



PATIENT

Coconut Bruss

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed female

AGE

6 years

WEIGHT

8.64 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Mavis McCormick

HOSPITAL NAME

Lanier AH

REFERRING VET

Dr. McCormick

INVOICE

72351

DATE

3/9/26

PRESENTING CLINICAL SIGNS

- The patient is an indoor/outdoor cat who presented for lethargy, anorexia, and vomiting that began on Saturday, March 7, 2026. On Friday, March 6, 2026, the patient caught a mole and later that day developed swelling on the left side of her face, which has since resolved. Since Saturday, she has been hiding, refusing food, and vomiting yellow fluid after activity. She has been drinking small amounts of water. The owner has not observed urination (on PE bladder small on palpation and u/s) or defecation, but the patient did defecate inappropriately inside the house over the weekend, which is abnormal for her. The owner also reports a new clear, yellowish discharge from both eyes. The patient has a history of chronic drainage from the left eye. She is not current on vaccinations. All other pets in the household are reportedly healthy.
- From 3/9/26: combo test- negative cbc: WBC 4.43 w/ neutrophilia 3.09 (suspected bands, confirmed w/ slide review) lymphopenia 0.65 platelets 68,000 (poss real w/ slide review, not a lot of platelets seen) chem: bilirubin 4.0 H globulin 5.7 H TP 8.8 ALT 100; alk phos < 10 amylase 1112 (500-1500) lipase 817 (100-1400) T4 1.5 UA: rbc tntc bilirubin crystals no obvious bacteria or wbc

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 was noted. Ureteral papillae were normal.

The **kidneys** revealed significant dystrophic changes with cortical infarcts and remodeling. Expansive, irregular cortical contour was noted. The left kidney measured 3.3 cm. The right kidney measured 3.0 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 left adrenal gland measured 0.4 cm. The right adrenal gland measured 0.3 cm.



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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 was noted.

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

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

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

Irregular dystrophic or possibly primary dysplastic kidneys with mild to moderate degenerative changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of specific disease. However, full urinary work-up is warranted. FNA of the left renal cortex could be considered if any weight loss is an issue. There is a minor potential for emerging neoplastic event; however, this is not overtly suspected.



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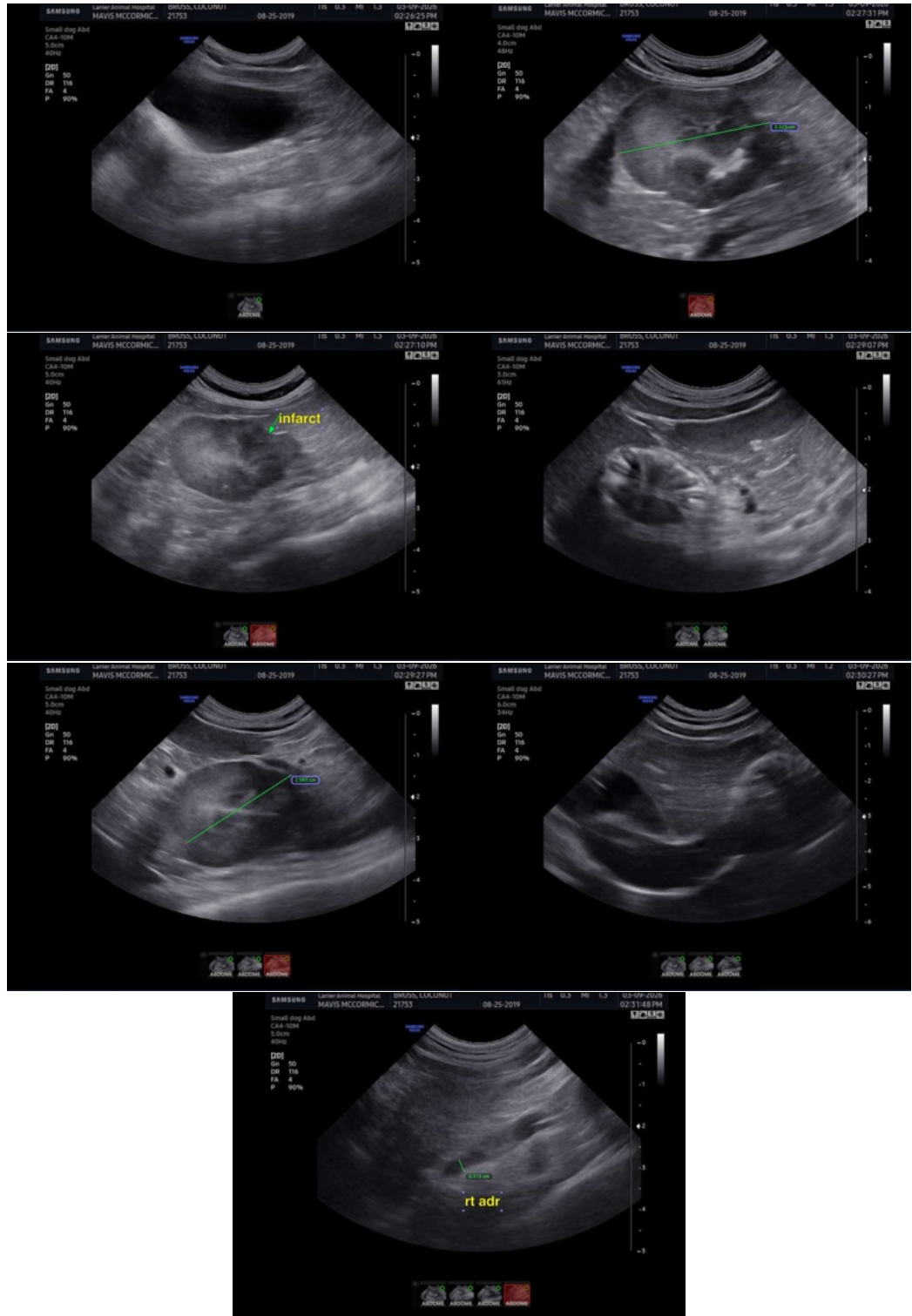
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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