

**PATIENT PRESENTING CLINICAL SIGNS**

Sandy Fike History: Chronic abdominal pain when urinating, defecating. Medication: Buprenex, Metacam, K Citrate

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Rodent **Urinary System**

**BREED** The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. A minor amount of debris was noted. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

Guinea Pig

The uterus was unremarkable and measured 0.3 cm.

**SEX**

Spayed Female

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. Slight, hyperechoic medullary rim sign was noted with minor, pinpoint, non-obstructive mineralization. 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. Pinpoint renal mineralization was noted. The right kidney measured 1.76 cm and the left kidney measured 1.74 cm.

**AGE**

2020

**WEIGHT**

0.88 kg

**Adrenal Glands**

The **adrenal glands** were not visualized.

**INTERPRETED BY**

Eric Lindquist, DMV  
 DABVP, Cert. IVUSS

**Spleen**

The visible **spleen** was uniform with no evidence of pathology.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**Liver**

The **liver** revealed slightly increased portal markings and a minor amount of remodeling. The patient likely has a history of inflammatory hepatopathy. The gallbladder was unremarkable.

**HOSPITAL NAME**

Cherryville AH

**Gastrointestinal**

**REFERRING VET**

Dr. Myers

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was ingesta and gas noted in the stomach. 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.

**INVOICE**

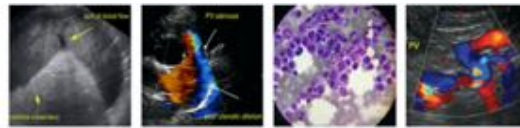
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**Pancreas**

**DATE**

1/11/23

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**

Sandy Fike

**ULTRASONOGRAPHIC FINDINGS**

Mild hepatic remodeling. Likely history of inflammatory hepatopathy.

**SPECIES**

Rodent

Minor bladder debris without overt calculi.

Pinpoint renal mineralization.

**BREED**

Guinea Pig

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a potential for underlying UTI or inflammatory debris. Given the patient's history in this patient if the abdominal pain was episodic then the patient may have passed a small calculus, yet no obstructive disease was noted at this time. Mineralization in the kidneys was minor and non-obstructive. Underlying UTI may be playing a role. However, structurally the abdomen appears stable. The patient likely has a history of inflammatory hepatopathy given the minor hepatic remodeling. There was no evidence of neoplasia. Other causes of abdominal pain such as orthopedic/spinal pain should be considered in this patient.

**AGE**

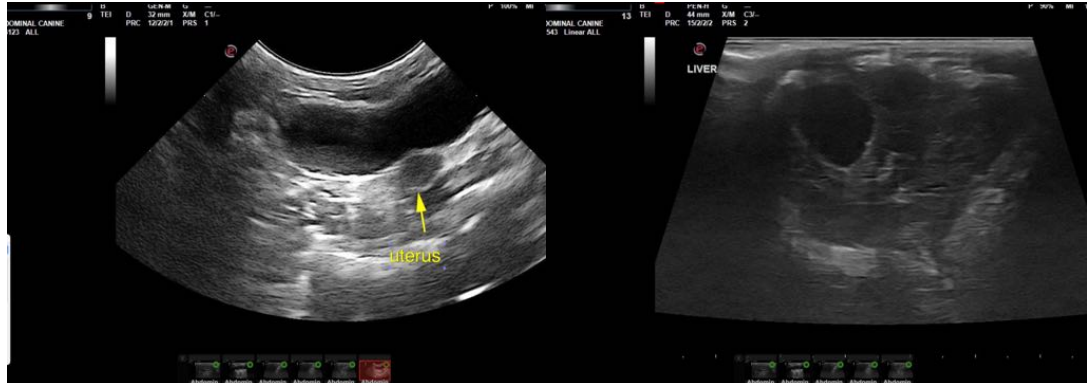
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**WEIGHT**

0.88 kg

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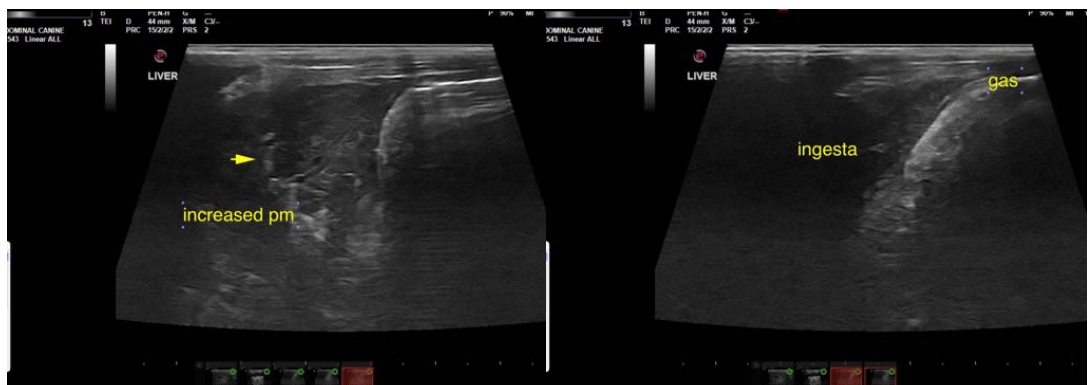


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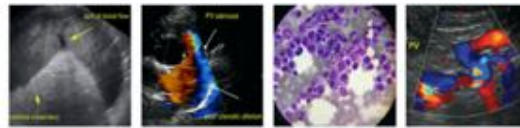
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**PATIENT**

Sandy Fike

**SPECIES**

Rodent

**BREED**

Guinea Pig

**SEX**

Spayed Female

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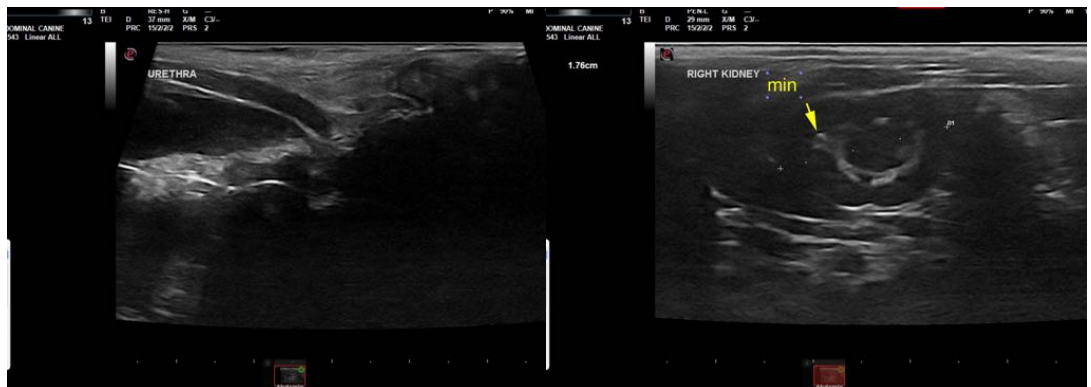
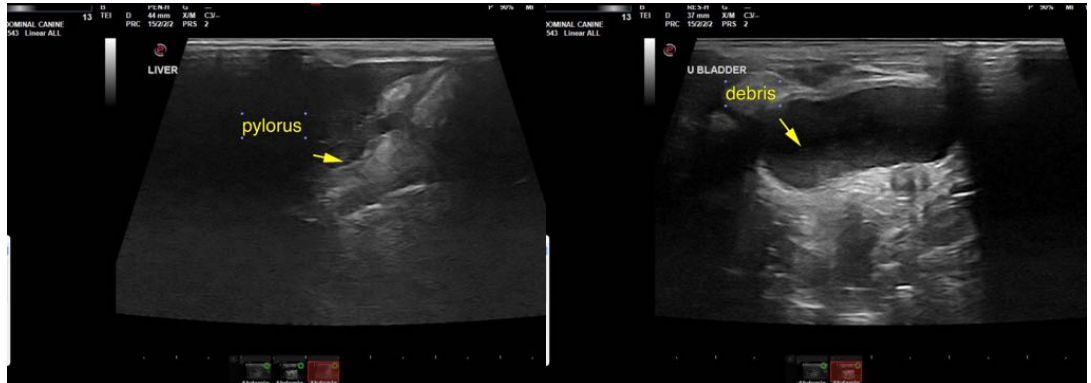
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**DATE**

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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, Cert. IVUSS, CEO of SonoPath.com  
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