



PATIENT

Daina Rivera

SPECIES

Canine

BREED

Yorkie

SEX

Female

AGE

8 Years

WEIGHT

10 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kimberly Carrion Rivas

HOSPITAL NAME

Consultorio Veterinario
Las Brisas

REFERRING VET

Dr. David Trautman

INVOICE

35920

DATE

12/16/25

PRESENTING CLINICAL SIGNS

History: The patient presented at the clinic with abdominal pain and loss of appetite. Her owner indicated that she experienced pain while eating and would hunch over. Her CBC and chemistry panel were within normal values, and the X-ray showed a lot of gas. She was sent home with gastrointestinal medications, but there was no improvement in the pain she was experiencing.

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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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 3.3 cm. The right kidney measured 3.37 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

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. Caudal folding of the spleen was noted.

Liver

The **liver** itself was unremarkable. The gallbladder was edematous with double layered wall.

Gastrointestinal

The **gastric** wall was mildly thickened. The duodenum was mildly thickened. The colon was unremarkable.

Pancreas

The right **pancreatic** base revealed hyperechoic changes consistent with remodeling and fibrosis. Some level of low-grade inflammation is possible.

ULTRASONOGRAPHIC FINDINGS

- Pancreatic remodeling, potential pancreatitis
- Gastroduodenitis pattern
- Edematous and double layered gallbladder wall



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- Age-related renal changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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GI protectant protocol, 24-hour NPO, and IV fluid support indicated. Other causes of pain, such as orthopedic/back pain or similar, causing anorexia, should be considered, as the changes were fairly mild.

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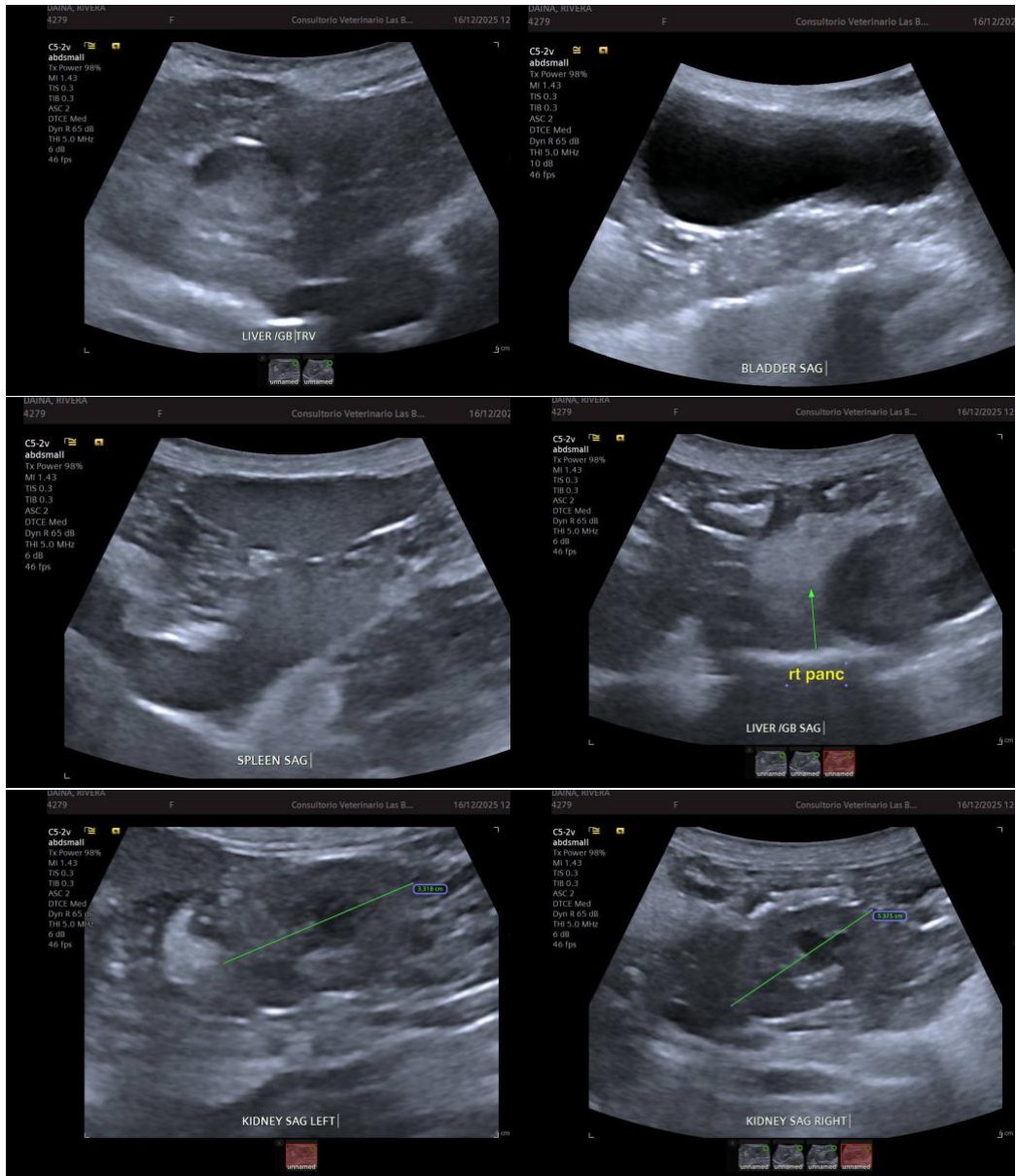
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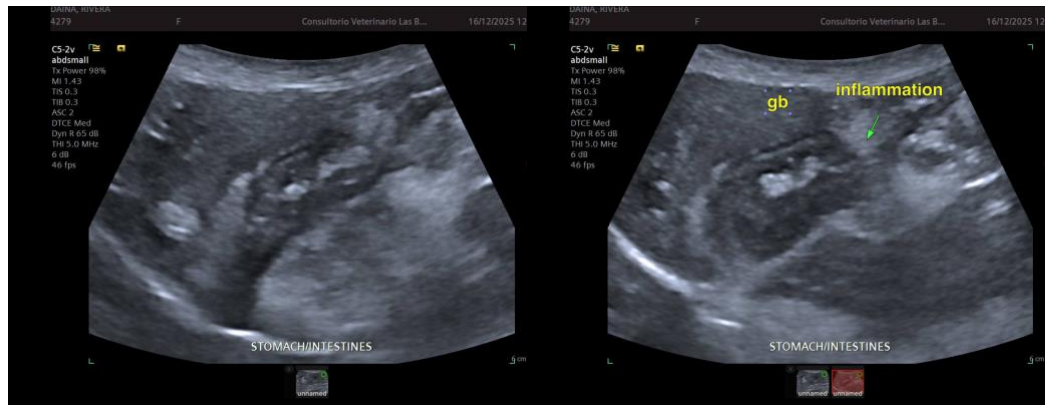
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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