



PATIENT

Reese Blenski

SPECIES

Canine

BREED

Morkie

SEX

Spayed Female

AGE

9 Years

WEIGHT

12.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Jenni Tudini,
MRCVS, SDEP Cert
(Abdo)

HOSPITAL NAME

East Aurora VH

REFERRING VET

Dr. Holly Guenther

INVOICE

35310

DATE

1/8/26

PRESENTING CLINICAL SIGNS

History: Patient hasn't been eating well for about a week but did eat yesterday a little. Fasted overnight per owner. She was defecating in the house a couple weeks ago and it looked like a thick tar. This happened a few times but has since stopped. Stools seem normal now but patient did have mucoid diarrhea during hospitalization today. She has vomited with a large amount of blood noted in it by owner just once. No medications prior to visit but currently on sucralfate and cerenia. She hasn't gotten into anything that they know of. She does get Interceptor monthly. Diet - Fresh Pet normally. O just started chicken and rice a few days ago. She has always been a picky eater.

Abnormal PE/Chem/CBC/UA Results: P/e: Abdomen very tense during initial exam with rDVM but this wasn't appreciated today (5 days post initial exam), no other clinically significant findings. - CBC - WNL - Chem - WNL - T4 - WNL - cPL - normal - Fecal - negative - did not get urine sample.

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 pelvic urethra was imaged 2.0 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. The left kidney measured 4.13 cm. The right kidney measured 4.56 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 left adrenal gland measured 0.72 cm x 0.51 cm. The right adrenal gland measured 1.4 cm x 0.42 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 were 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. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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Gastrointestinal

The **stomach** was mildly overdistended with chyme and prominent rugae, with no loss of mural detail. Serosa, submucosa, and muscularis appeared to be unremarkable. The small intestine and colon were unremarkable with normal curvilinear patterns and content.

Pancreas

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.

ULTRASONOGRAPHIC FINDINGS

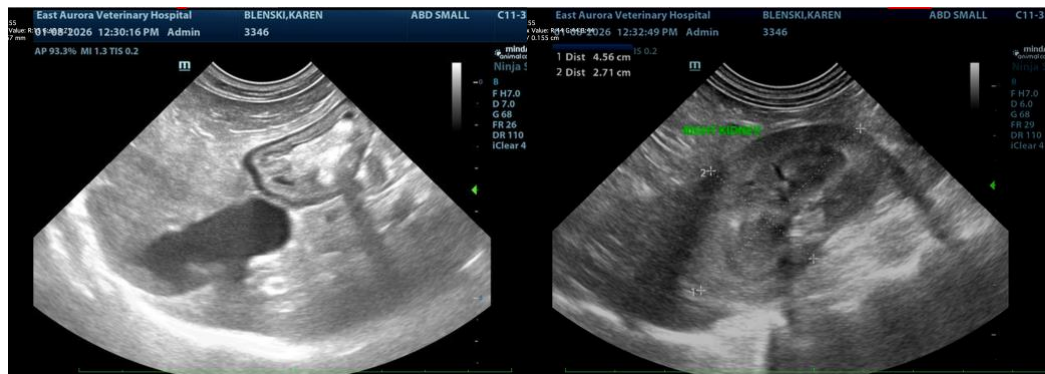
- Chronic gastritis is likely given the echogenic remodeling noted in the gastric mucosa.
- Unremarkable abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant disease. GI protectant protocol is indicated. A clinical trial of the following may prove effective:

Helicobacter/Gastritis protocol

A clinical trial of **Zithromax** (*Dogs*: 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), **Metronidazole** (10-20 mg/kg p.o. b.i.d.), **Pepcid** (0.5-1 mg/kg s.i.d.) and **Sucralfate** (0.5-2 g/dog PO) or **Omeprazole** (1 mg/kg p.o. s.i.d.) over the next 3 weeks along with a **novel-protein or hydrolyzed diet** with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.





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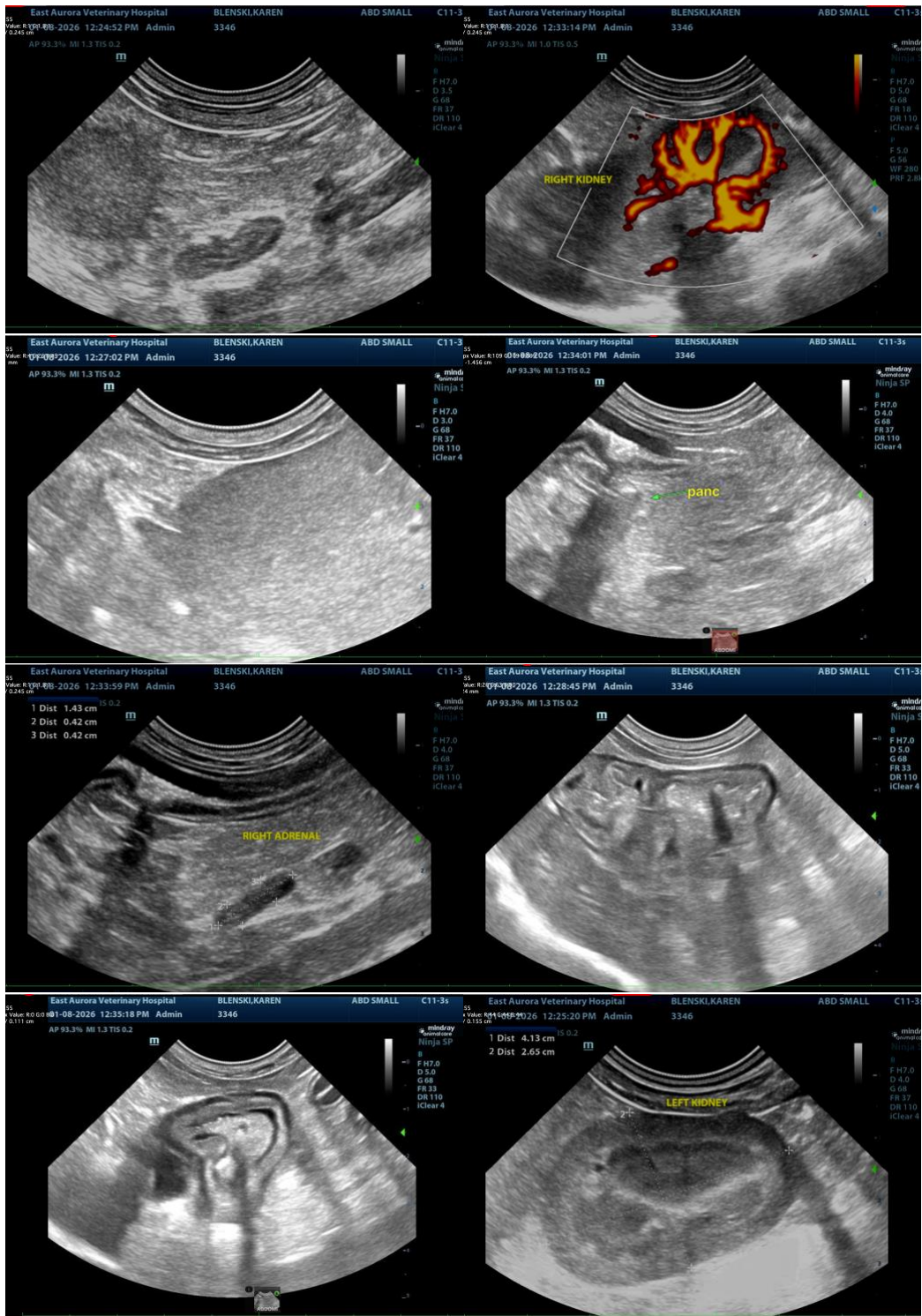
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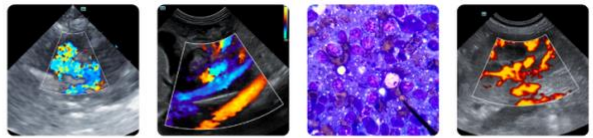
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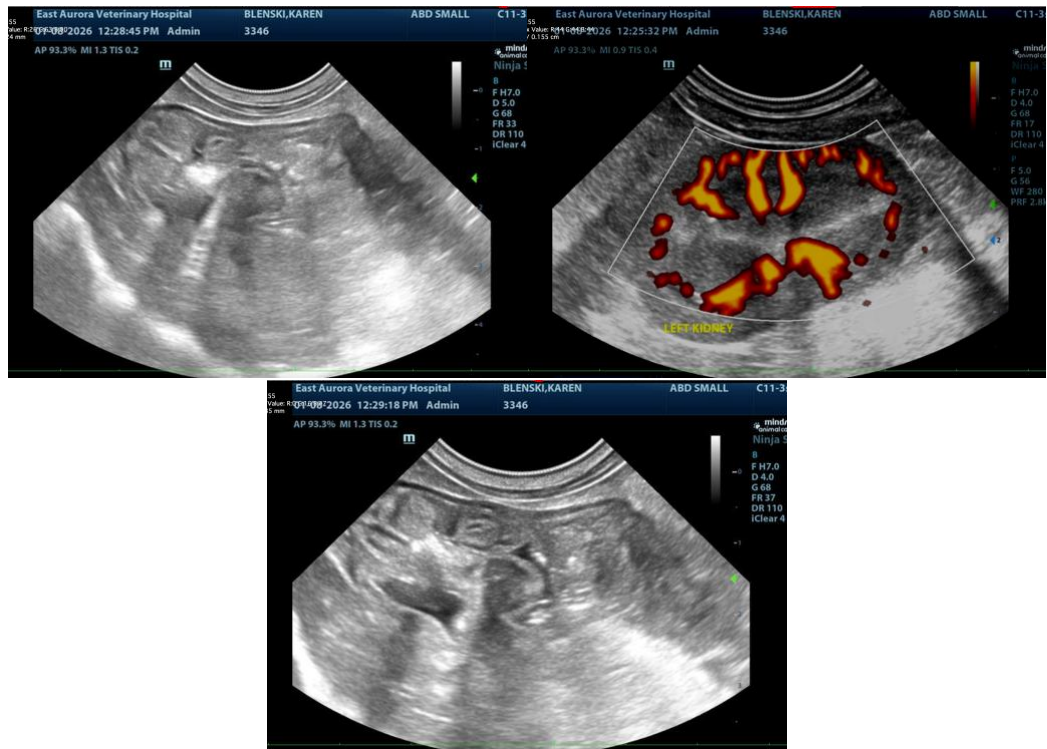
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,
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