



## PATIENT

Muji Gao

## SPECIES

Feline

## BREED

DMH

## SEX

Spayed Female

## AGE

12

## WEIGHT

9

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Shen Li

## HOSPITAL NAME

Dr. Shen Li Veterinary  
Service

## REFERRING VET

Dr. Shen Li

## INVOICE

16034

## DATE

05/11/26

## PRESENTING CLINICAL SIGNS

Hx of constipation, hospitalized last year. US then: The liver is upper-normal in size, with a smooth/sharp margin, normal echogenicity, and normal echotexture. The gallbladder contains scant mobile echogenic debris. There is no gallbladder wall thickening or bile duct dilation. The spleen is normal in size and echogenicity. The kidneys are normal in size (L 3.7cm, R 3.8cm in length), with mildly hyperechoic cortices, slightly decreased corticomedullary distinction, smooth borders, and no pyelectasia. There is mild peridiverticular mineralization on the left. The urinary bladder is filled with anechoic urine and has normal wall thickness. The adrenal glands are normal in size and shape. The stomach is nearly empty and has normal wall thickness and layering. The small intestines have normal wall thickness. There is a thin hyperechoic line in the mucosa of multiple segments of small intestine running parallel to the submucosa (a "4th line"). The colon contains a small amount of gas and shadowing feces and has normal wall thickness. The mesenteric lymph nodes are normal in size, shape, and echogenicity. The visible pancreas is normal in size, normal in echogenicity, and has a smooth capsular border. A small volume of anechoic pleural effusion is visible through the diaphragm

Abnormal PE/Chem/CBC/UA Results: 2/6 heart murmur. CBC chem UA T4 fecal test normal. proBNP pending.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 2.0 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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex. Slight mineralizations were noted. The left kidney measured 3.6 cm in length. The right kidney measured 3.8 cm in length.

### 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.

### 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



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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.

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Feline

**Gastrointestinal**

The **stomach** in this patient revealed progressively shadowing hair density measuring approximately 3.0 cm. The pylorus was patent. Transit of chyme appeared to be occurring normally. The small intestine and colon were unremarkable.

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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.

**SEX**

Spayed Female

**AGE**

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- Age-related renal changes.
- Hair type density in the stomach.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Medical management for hairball accumulation is indicated. Recheck sonogram after 10-14 days of medical management. No other evidence of pathology. The cause of constipation is unclear. No evidence of mural colonic disease in this patient in the visible planes. Cannot rule out colorectal pathology, yet the proximal and descending colon all appeared unremarkable.

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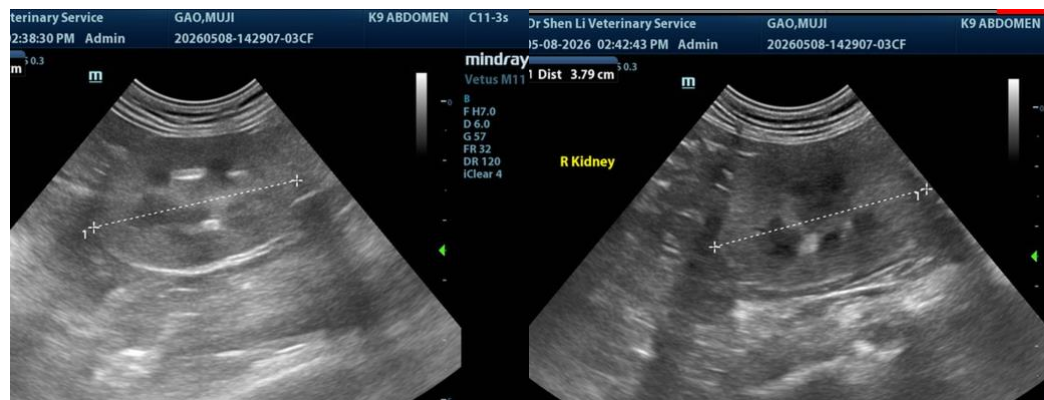
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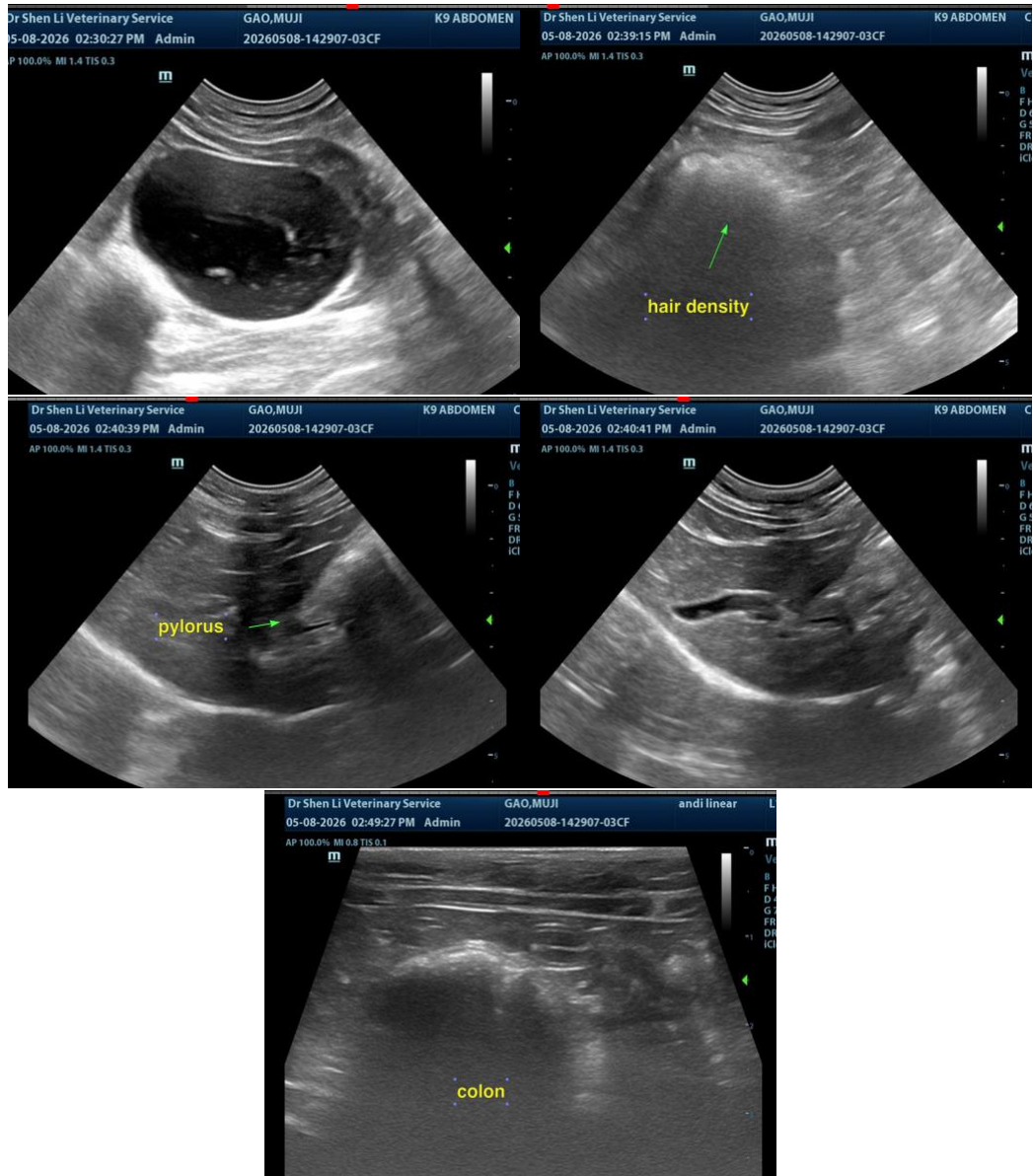
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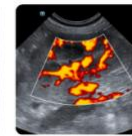
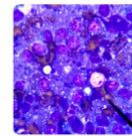
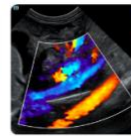
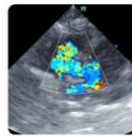
The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,

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