



**PATIENT**

Bella Rodriguez

**SPECIES**

Canine

**BREED**

Havanese

**SEX**

Spayed Female

**AGE**

10 Years 8 Months

**WEIGHT**

16 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Vincent Ravancho, CVT

**HOSPITAL NAME**

Packanack Animal  
Hospital

**REFERRING VET**

Dr. Pearsall

**INVOICE**

72648

**DATE**

1/30/26

**PRESENTING CLINICAL SIGNS**

Hx Alk Phos climbing +rad consult found hepatomegaly. Hx of suspected atopy vs food allergy. Diffuse erythema + periocular dermatitis. Suspected lower airway dz hx

Current Medications: Apoquel, Cefpodoxime, Gaba, Traz

Abnormal PE/Chem/CBC/UA Results: Alk Phos 373 Neutrophilia 11400/uL USG: 1.026

**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. Left kidney measured 4.8 cm. Right kidney measured 4.13 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. Right measured 1.74 cm x 0.86 cm at the cranial pole and 0.23 cm at the caudal pole. Left measured 1.5 cm x 0.50 cm.

**Spleen**

The **spleen** revealed a hyperechoic lipid plaque, not pathological. The spleen was otherwise unremarkable.

**Liver**

The **liver** was slightly enlarged yet uniform, essentially normal variant. The gallbladder was unremarkable.

**Gastrointestinal**

Trace amount of ingesta 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.

**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



**PATIENT**

Bella Rodriguez

**SPECIES**

Canine

**BREED**

Havanese

**SEX**

Spayed Female

**AGE**

10 Years 8 Months

**WEIGHT**

16 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Vincent Ravancho, CVT

**HOSPITAL NAME**

Packanack Animal  
Hospital

**REFERRING VET**

Dr. Pearsall

**INVOICE**

72648

**DATE**

1/30/26

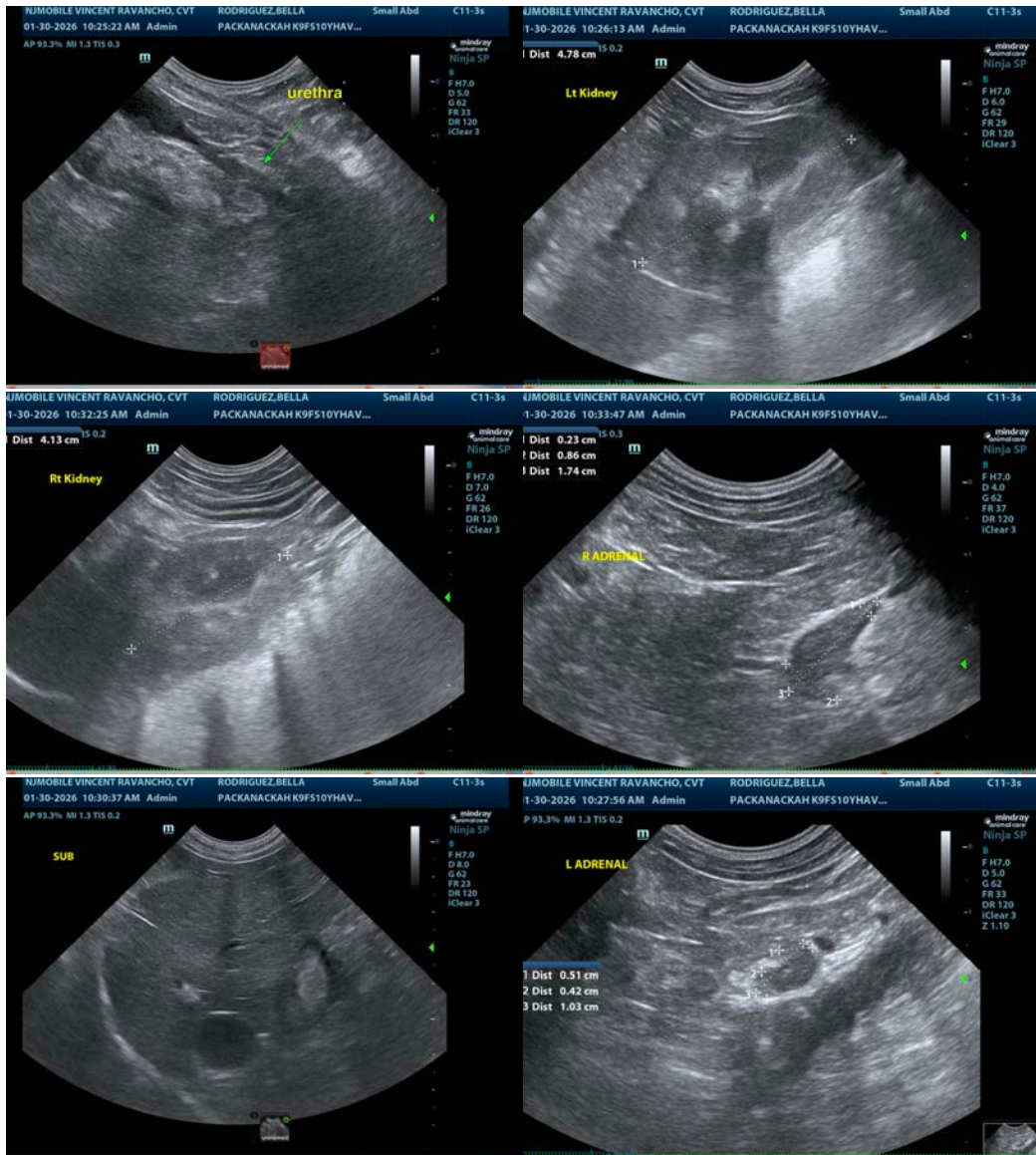
upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

**ULTRASONOGRAPHIC FINDINGS**

- Benign abdomen with age related changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of pathology.





**PATIENT**

Bella Rodriguez

**SPECIES**

Canine

**BREED**

Havanese

**SEX**

Spayed Female

**AGE**

10 Years 8 Months

**WEIGHT**

16 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Vincent Ravancho, CVT

**HOSPITAL NAME**

Packanack Animal  
Hospital

**REFERRING VET**

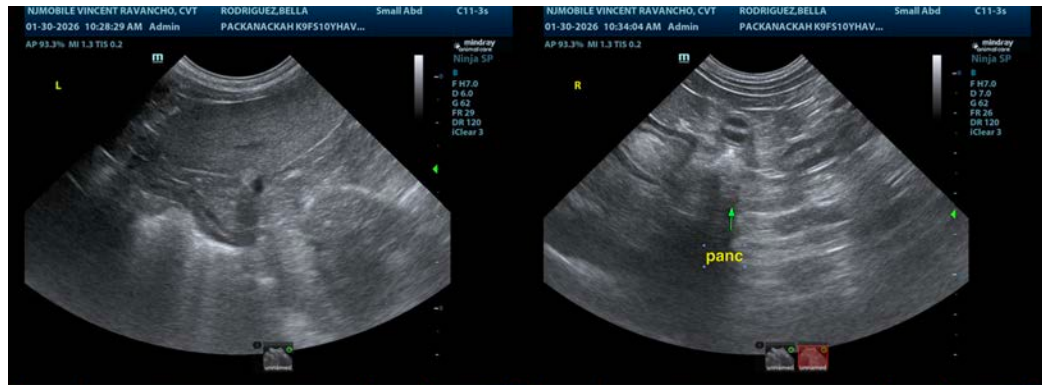
Dr. Pearsall

**INVOICE**

72648

**DATE**

1/30/26



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, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)