


DATE PRESENTING CLINICAL SIGNS

11/13/25

Patient History: O began fostering pet in August. Pet presented to PetER Hunt Valley on 8/8/25 for a generalized seizure. Thoracic rads at that time were unremarkable, possible microhepatica on abdominal rads. Blood work showed elevations in ALT, ALKP, GGT. Brief ultrasound did not reveal any abnormalities, cause for seizures not identified. Pet started on Keppra and Denamarin at that time. ER recommended liver biopsy as next diagnostic step, O declined at that time. P presented to neurology on 10/20/2025 for ACTH stim and bile acids test. Bile acids test showed elevated Pre and Postprandial values. ACTH stim wnl. Pet presented for castration 11/4 and ALT, ALKP and GGT were wnl. Castration not performed.

PATIENT

Houdine Bendyna

SPECIES

Canine

BREED

Bichon Frise

SEX

Intact Male

AGE

8/6/21

WEIGHT

16 lbs

INTERPRETED BY
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HOSPITAL NAME
Banfield Pet Hospital
Timonium
REFERRING VET

Dr. Falkowski

INVOICE

71783

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 prostate was uniform at 2.2 cm.

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 right kidney measures 4.23 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 measures 1.84 cm x 0.30 cm at the caudal pole and 0.37 cm at the cranial pole. The left adrenal gland measures 1.77 cm x 0.30 cm at the caudal pole and 0.27 cm at the cranial pole.

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** was mildly subnormal in size. Hepatic width in short axis measured 2.7 cm. Portal vein revealed normal volume and branching and measured 0.56 cm. No evidence of portosystemic shunting. Intrahepatic vascular volume appeared adequate. 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.

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

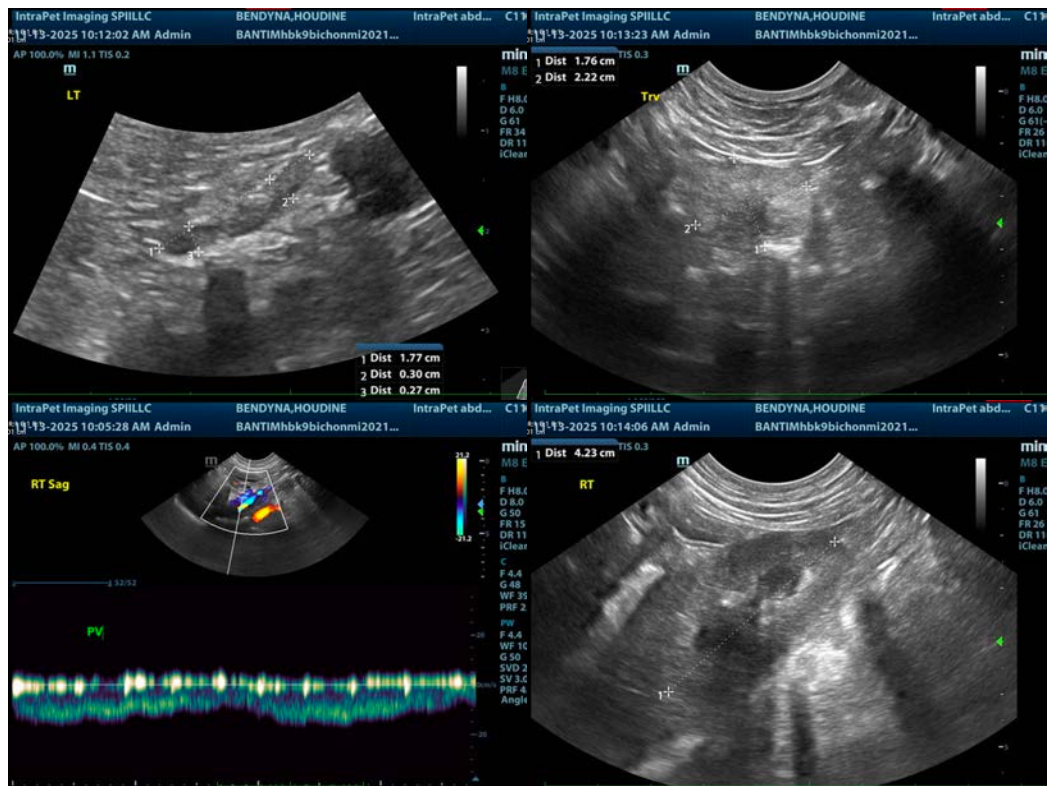
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

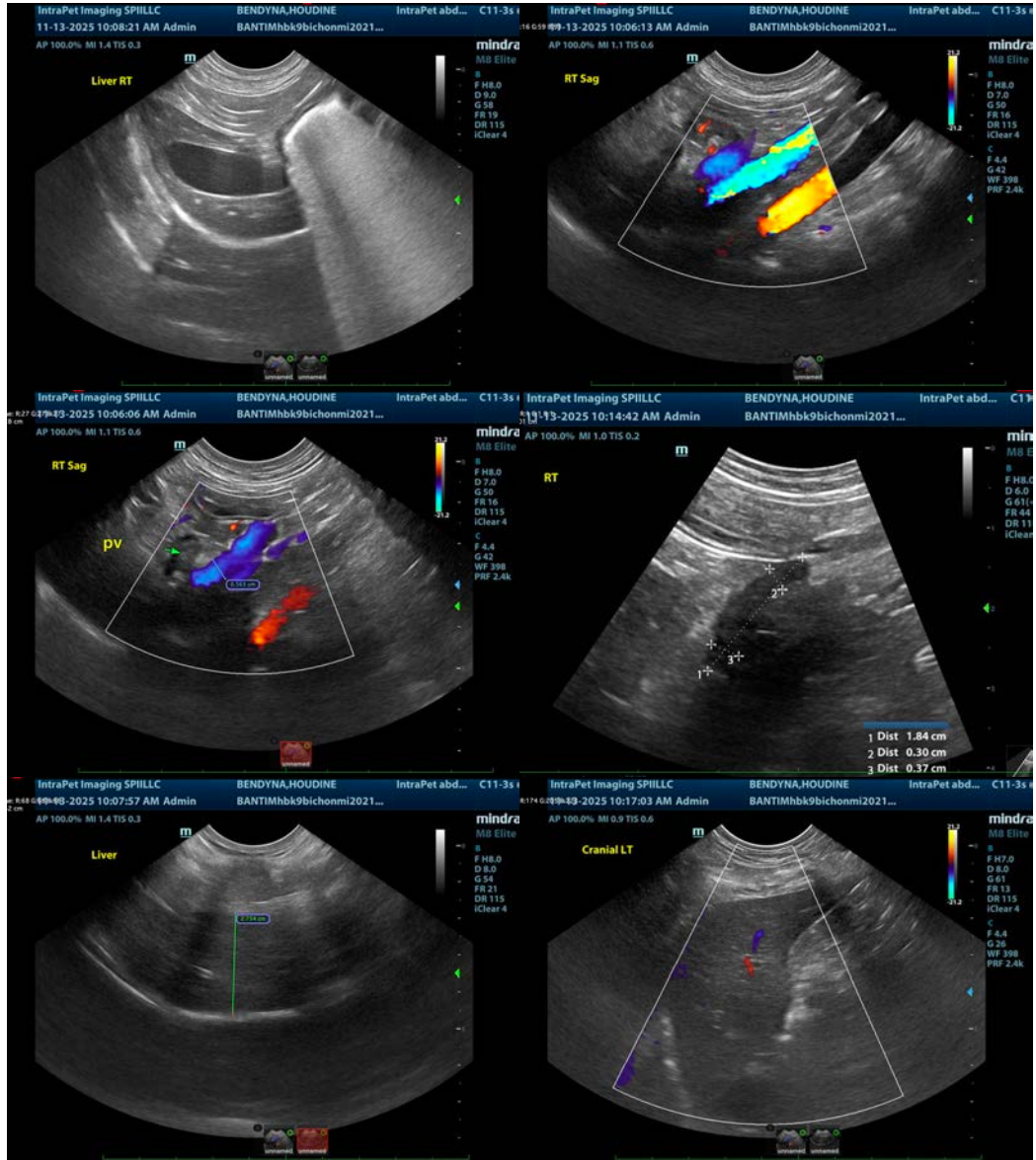
ULTRASONOGRAPHIC FINDINGS

- Microhepatica without macroscopic shunting – likely portal hypoplasia/microvascular dysplasia.
- Unremarkable abdomen otherwise.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Liver biopsy would be necessary for further definition.





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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