



## PATIENT

Felix Delara

## SPECIES

Canine

## BREED

Pit Bull

## SEX

Male

## AGE

9

## WEIGHT

67.6

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Acacia Cordes

## HOSPITAL NAME

The Ark Veterinary  
Clinic

## REFERRING VET

Dr. Acacia Cordes

## INVOICE

72203

## DATE

11/29/25

## PRESENTING CLINICAL SIGNS

Sudden onset lethargy, inappetence, possible abdominal distension/bloating - in the past 3 days. P has been stretching his abdomen as if uncomfortable. Has also had some history of polyuria (the past 1-2 months) - previous urinalysis unremarkable other than presence of some calcium oxalate crystals. Recent bloodwork 11/3/2025 unremarkable as well, hematocrit today WNL (46%). No known hx of dietary indiscretion (O is a vet tech and strictly does not give her pets human food), no hx of trauma, dietary changes. P was started on fluoxetine ~3 weeks ago for anxiety. P has not had this issue before.

Abnormal PE/Chem/CBC/UA Results: P has lost ~4 lbs since visit on 11/3 - still BCS 5/9 but weight loss has been unintentional. Sensitive on palpation of the abdomen especially caudally. Mild CaOx crystals present in urine (free catch sample) 11/3 but otherwise unremarkable - has continued to have frequent urination. Performed abdominal radiographs today - no urinary calculi present, no obvious severe mass effect, stool in rectum, empty stomach, marked bridging spondylosis, mild to moderate diffuse loss of serosal detail. Pursued ultrasound to evaluate for free fluid/masses.

## 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 **right kidney** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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, and no evidence of pelvic dilation was present. The right kidney measured 7.3 cm. The left kidney measured 6.7 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 0.50 cm. The right adrenal gland measured 1.0 cm at the cranial pole and 0.60 cm at the caudal pole.

### Spleen

The **spleen** was mildly enlarged with subtle heterogeneous parenchymal changes.

### Liver

The **liver** presented subtle heterogeneous parenchymal changes. The gallbladder was 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



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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.

**Free Abdomen**

Echogenic ascites noted throughout the abdomen.

Undifferentiated masses noted in the caudal abdomen and sublumbar space dorsal to the urinary bladder. The mass in the sublumbar space measured 7.6 cm. Origin is unclear. Multiple omental nodular changes noted throughout the abdomen.

**ULTRASONOGRAPHIC FINDINGS**

- Undifferentiated masses and nodular changes in the sublumbar space and omentum – lymphomatosis, sarcomatosis or similar suspected.
- Echogenic ascites.
- Mildly enlarged, heterogeneous spleen.
- Heterogeneous liver.
- Age related renal changes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Abdominocentesis and cytospin could be considered for further definition. The pathology is non-resectable.





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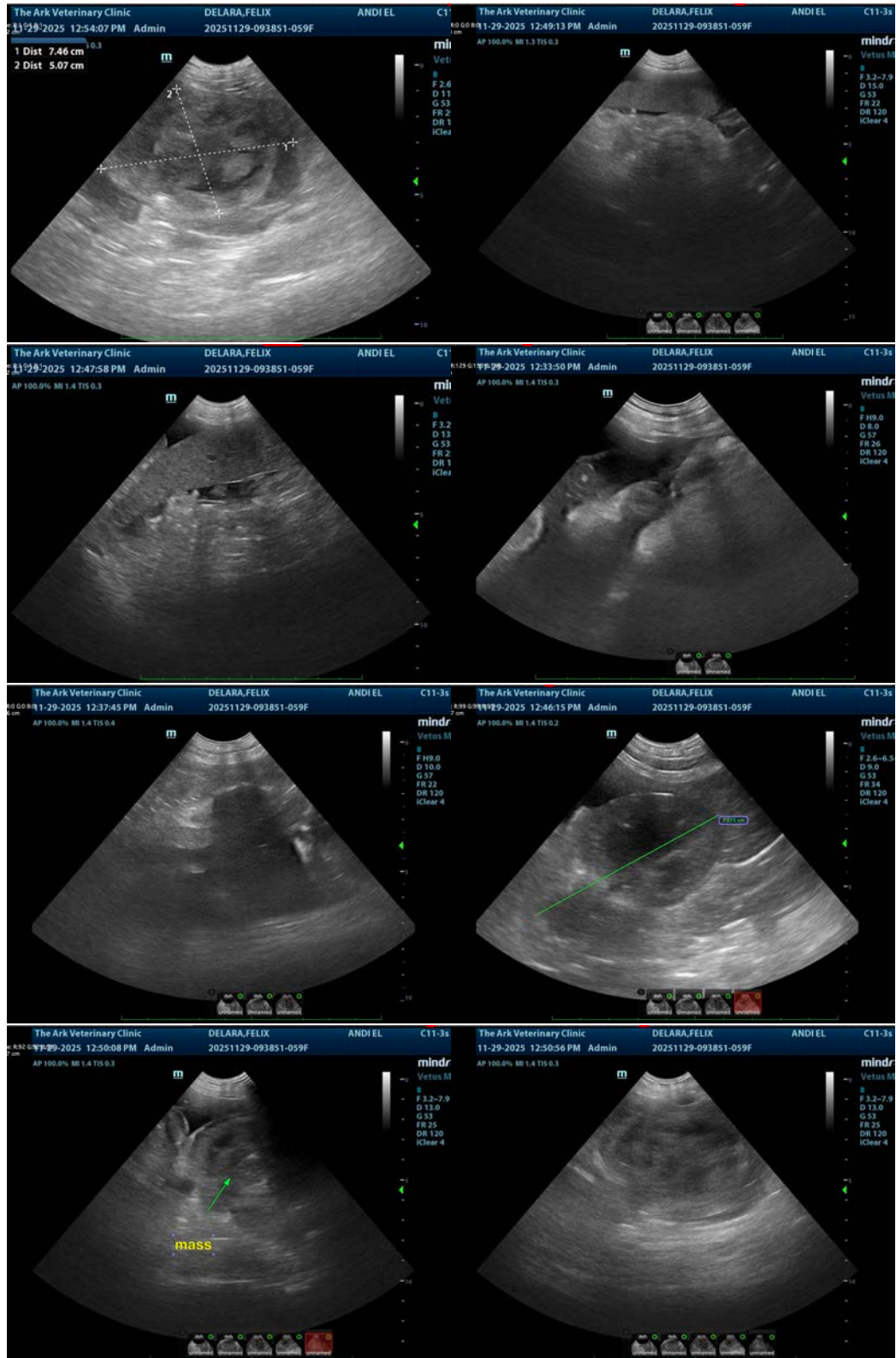
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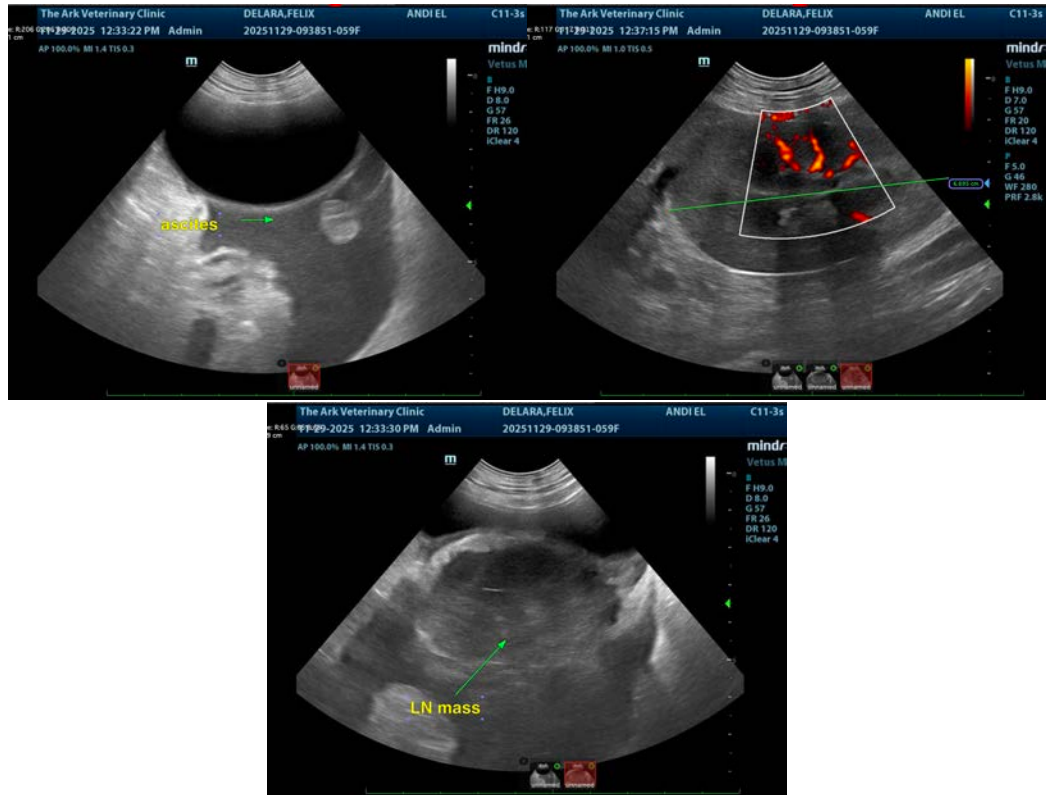
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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