



PATIENT

Sawyer Pappa

SPECIES

Canine

BREED

Mix

SEX

Neutered male

AGE

11 years

WEIGHT

63.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Chelsea Pastor

HOSPITAL NAME

Fredon AH

REFERRING VET

Dr. Grau

INVOICE

69287

DATE

12/15/25

PRESENTING CLINICAL SIGNS

History: inappetence, weight loss, lethargy, vomiting
Abnormal PE/Chem/CBC/UA Results: wasting, Lyme 4DX positive but C6 only 20, CBC normal, phos 2.1, albumin 2.5

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed apical wall thickening at 0.77 cm at moderate repletion. A mild amount of sand and suspended debris was noted. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 5.17 cm. The right kidney measured 5.17 cm.

Adrenal Glands

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 0.5 cm. The right adrenal gland was not visualized.

Spleen

The **spleen** revealed multi-focal, hypoechoic nodules. 25-gauge FNA is indicated to ensure that these are hyperplastic nodules as opposed to emerging round cell neoplasia or splenitis. The spleen was mildly enlarged with irregular contour.

Liver

The **liver** was swollen and hypoechoic with mildly increased portal markings. The gallbladder was largely empty.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. There were minor areas of luminal fluid noted. There was no evidence of



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obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable.

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.

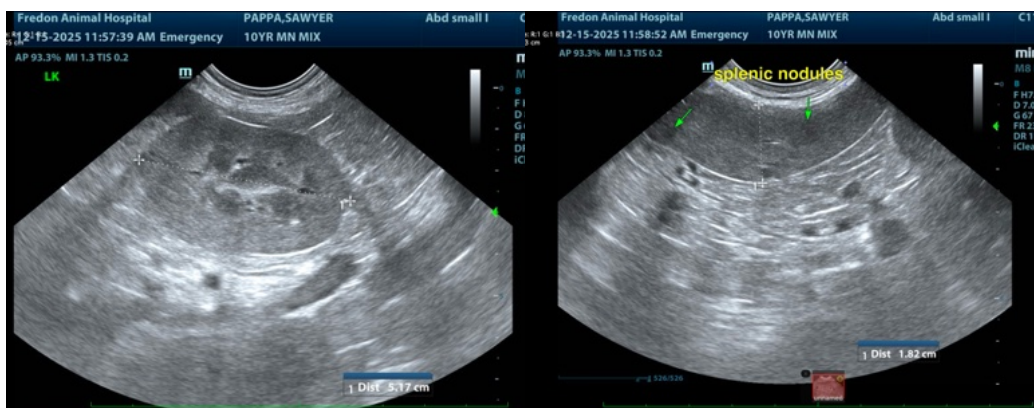
ULTRASONOGRAPHIC FINDINGS

Gastroenteritis pattern with mild splenohepatomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the low albumin protein losing enteropathy is likely. FNA of the spleen and liver is indicated. Management for gastroenteritis and PLE is recommended.

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.





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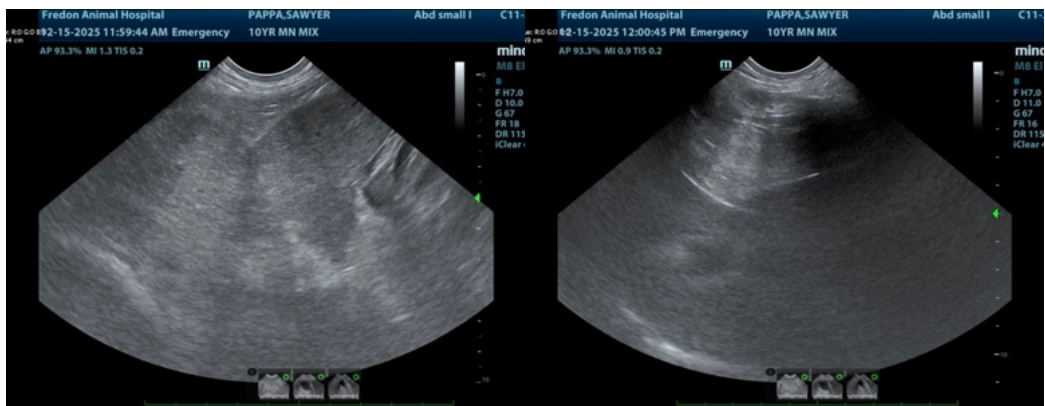
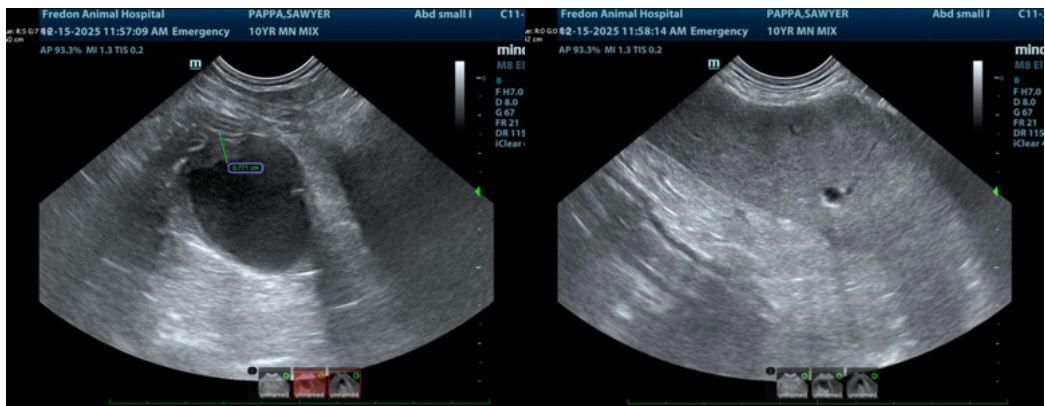
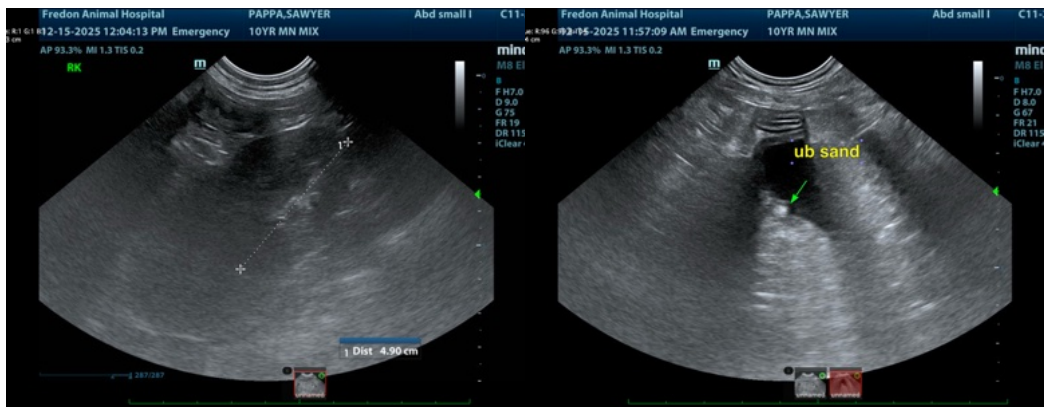
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 of SonoPath.com

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