



**PATIENT**

Apollo Vanberber

**SPECIES**

Canine

**BREED**

Mini Goldendoodle

**PRESENTING CLINICAL SIGNS**

Hyporexia began 11/18; improved with Cerenia -Patient presented again on 12/1 for hyporexia and vomiting; diagnostics performed and symptoms again improved with Cerenia and Omeprazole -Patient present again with bloody urine and vomiting on 12/22/22 -Small urethral calculi was hydropropulsed into bladder but vomiting continued despite Cerenia and Ondansetron given -Patient has been on prescription GI diet for > 1 year

Abnormal PE/Chem/CBC/UA Results: -PE = QAR; remainder unremarkable -CBC = 12/1/22: NAF; 12/23/22: mild dehydration -Chem panel = 12/1/22: NAF; 12/23/22: ALP <5 -Fecal = NPS -Radiographs 12/1/22 = NAF -Radiographs 12/22/23 = urethral calculi, otherwise NAF -cPL = Normal

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SEX**

**Urinary System**

MN

The urinary bladder revealed sand accumulation and small calculi, the largest of which measured 0.58 cm. The calculi were non-obstructive at the time of the sonogram. Acoustic shadowing was present in the largest calculus.

**AGE**

3yr

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 4.8 cm in length. The right kidney measured 5.07 cm in length.

**WEIGHT**

35

**Adrenal Glands**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

**Spleen**

**IMAGING PERFORMED BY**

Dr. Sanchez

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.

**HOSPITAL NAME**

Sunset Animal  
Hospital

**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.

**REFERRING VET**

Dr. Sanchez

**INVOICE**

12533ag

**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.

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**Pancreas**

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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.

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**ULTRASONOGRAPHIC FINDINGS**

- Structurally unremarkable GI tract
- Urinary bladder sand and small calculi

**SEX**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

MN

Cystotomy, retrograde flush with stone analysis and C/S is indicated.

**AGE**

3yr

**WEIGHT**

35

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Sanchez

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**REFERRING VET**

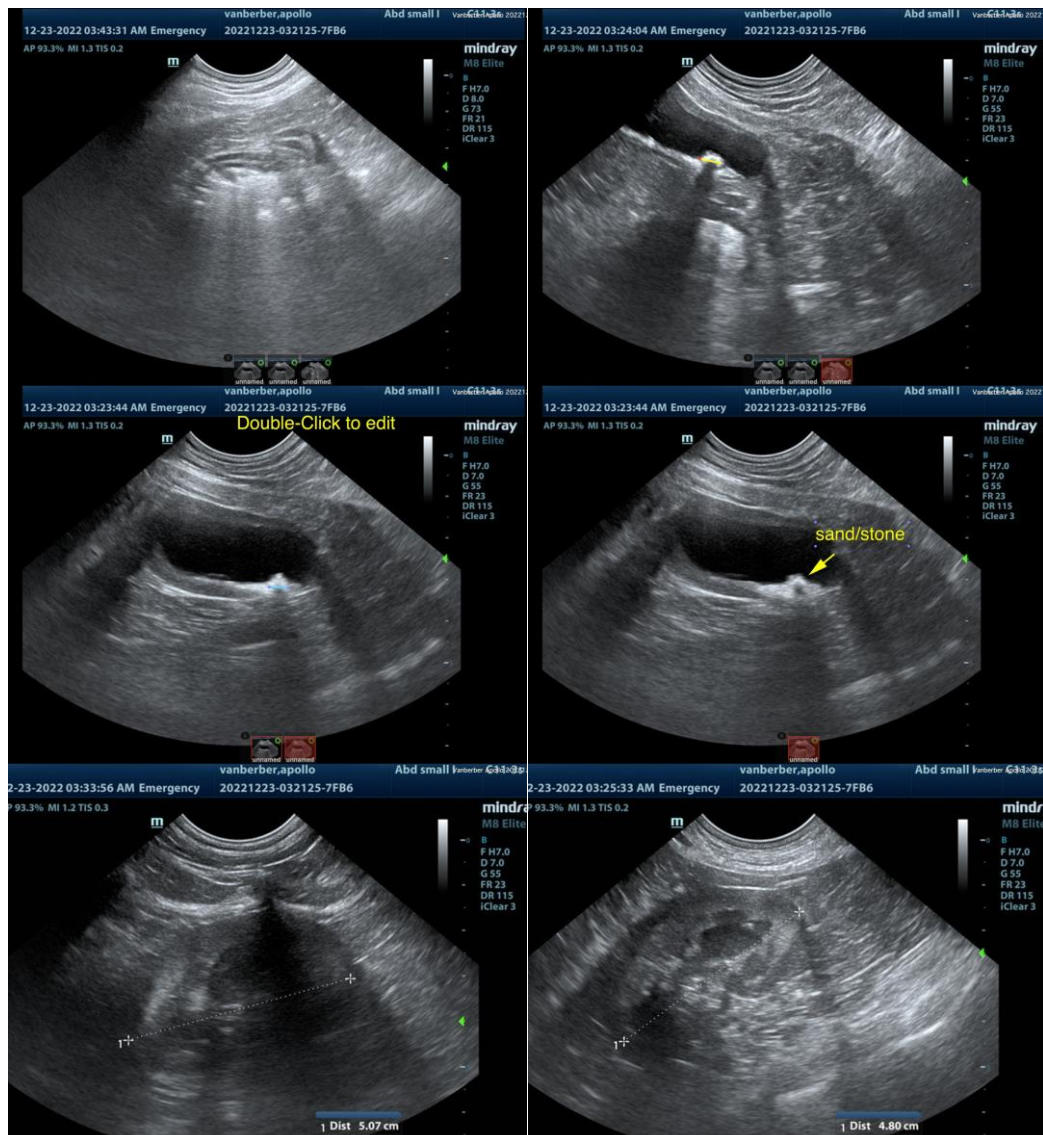
Dr. Sanchez

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

**SPECIES**

Canine

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.

**BREED**

Mini Goldendoodle

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
Eric.Lindquist@SonoPath.com

**SEX**

MN

**AGE**

3yr

**WEIGHT**

35

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**IMAGING  
PERFORMED BY**

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