



PATIENT

Penny Micheletti

SPECIES

Canine

BREED

Chihuahua Mix

SEX

Female

AGE

4 years

WEIGHT

5.59 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

IMAGING PERFORMED BY

Kari Wilson DVM

HOSPITAL NAME

Animal Emergency
Hospital Deland

REFERRING VET

Dr. Wilson

INVOICE

69707

DATE

12/31/25

PRESENTING CLINICAL SIGNS

History: Penny is a 4 YO F Chihuahua mix who was presented for anemia. P went to DVM in Illinois over the holiday - on 12/24 for lethargy and urinated blood. P was not eating for 2 days prior to presenting. Bloodwork showed low RBC with a HCT 15%. It was suspected p had IMHA and prednisolone, doxycycline, and omeprazole were started. O had bloodwork rechecked on 12/26 which showed persistent anemia. A blood transfusion was performed and post transfusion showed PCV 41%. Azathioprine and Plavix were also started. It was recommended she have her blood value rechecked. Medication: Prednisolone 5 mg: 1 PO q12h Omeprazole 5mg: 1 PO q24h Doxycycline 100mg: 1/2 tab PO q24h Azathioprine 50mg: 1/4 tab PO q24h Plavix 75mg: 1/4 tab PO q24h Abnormal PE/Chem/CBC/UA Results: CBC: WBC 63.76, NEU# 56.05, MON# 4.91, HCT 18.3, HGB 5.0, RBC 2.11, MCV 86.7, MCHC 27.3, RET# 160.4, RET% 7.60, PLT 631, PCT 0.795 PCV: 18% Radiology Conclusion: 1. Unremarkable thorax. 2. Gastric food or less likely foreign material. 3. As mentioned, the tubular opacities within the ventral aspect of the caudal abdomen are suspected to represent superimposition of small intestine. However, concurrent uterine enlargement is not excluded. 4. Otherwise unremarkable abdomen.

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** 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 3.7 cm. 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 left adrenal gland measured 0.4 cm. The right adrenal gland measured 0.9 cm at the cranial pole and 0.5 cm at the caudal pole.

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.



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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.

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

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

- Structurally unremarkable abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of pathology related to hemorrhage. Immune mediated or infectious agents are likely in this patient. CBC path review +/- bone marrow aspirates are indicated if not already performed. The Prednisone may be suppressing a more significant presentation. However, sonographically the abdomen is unremarkable.



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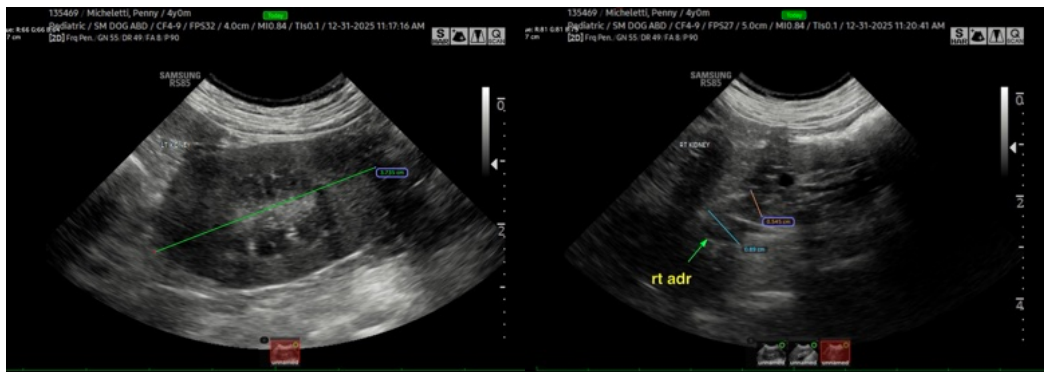
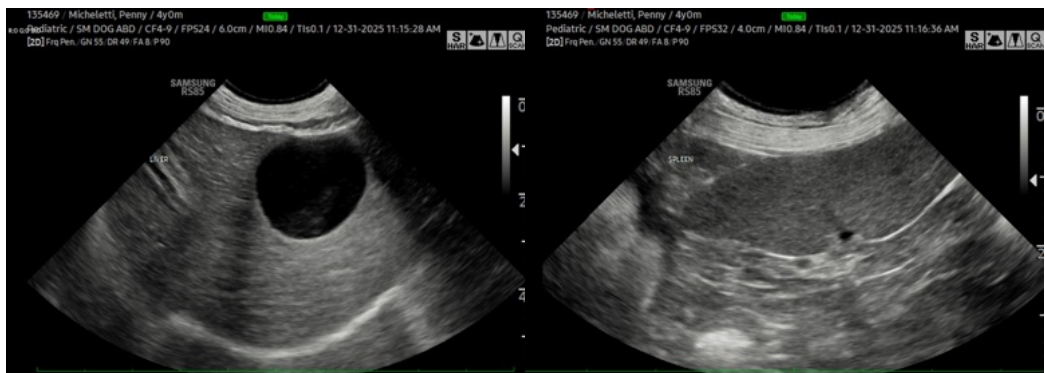
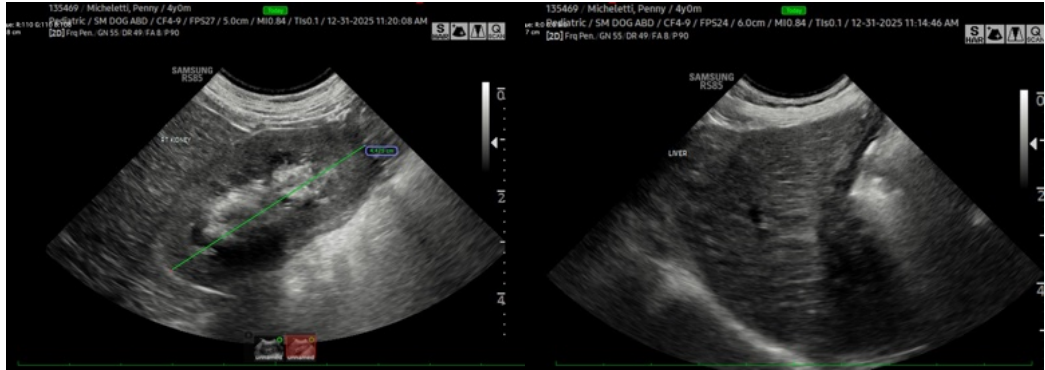
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com

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