



PATIENT

George Bedard

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

6 Years

WEIGHT

7.05 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Sakakeeny

HOSPITAL NAME

PetMedic Urgent Care
Westborough

REFERRING VET

Dr. Katie Sakakeeny

INVOICE

15371

DATE

04/23/26

PRESENTING CLINICAL SIGNS

On April 22, 2026, George presented for a two-day history of vomiting, inappetence, and lethargy. Physical examination revealed mild dehydration and a tense abdomen. Blood work was largely unremarkable, with the exception of a mild elevation in GGT (9 U/L). Abdominal radiographs ruled out a gastrointestinal obstruction. The presumptive diagnosis was gastroenteritis or pancreatitis. He was treated with an anti-emetic injection (Cerenia) and subcutaneous fluids and was discharged with recommendations for supportive care and monitoring. An incidental finding on the radiographs from April 22, 2026, was asymmetry in the size and shape of the kidneys, with the radiology report noting right renal cortical infarcts, suggestive of possible chronic kidney disease. This may be related to a past renal insult or a congenital change. Blood work on the same day showed that his kidney values were within normal limits. Long-term monitoring of his renal function with his primary veterinarian was recommended. A soft, intermittent parasternal systolic heart murmur was auscultated, with its clinical significance being undetermined and warranting monitoring. AUS was recommended for today

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 1.0 cm 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 **left kidney** was mildly enlarged with slight compensatory hypertrophy.

The **right kidney** presented subnormal in size with cortical infarcts and active inflammation adjacent to the infarcts. The right kidney measured 2.7 cm in length. Slight pyelectasia was also present.

Adrenal Glands

Both **adrenal glands** were not visualized.

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. The spleen measured 9.0 mm width.

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



PATIENT

George Bedard

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

6 Years

WEIGHT

7.05 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Sakakeeny

HOSPITAL NAME

PetMedic Urgent Care
Westborough

REFERRING VET

Dr. Katie Sakakeeny

INVOICE

15371

DATE

04/23/26

The **stomach** revealed a minor amount of fluid filled lumen with minor thickening. The small intestine and colon were unremarkable.

Pancreas

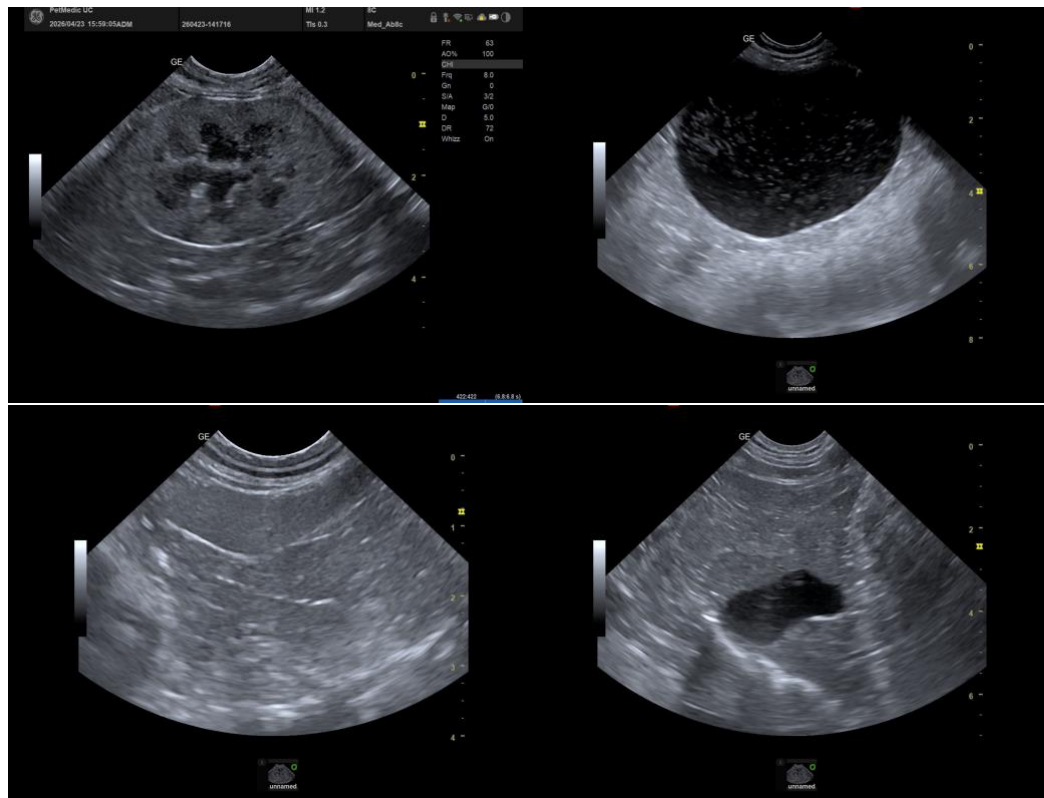
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Mild gastritis pattern.
- Dystrophic right kidney with infarcts and active inflammation.
- Enlarged left kidney.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinalysis and GI protectants are warranted. Management for any UTI is indicated. No evidence of neoplasia or foreign bodies.





PATIENT

George Bedard

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

6 Years

WEIGHT

7.05 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Sakakeeny

HOSPITAL NAME

PetMedic Urgent Care
Westborough

REFERRING VET

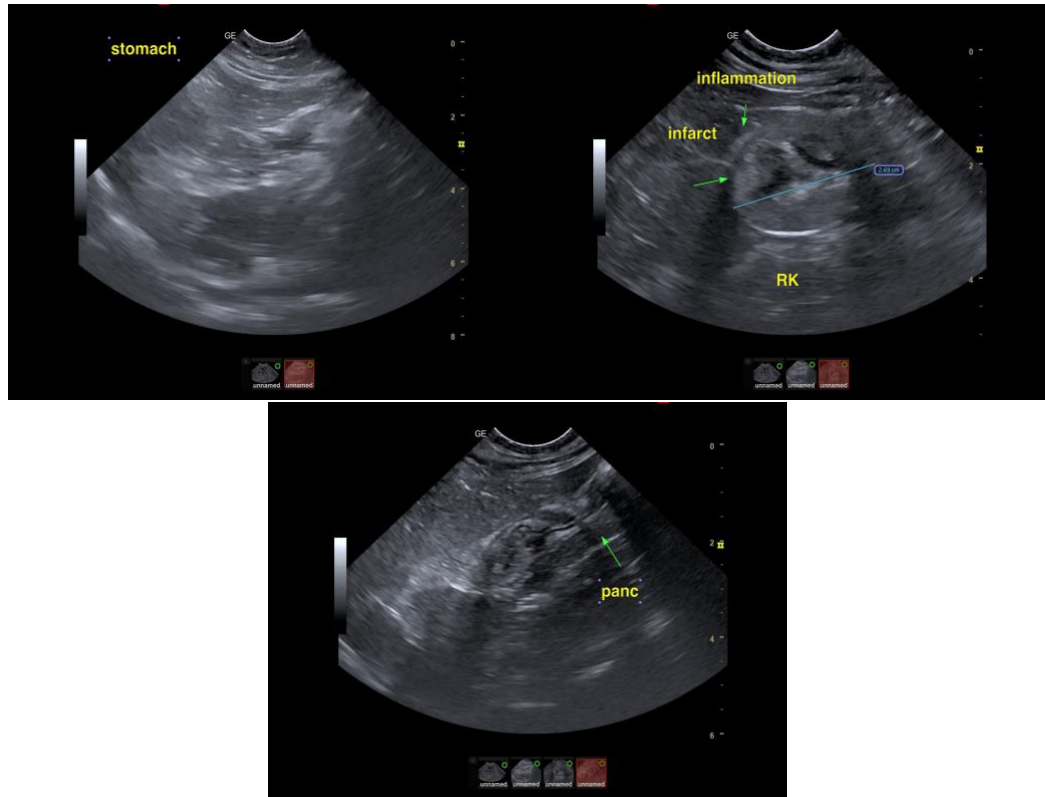
Dr. Katie Sakakeeny

INVOICE

15371

DATE

04/23/26



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