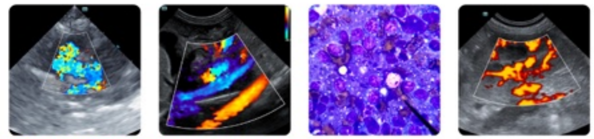


PATIENT

Olive Juice Vojtasek

SPECIES

Canine

BREED

Italian Greyhound

SEX

Spayed female

AGE

7 years

WEIGHT

6.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Honsted

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Honsted

INVOICE

69580

DATE

12/26/25

PRESENTING CLINICAL SIGNS

History: Patient presented for vomiting four times today, blood with white foam one episode of watery diarrhea patient did not want to eat this AM patient also vomited on the way to hospital patient has history of GI issues and 2-3 heart murmur
Abnormal PE/Chem/CBC/UA Results: CPL- abnormal

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 was noted. Ureteral papillae were normal.

The **kidneys** were relatively normal in size and contour with pelvic mineralization measuring up to 0.54 cm in the right kidney. The left kidney measured 4.1 cm and the right kidney measured 4.5 cm.

Adrenal Glands

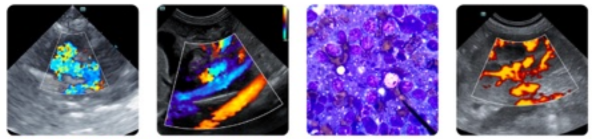
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.77 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland was visualized obliquely and measured 0.5 cm.

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 was noted.

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.



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Gastrointestinal

Examination of the **gastrointestinal tract** revealed an unremarkable stomach regarding structure. There were minor areas of luminal fluid noted. Curvilinear patterns were retained throughout the gastrointestinal tract. This is consistent with response to irritation. Fluid filled small intestine and colon were with hyperperistalsis. There was no overt obstruction.

Pancreas

The **pancreas** revealed slight heterogenous changes, yet no significant disruption of architecture was noted.

ULTRASONOGRAPHIC FINDINGS

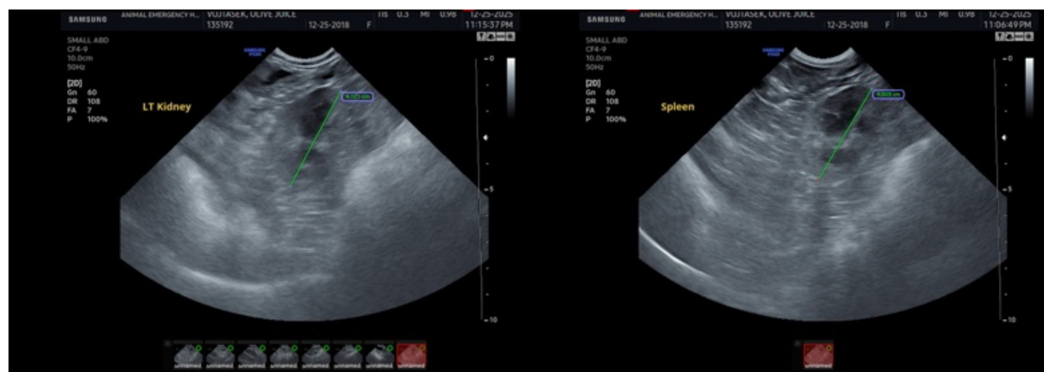
Enterocolitis pattern.

Low-grade pancreatitis is possible, yet not the primary issue.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

24 hour n.p.o., GI protectants and management for enterotoxins are all indicated. If clinical signs persist a recheck sonogram is recommended.

Dietary indiscretion, food intolerance, structurally significant inflammatory bowel or occult parasitism and occult Addison's are all potentials.



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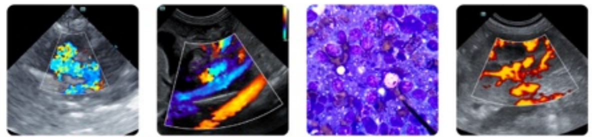
The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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

info@SonoPath.com