



PATIENT

Jax Bludd

SPECIES

Canine

BREED

American Bully x

SEX

Neutered Male

AGE

9 Years

WEIGHT

46.4 kg

INTERPRETED BY

Eric Lindquist, DMV,
 DABVP (CFM), Cert.
 IVUSS

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Acton VC

REFERRING VET

Dr. Poremba

INVOICE

72911

DATE

1/2/26

PRESENTING CLINICAL SIGNS

P presented in October and again November for not being himself, whining, vomiting, seeming stiff and sore, bloodwork both times was unremarkable except tT4 was low so patient was started on Metacam for arthritis and levothyroxine -Presented on December 22nd for being much worse, not eating, lethargic, lost a ton of weight (lost 6kg since October), full bloodwork, urinalysis, and a fecal occult blood was run because of dark stool -Bloodwork was mostly unremarkable except tT4 was now elevated; Metacam was discontinued and levothyroxine dose was lowered, and sucralfate was prescribed -Fecal occult blood was negative, urinalysis showed blood and a UTI for which a Convenia injection was given - As of now, P is no better, lethargic and not eating but has stopped vomiting (is on Cerenia) Current Medications Gabapentin 600mg BID, Cerenia 80mg SID, Convenia injection on the 29th

Abnormal PE/Chem/CBC/UA Results: Primary Question to Be Answered in This Exam Why is Jax so lethargic and not eating?

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 3.0 cm beyond the cystourethral junction.

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. Right kidney measured 8.0 cm. Left kidney measured 8.14 cm. Stable infarct noted at the dorsal cortex of the left kidney.

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. Left measured 3.0 cm x 0.68 cm at the caudal pole and 0.54 cm at the cranial pole. Right measured 2.95 cm x 1.69 cm at the cranial pole and 0.83 cm at the caudal pole.

Spleen

The **spleen** was folded upon itself cranially. Parenchyma was uniform.

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. Hyperechoic lipid plaques noted, measuring up to 1.6 cm. 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.



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Gastrointestinal

The **stomach** was empty, with normal wall detail noted. The small intestine was empty. The colon presented normal stool.

Pancreas

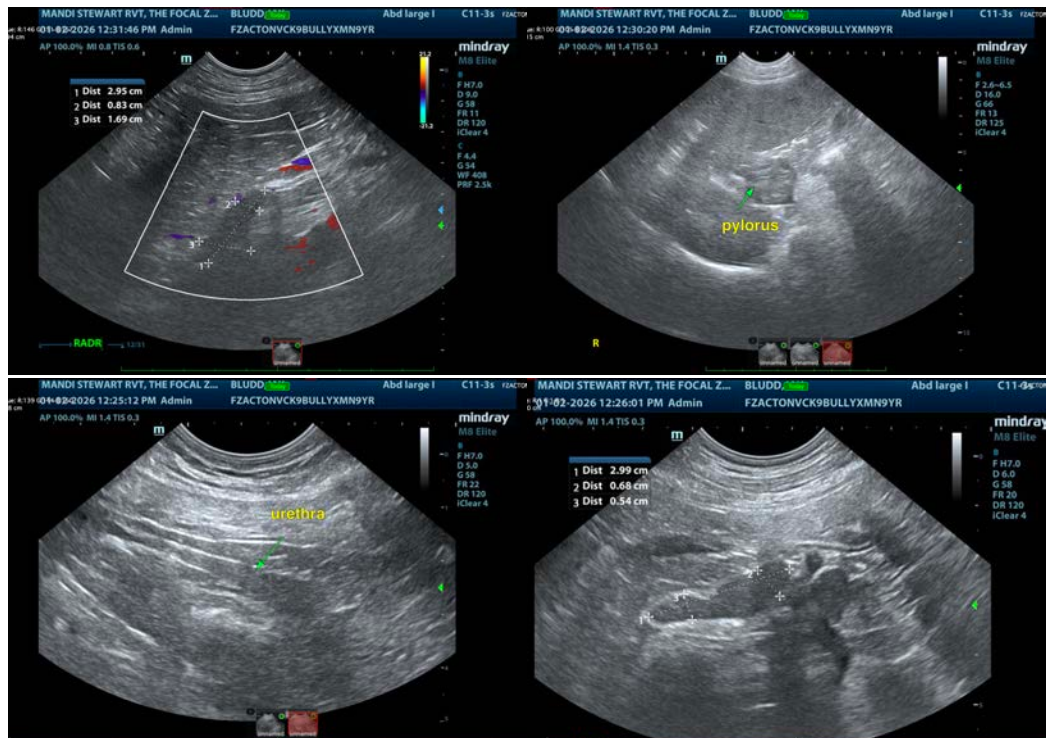
Minor heterogeneous parenchymal changes noted in the right **pancreatic** base.

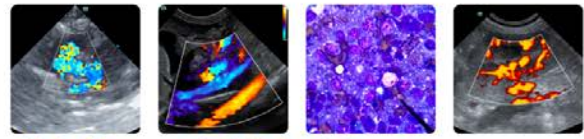
ULTRASONOGRAPHIC FINDINGS

- Minor heterogeneous right pancreatic base.
- Age related hepatic changes.
- Folded spleen.
- Empty upper GI tract with normal stool consistency.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Structurally unremarkable abdomen. No evidence of pathology directly related to the weight loss. Supportive care for GI upset warranted, given the vomiting. However, other causes of the clinical signs such as orthopedic/spinal pain or similar should be considered. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.





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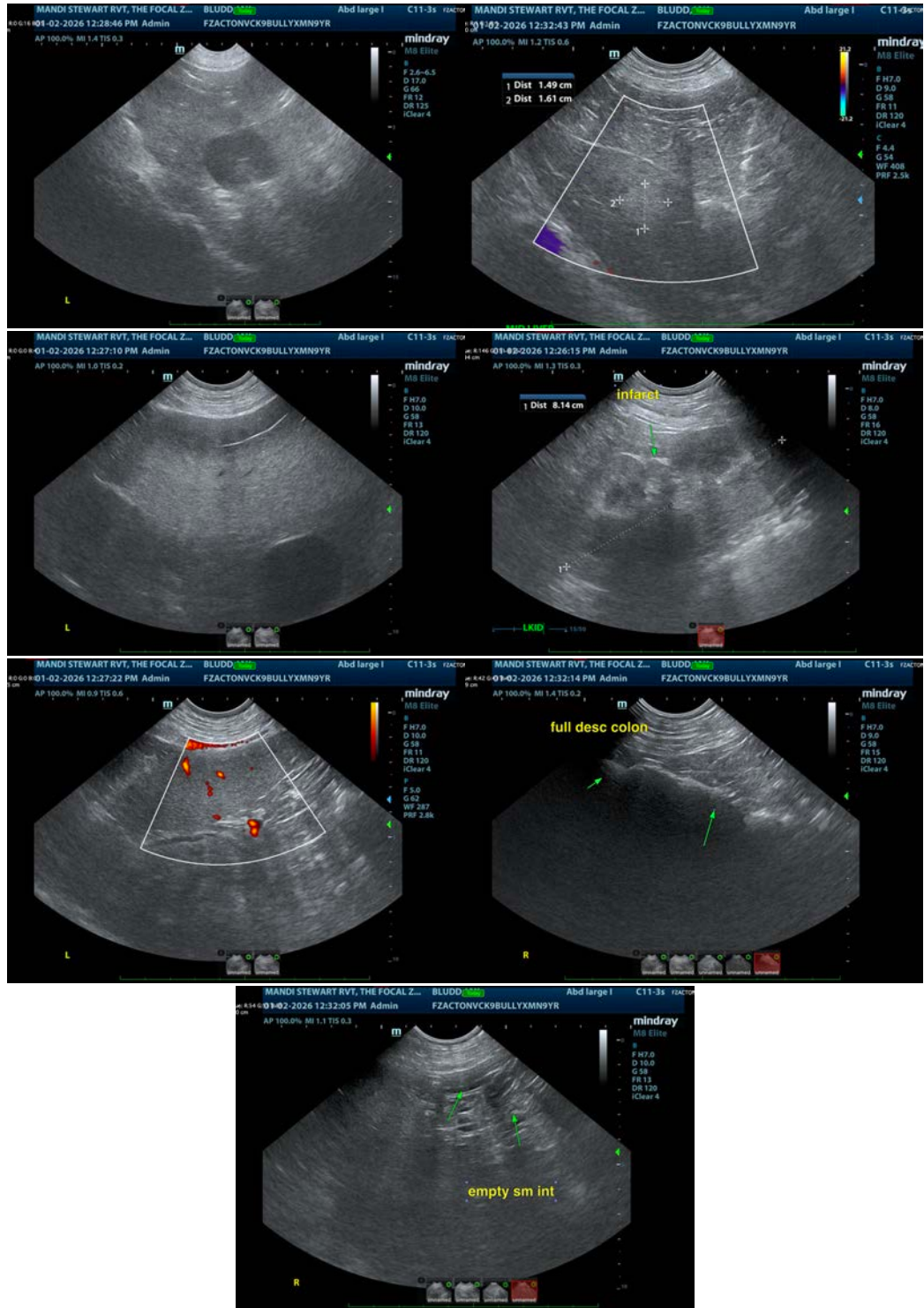
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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