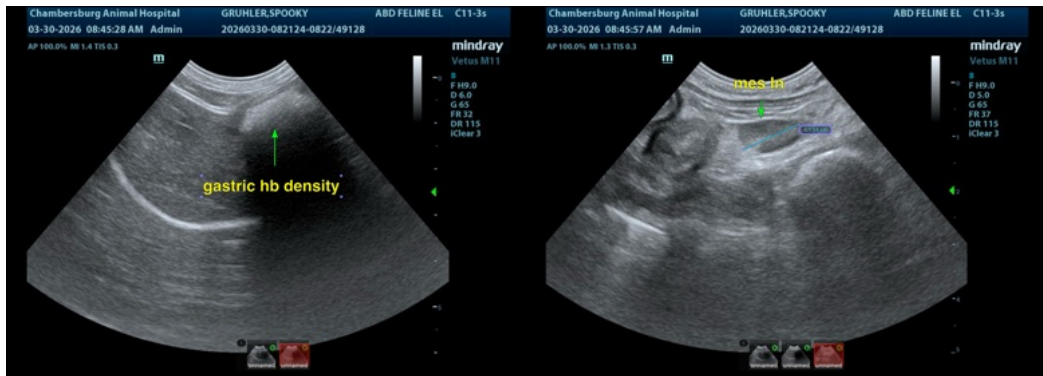
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com