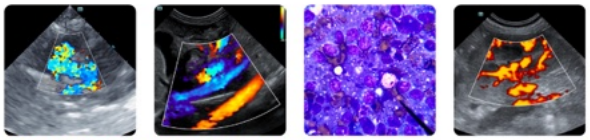


PATIENT

Eevee Depeau

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

9.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Levy

HOSPITAL NAME

Court Street VH

REFERRING VET

Dr. Levy

INVOICE

78814

DATE

6/17/26

PRESENTING CLINICAL SIGNS

History: Chronic intermittent vomiting & diarrhea (not resolved on hydrolyzed diet and pred)

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 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralization was noted. The left kidney revealed a cortical infarct at the dorsal cortex. The left kidney measured 3.5 cm. The right kidney measured 3.3 cm.

Adrenal Glands

The **adrenal glands** were not overtly visualized. However, the regions of the adrenal glands appeared unremarkable.

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.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

PATIENT

Eevee Depeau

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

9.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Levy

HOSPITAL NAME

Court Street VH

REFERRING VET

Dr. Levy

INVOICE

78814

DATE

6/17/26

Gastrointestinal

The **stomach** presented concentric wall thickening measuring up to 0.6 cm with minor fluid filled lumen. Variable small intestinal thickening was noted with muscularis hypertrophy. The colon was unremarkable with normal curvilinear mural patterns and content.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

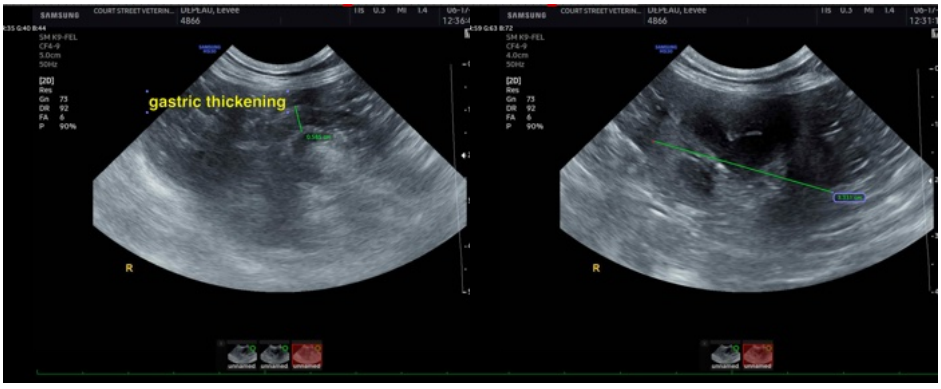
ULTRASONOGRAPHIC FINDINGS

Gastric and small intestinal thickening, potential emerging round cell neoplasia versus acute on chronic inflammatory bowel.

Mild to moderate degenerative renal changes with infarcts in the left kidney.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full thickness gastrointestinal surgical biopsies would be ideal in this patient for further definition. Empirical treatment for inflammatory bowel and possible low-grade pancreatitis is indicated. The prednisone may be suppressing a more significant presentation from a sonographic perspective. Acute on chronic inflammatory bowel, partially suppressed lymphoma and occult FIP are all potentials.



PATIENT

Eevee Depeau

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Spayed female

AGE

10 years

WEIGHT

9.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Levy

HOSPITAL NAME

Court Street VH

REFERRING VET

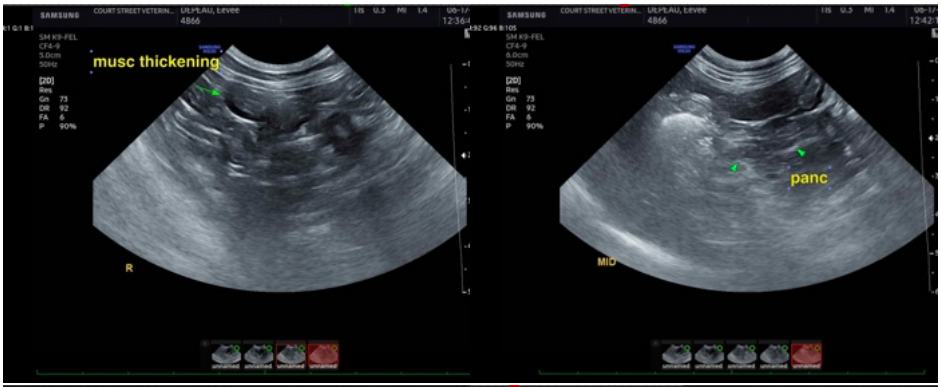
Dr. Levy

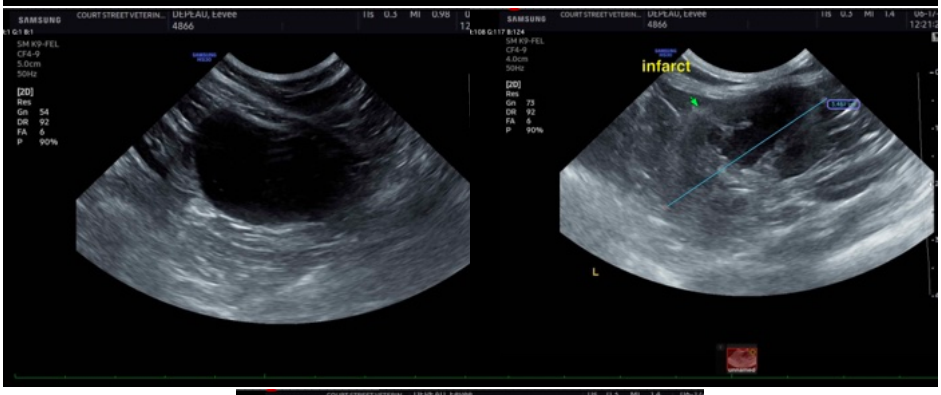
INVOICE

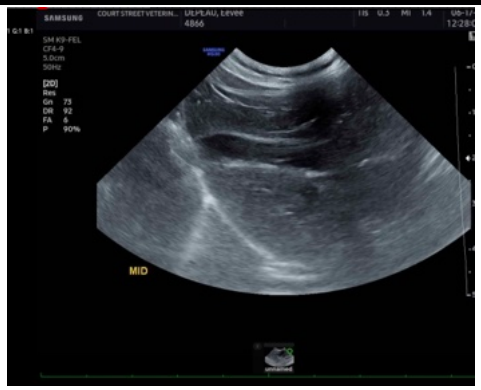
78814

DATE

6/17/26







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 of SonoPath.com

info@SonoPath.com