



PATIENT

Teddy Hagel

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered male

AGE

5 years

WEIGHT

12 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IUUSS

IMAGING PERFORMED BY

Dr. Lenz

HOSPITAL NAME

State Ave VC

REFERRING VET

Dr. Lenz

INVOICE

69725

DATE

12/31/25

PRESENTING CLINICAL SIGNS

History: Cholecystectomy performed 2025-12-10 (3 weeks ago); post-op recovery uneventful until 3 days ago Past severe pancreatitis episode Recent dietary indiscretion: ingested 4-5 kernels of puff corn with almond bark No known ingestion of red substances or treats outside client control Recent loose stool, improving as of yesterday No coughing, sneezing, or abnormal urination/defecation reported Retching/vomiting once daily in the morning for 3 days; resolved today
Abnormal PE/Chem/CBC/UA Results: WBC 24.95, NEU 20.41, HGB 21, HCT 56.23, MCH 25.1, MCV 67, MCHC 37.4, RDWc 20.5 NDSU- Gallbladder Histopath (12/16/25)-: Chronic lymphoplasmacytic cholecystitis with chronic suppurative portal hepatitis Remarks: The changes are not specific but rather indicative of a chronic inflammatory process suggestive of ascending bacterial infection. Sonopath- Abdominal US Report (11/25/25) ULTRASONOGRAPHIC FINDINGS Primary • Sonographically normal liver, consistent with resolved to persistent low-grade benign hepatopathy • Congealed non-organized gallbladder debris occupying majority of gallbladder lumen- not consistent with classic mature mucocele • Bilateral mild renal medullary mineral. • Minor accumulated urinary bladder lumen mineral / small calculus • Mild pancreatic remodeling

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction and appeared normal. 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. Slight pinpoint mineralization was noted in the kidneys. The left kidney measured 3.5 cm. The right kidney measured 3.5 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 0.86 cm at the cranial pole and 0.46 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

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The **liver** revealed slight coarse architecture. Slight increased portal markings were noted as well as mild hepatic remodeling. The gallbladder was not visualized as it was previously removed. The gallbladder fossa was unremarkable. There was no complication from the prior surgery. The common bile duct was normal.

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Gastrointestinal

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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 appeared to be normal. Areas of mucosal stippling was noted in the small intestine, yet not clinically significant.

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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

Eric Lindquist, DMV
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Structurally unremarkable abdomen.
Mild hepatic remodeling.

IMAGING PERFORMED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

State Ave VC

Supportive care should prove effective.

REFERRING VET

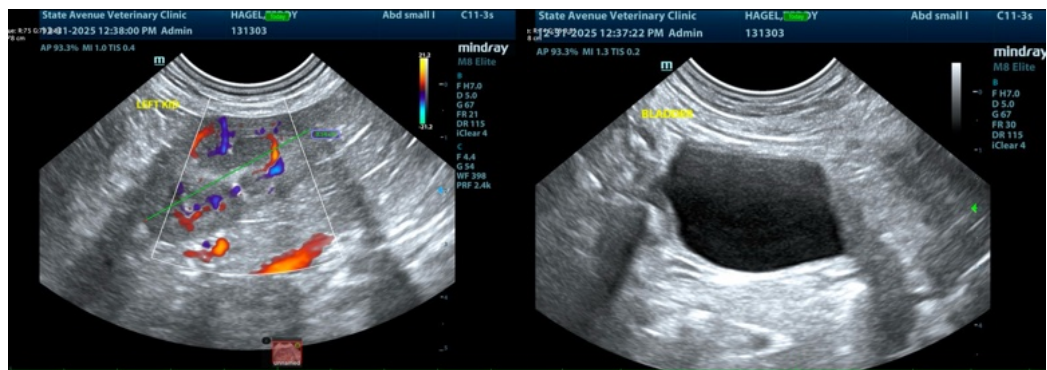
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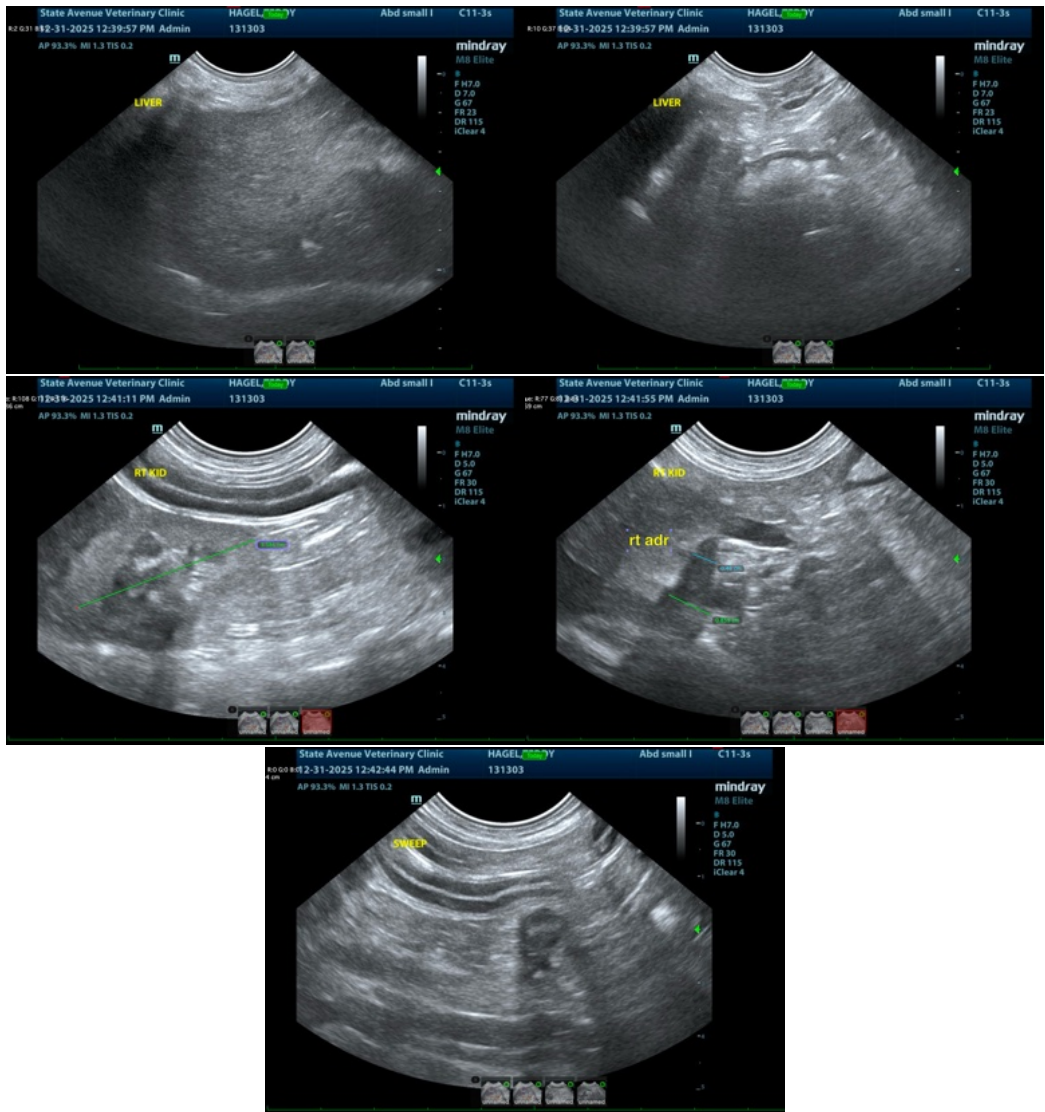
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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