



PATIENT

Fantuan Dai

SPECIES

Feline

BREED

Siamese

SEX

Spayed Female

AGE

10 Years

WEIGHT

7

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shen Li

HOSPITAL NAME

Dr. Shen Li Veterinary
Services

REFERRING VET

Dr. Shen Li

INVOICE

75215

DATE

5/18/26

PRESENTING CLINICAL SIGNS

Lost a tooth otherwise healthy indoor outdoor

Abnormal PE/Chem/CBC/UA Results: Normal PE very mild alt elevation at 157 the rest wnl including UA cardio proBNP t4

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 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 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 and no evidence of pelvic dilation was present. Left kidney measured 3.1 cm. Slight cortical infarct noted at the dorsal cortex of the left kidney, stable. Right kidney measured 3.7 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

Spleen

The **spleen** measured at the upper limits of normal (1.1 cm) with slight scalloping contour.

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.



PATIENT

Fantuan Dai

SPECIES

Feline

BREED

Siamese

SEX

Spayed Feamle

AGE

10 Years

WEIGHT

7

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shen Li

HOSPITAL NAME

Dr. Shen Li Veterinary
Services

REFERRING VET

Dr. Shen Li

INVOICE

75215

DATE

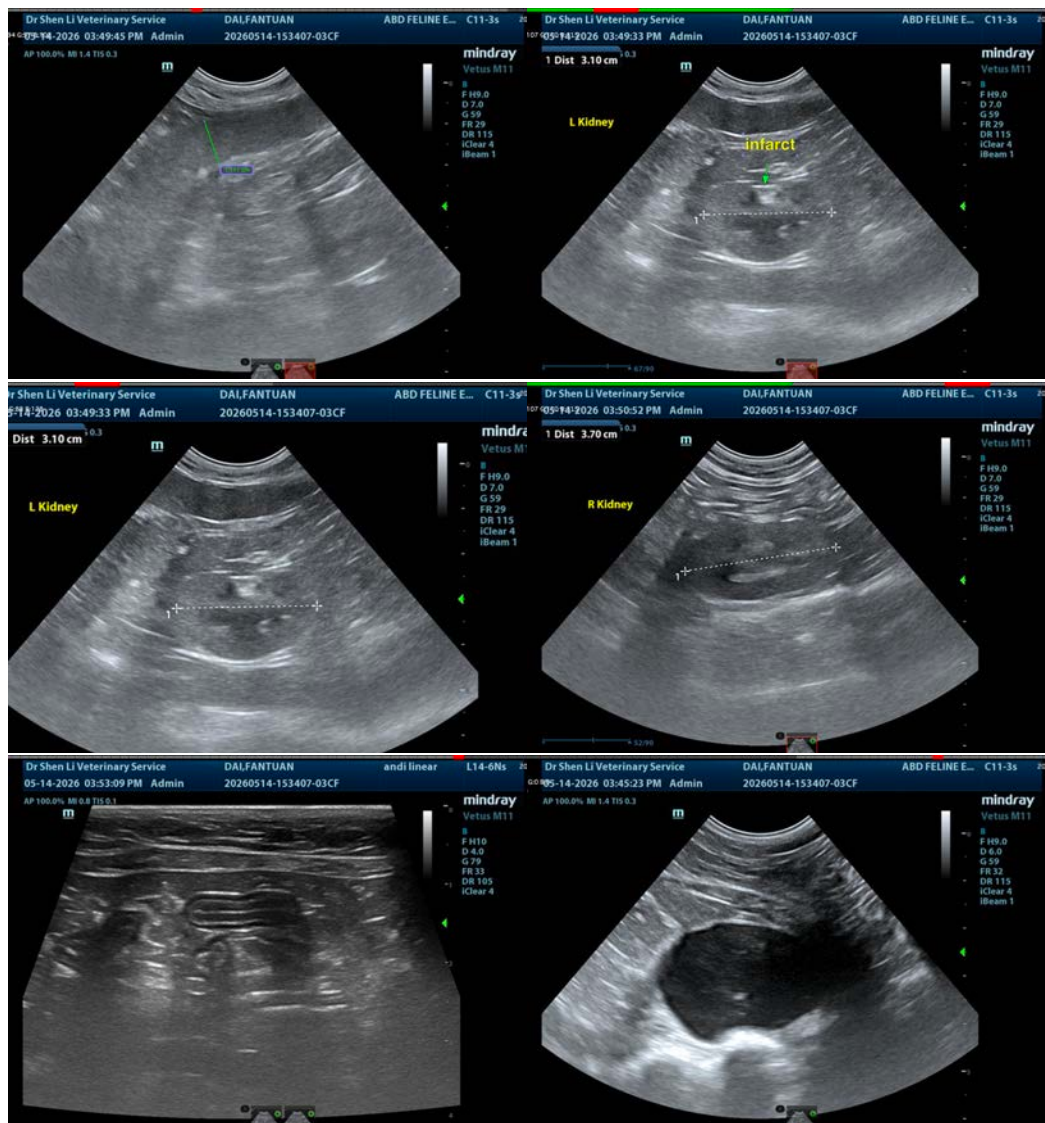
5/18/26

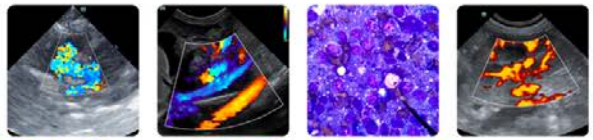
ULTRASONOGRAPHIC FINDINGS

- Age related renal changes.
- Upper limits of normal splenic size with slight scalloping contour.
- Structurally unremarkable liver, likely low-grade inflammatory hepatopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Structurally unremarkable abdomen. If any weight loss is an issue, 25-gauge FNA of the spleen warranted to ensure an occult emerging round cell neoplastic event is not present. However, if sedation was employed this would be normal.





PATIENT

Fantuan Dai

SPECIES

Feline

BREED

Siamese

SEX

Spayed Female

AGE

10 Years

WEIGHT

7

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Shen Li

HOSPITAL NAME

Dr. Shen Li Veterinary
Services

REFERRING VET

Dr. Shen Li

INVOICE

75215

DATE

5/18/26

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