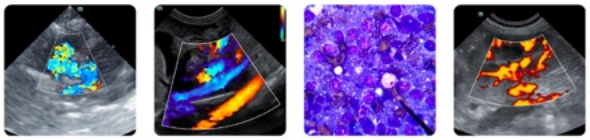


PATIENT

Callie Bland

SPECIES

Canine

BREED

Miniature Poodle

SEX

Spayed female

AGE

12 years

WEIGHT

6.6 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Salmon, DVM

HOSPITAL NAME

TotalBond VH Forestbrook

REFERRING VET

Dr. Salmon

INVOICE

70193

DATE

1/15/26

PRESENTING CLINICAL SIGNS

History: 12 year old female spayed mini poodle. Has history of choleliths, renoliths, renal mineralization, uroliths. On Denamarin, ursodiol. Imaging to assess gall bladder and ensure gallstones not organizing into mucocele and no evidence of cholecystitis.
Abnormal PE/Chem/CBC/UA Results: Labs WNL except hematuria

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. Mineralization was noted in the kidneys. The right kidney measured 3.6 cm. The left kidney measured 3.35 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 right adrenal gland measured 0.4 cm in width. The left 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.

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. Gallbladder calculi were noted, grouping of which measured 1.25 cm and was non-obstructive at the time of the sonogram. The duodenal papilla and common bile duct were free of evident pathology.

PATIENT

Callie Bland

SPECIES

Canine

BREED

Miniature Poodle

SEX

Spayed female

AGE

12 years

WEIGHT

6.6 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Salmon, DVM

HOSPITAL NAME

TotalBond VH Forestbrook

REFERRING VET

Dr. Salmon

INVOICE

70193

DATE

1/15/26

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. 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

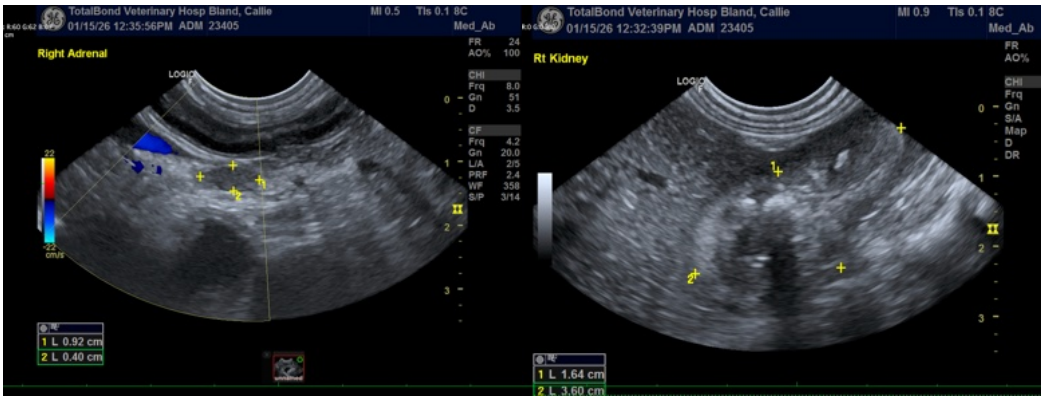
Nephrolithiasis, no evidence of bladder calculi.

Renal calculi, non-obstructive.

Non-obstructive gallbladder calculi.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I cannot rule out deep pelvic urethral pathology. Further imaging in SDEP 3 position would be ideal to ensure that underlying pathology is not an issue. Ursodiol therapy can be considered in an attempt to dissolve the choleliths. However, this is highly variable in effectiveness from patient to patient. The patient is likely periodically passing small calculi, yet no obstructive disease is noted at this time.



PATIENT

Callie Bland

SPECIES

Canine

BREED

Miniature Poodle

SEX

Spayed female

AGE

12 years

WEIGHT

6.6 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Emily Salmon, DVM

HOSPITAL NAME

TotalBond VH Forestbrook

REFERRING VET

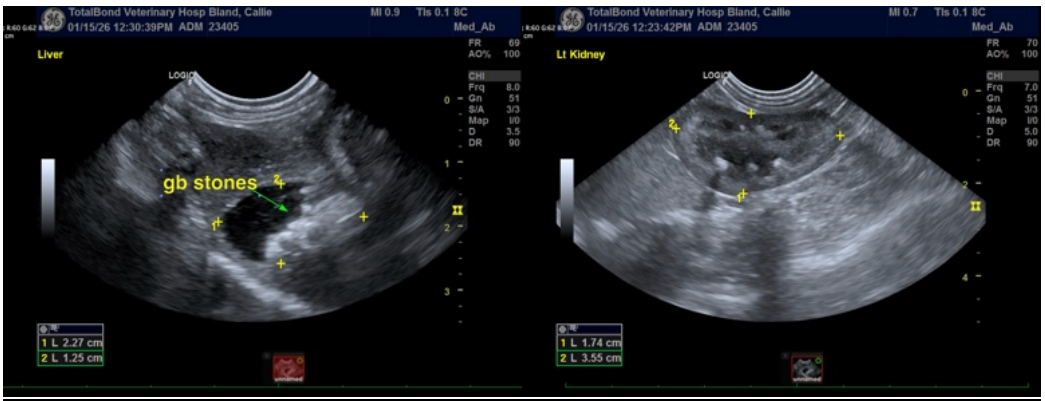
Dr. Salmon

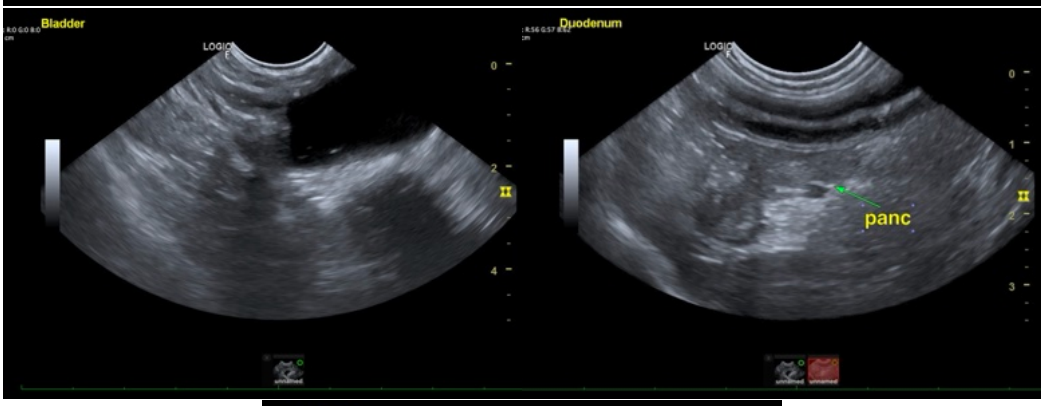
INVOICE

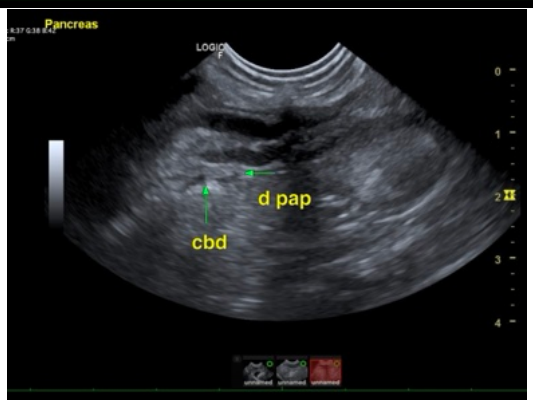
70193

DATE

1/15/26







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