



PATIENT

Peanut Gosselin

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

9 Years

WEIGHT

12.9 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

Mt. Olive VH

REFERRING VET

Dr. Jones

INVOICE

36532

DATE

4/10/26

PRESENTING CLINICAL SIGNS

History: ADR, vomited over weekend, anorexia. Exam NSF, Afebrile, Lat abd rad on 4/6 NSF
Meds: Cerenia 0.6 ml IV on 4/9, Famotidine 0.6 ml SQ on 4/9, Mirataz on 4/9
Abnormal PE/Chem/CBC/UA Results: ALT 104, Na/K 44, CPK 1297, PLT 18 (clumping noted in sample) Lymp 832

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal. A minor amount of suspended debris was noted. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

The **left kidney** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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 4.3 cm. Slight pinpoint mineralizations were noted in the left kidney.

The caudal pole of the **right kidney** was heterogenous. Irregular contour was noted in the right kidney, creating a nodular and cystic lesion, measuring 2.0 cm x 2.0 cm, with adjacent inflammation and infarct. The right kidney measured 3.64 cm. Pyelectasia was noted in the right kidney with mineralization. The proximal ureter was slightly dilated and strictured.

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 0.35 cm. The right adrenal gland measured 0.3 cm.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume, and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal



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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

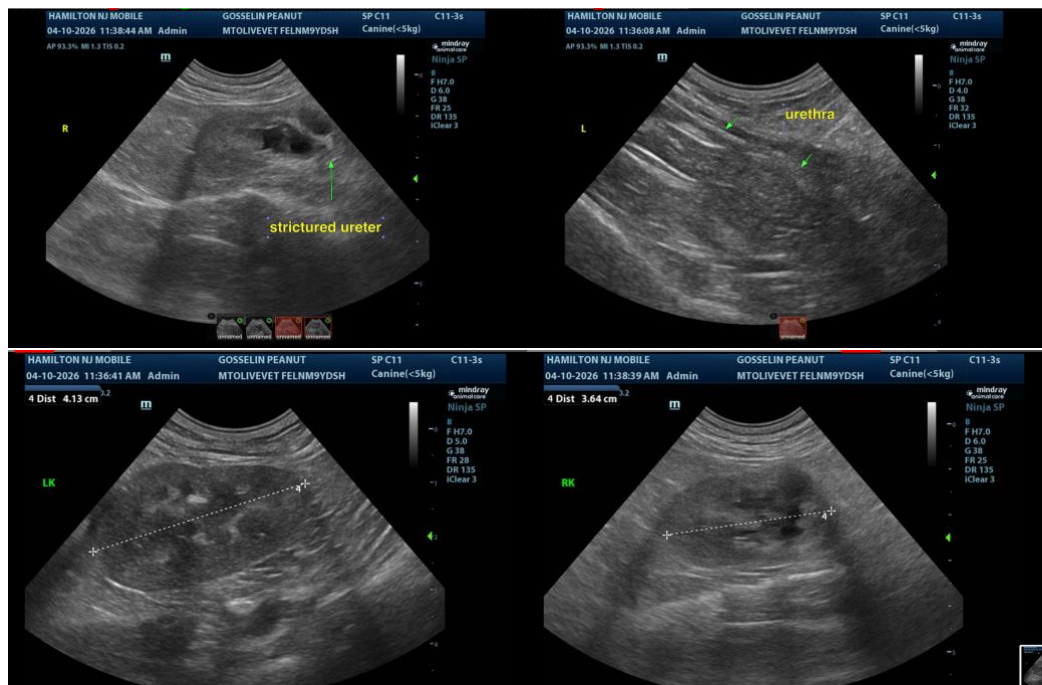
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Irregular right kidney with dystrophic changes, mineralization, and recent infarct- possible abscessation. Minor potential for emerging neoplastic event.
- Age-related left renal changes
- Urinary bladder debris
- Age-related hepatic changes
- Volume contracted spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Palpation of the right kidney and full urinary work up with full urinalysis and culture and sensitivity (if any inflammatory disease is present) is recommended. IV fluid support could be considered with injectable antibiotics and pain management. Recheck sonogram is recommended in 3-5 days to assess for progression or regression. I cannot rule out a neoplastic process, though not suspected. Recommend medical management in this patient.





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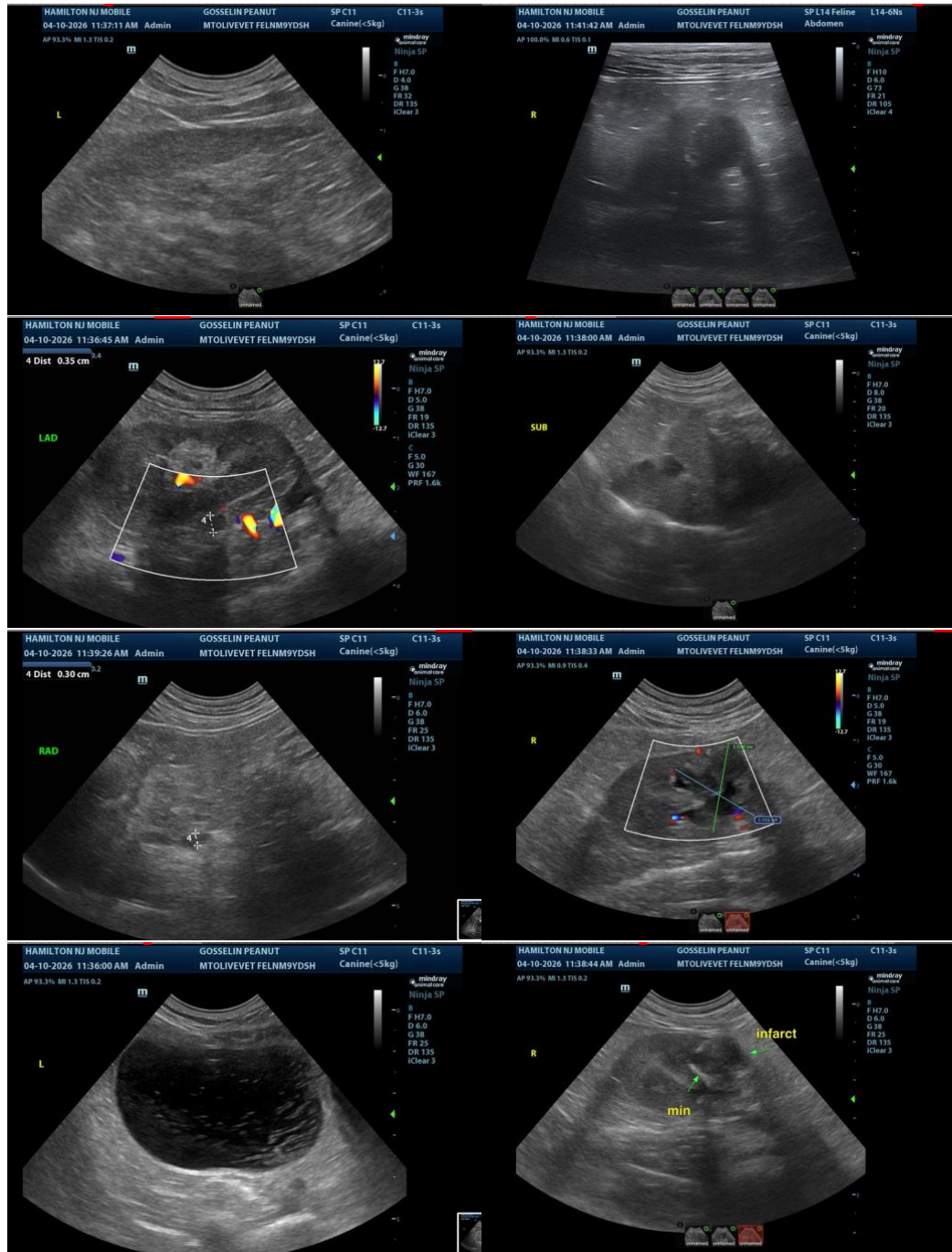
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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