



DATE PRESENTING CLINICAL SIGNS

01/30/26 Patient History: Reoccurring UTI, elevated liver enzymes.

PATIENT Current Medications: None currently. Was on Amoxi/clav62.5mg BID and Carprofen 25mg 1/2 BID
Labwork Results: Labwork attached, reported as: ALT-159U/L, Alk Phos 868 U/L

Sophia Stuart Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

SPECIES Imaging Performed by: Rachel Brillhart, RDMS.

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Shih Tzu

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.

SEX

Spayed Female

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex. Dystrophic mineralization was noted and non-obstructive at this time. The left kidney measured 3.7 cm in length. The right kidney measured 4.06 cm in length. A slight cortical infarct was noted in the dorsal cortex of the right kidney.

AGE

3/5/14

WEIGHT

11 pounds

Adrenal Glands

INTERPRETED BY

The **left adrenal gland** was 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 left adrenal gland measured 1.57 cm x 0.66 cm width at the caudal pole and 0.58 cm width at the cranial pole.

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The **right adrenal gland** revealed an isoechoic nodule at the cranial pole measuring 0.85 cm x 0.68 cm. The right adrenal gland measured 1.76 cm x 0.82 cm width at the cranial pole and 0.53 cm width at the caudal pole.

Madonna Veterinary
Clinic

Spleen

REFERRING VET

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 were noted.

Dr. Smith

INVOICE

13486

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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. The vena cava and the aorta appeared unremarkable.

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 mild 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.

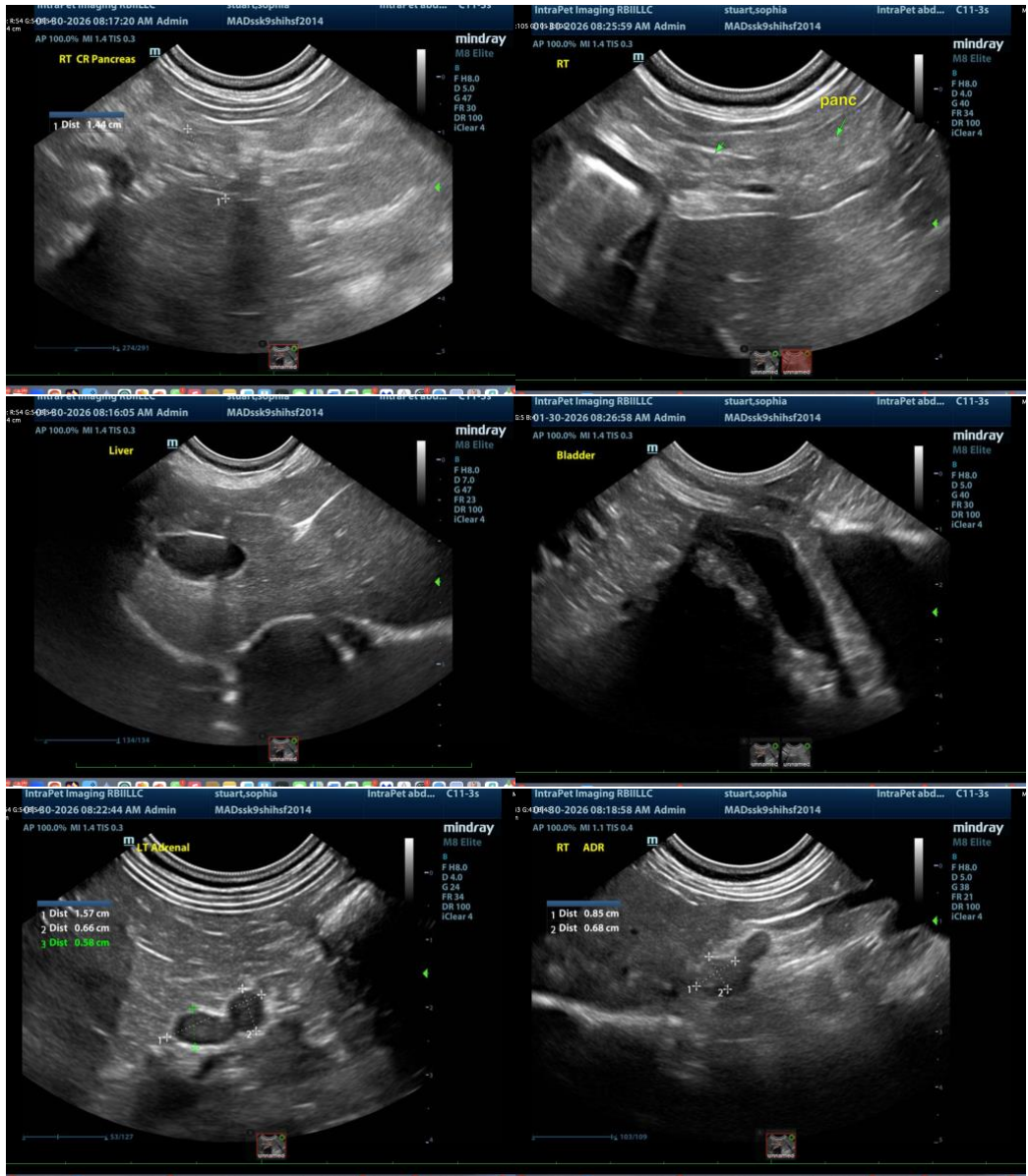
ULTRASONOGRAPHIC FINDINGS

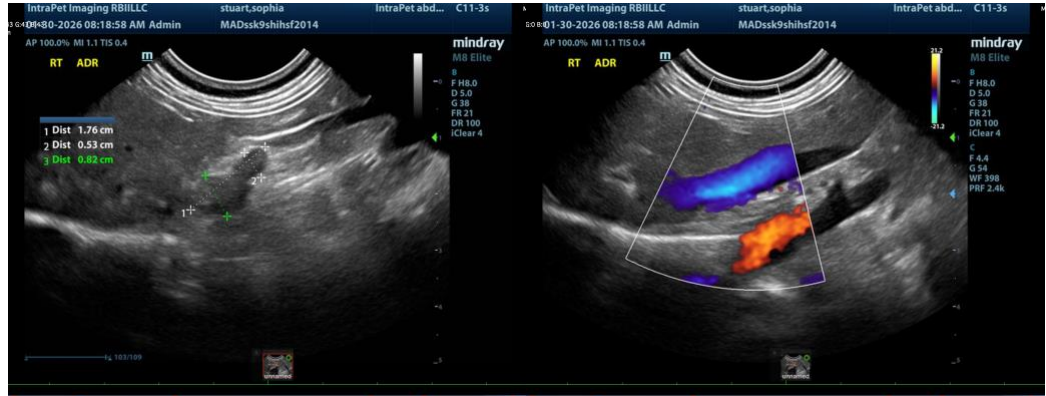
- Nonspecific hepatic remodeling.
- Age-related renal changes with nephrolithiasis- nonobstructive.
- Nodular right adrenal gland- hyperplasia likely, emerging round cell neoplasia, emerging carcinoma, pheochromocytoma cannot be ruled out.
- Age-related pancreatic remodeling.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial blood pressure is recommended. UTI may be complicated by underlying and potential embedded infection with the nephrolithiasis. Otherwise, recurrent sources of infection such as recessed vulva and urine pooling should be investigated as well in the vaginal vault.







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.

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