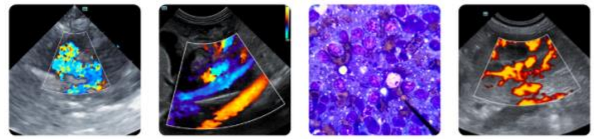


PATIENT

Sherlock Soulea

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years 11 Months

WEIGHT

12.6

INTERPRETED BY

Eric Lindquist, DMV, DABVP (Canine & Feline), Cert. IVUSS

IMAGING PERFORMED BY

Dr. Katie Margulies

HOSPITAL NAME

Fairland AH

REFERRING VET

Dr. Katie Margulies

INVOICE

37217

DATE

5/26/26

PRESENTING CLINICAL SIGNS

History: P recently adopted by a neighbor. New o reported weight loss, and p was brought in on 4/10/26 for exam/bw. BW showed hyperthyroidism with elevated ALT. Recheck lab work performed 5/5/26 showed good control of hyperT4 with the methimazole, but the ALT has now further increased. Abdominal ultrasound pursued to further work up the ALT elevation. P weight is now stable since starting the methimazole. No historical vomiting, diarrhea.

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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 3.8 cm. The right kidney measured 4.4 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

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

Liver

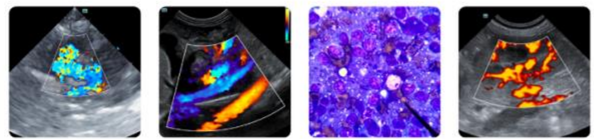
The **liver** revealed slight increased portal markings with normal size and contour. Minor coalesced bile was noted in the gallbladder, not pathological.

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.



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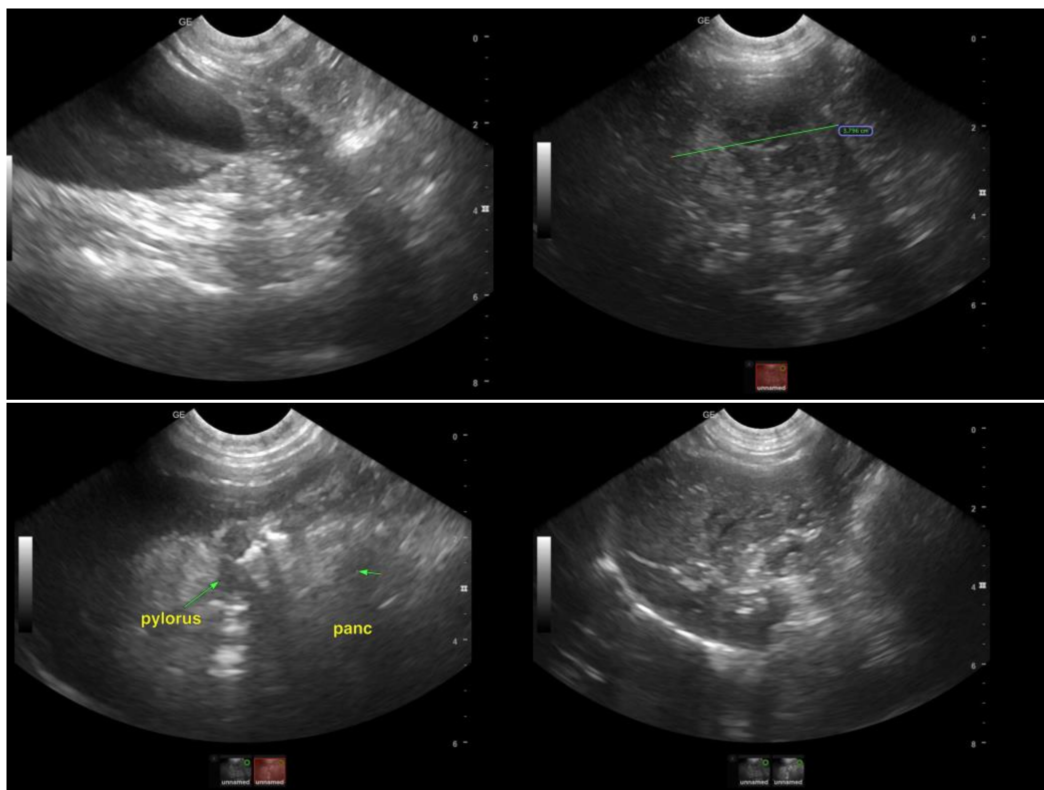
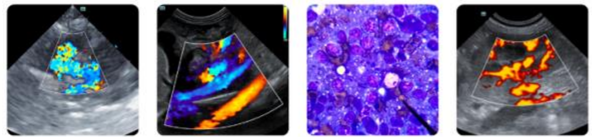
ULTRASONOGRAPHIC FINDINGS

- Minor coalesced gallbladder bile, not pathological
- Slight increased portal markings in the liver
- Age-related abdominal changes
- Volume contracted spleen
- Structurally unremarkable abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gross pathology. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.





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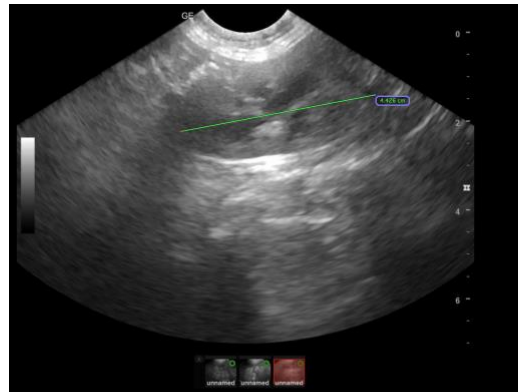

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@SonoPath.com