



## PATIENT

Phoebe Schneider

## SPECIES

Feline

## BREED

Ragdoll

## SEX

Spayed female

## AGE

5 years

## WEIGHT

15.25 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Dr. Jocelyn Hollway

## HOSPITAL NAME

Valley Green VH

## REFERRING VET

Dr. Oberer-Gerber

## INVOICE

77639

## DATE

5/18/26

## PRESENTING CLINICAL SIGNS

History: Patient here for CXR/AUS to screen prior to mass removal for confirmed MCT. Per owner patient doing well at home. E/D/U/BM WNL, NO C/S/V/D.

Physical Exam Summary:

BAR. Abdomen palpates normally; no pain, tenderness or masses on palpation. Regular rhythm; no murmur detected. Trachea clear -- harsh lung sounds bilaterally, no obvious crackles. BCS 8/9.

Nonpigmented dermal nodules at the caudal aspect of AS cutaneous marginal flap (FNA = MCT).

Abnormal PE/Chem/CBC/UA Results: Ionized calcium - pending 5/14/26 PT/PTT WNL CBC -RBC NSF -WBC NSF -PLT NSF Chemistry -BG NSF -KES NSF -elytes are normal w/ the exception of high calcium. -proteins NSF -LES NSF BNP NSF T4 NSF Triple snap negx3 Fecal neg for ova and parasites UA to complete panel = pending CXR to IDX = IMPRESSIONS: No significant thoracic abnormalities are identified for patient age. No evidence of thoracic metastatic disease is noted. RECOMMENDATIONS: Consider an abdominal ultrasound as well, given the tumor type.

## 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 normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 4.17 cm. The right kidney measured 4.02 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 and right adrenal gland measured 0.4 cm.

### 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.



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## Liver

The **liver** revealed uniform parenchyma. The liver was mildly hyperechoic to the falciform fat. This may be a normal variant or if liver enzymes are elevating then emerging lipidosis is a potential. The gallbladder and common bile duct were unremarkable.

## 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.

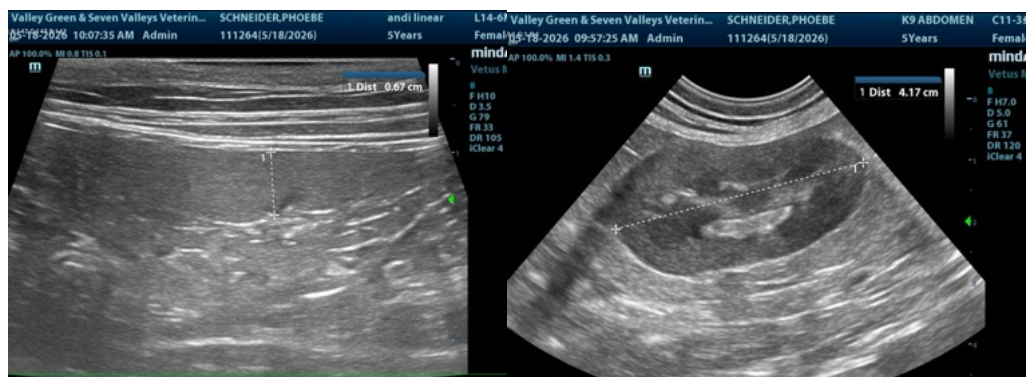
## ULTRASONOGRAPHIC FINDINGS

Structurally unremarkable abdomen.

Hyperechoic liver, likely idiopathic or potential emerging lipidosis, yet there was no evidence of structural disease directly related to mast cell disease or other pathology.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No specific therapy is recommended at this time.





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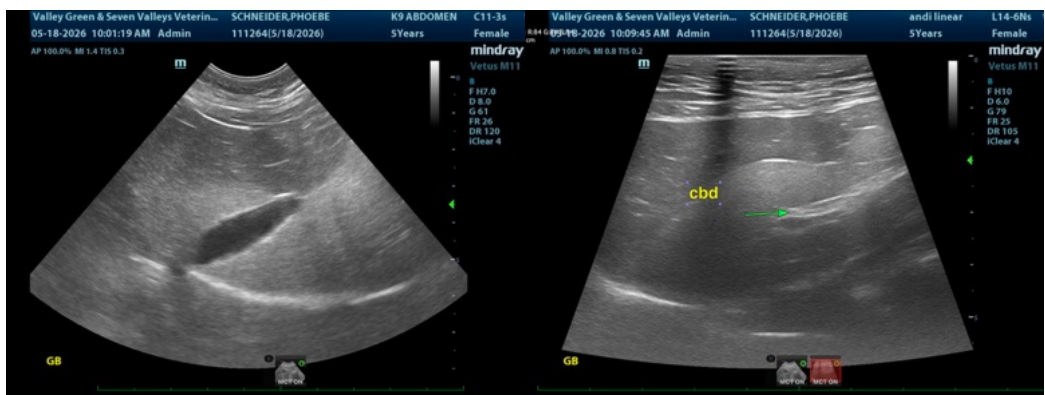
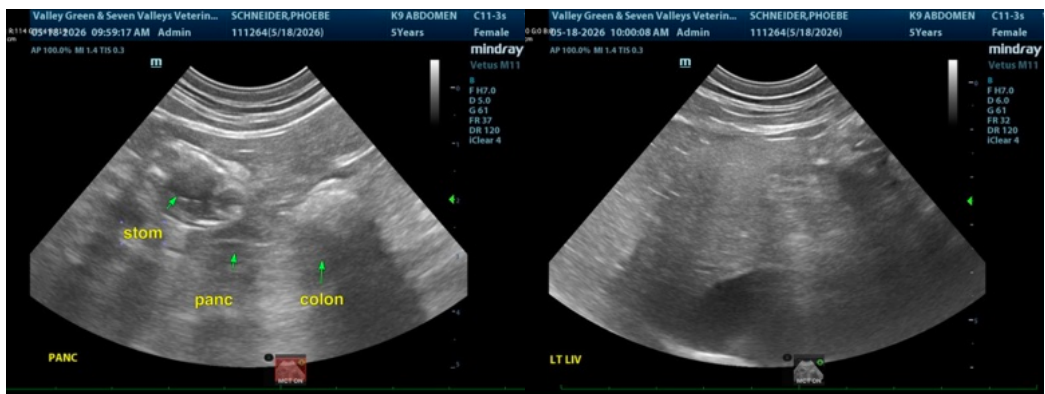
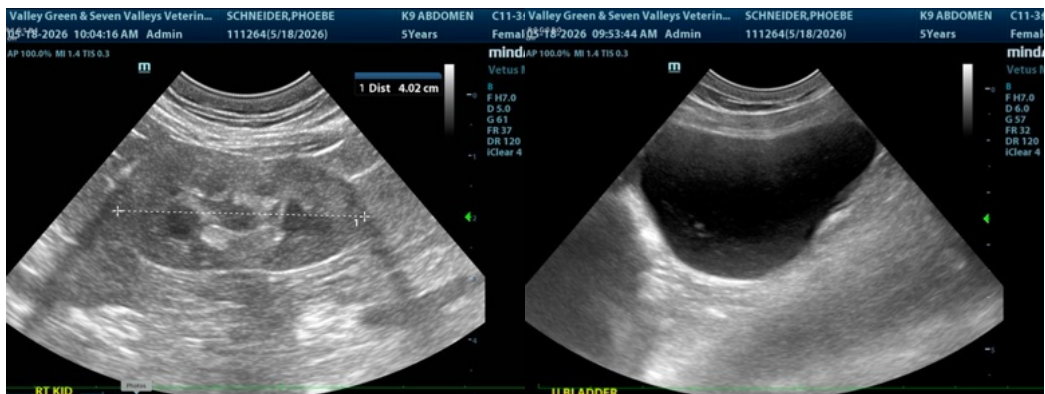
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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