



## PATIENT

Tank Schmidt

## SPECIES

Canine

## BREED

French Bulldog

## SEX

Neutered Male

## AGE

9 Years 6 Months

## WEIGHT

20.5 pounds

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Cassie Quillen  
DVM

## HOSPITAL NAME

Zumbrota Veterinary  
Clinic

## REFERRING VET

Dr. Cassie Quillen  
DVM

## INVOICE

12611

## DATE

12/05/25

## PRESENTING CLINICAL SIGNS

Elevated ALT since at least 2022, unsure if ALT has ever been tested normal. Asymptomatic. UTD on Leptospirosis vaccine. Consistently Lyme negative on 4Dx

Abnormal PE/Chem/CBC/UA Results: 11/21/25 PE: unremarkable CBC: unremarkable Chem: ALT high 278 U/L (10-125), rest normal 4Dx: negative x 4 Previous ALT ranged from 182-517 since 2022

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The **urinary bladder**, trigone, and pelvic urethra (to a depth of 1.0 cm) 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 minor 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 his age patient. Medullary structure differed distinctly from that of the cortex. Minor dystrophic mineralization was noted and non-obstructive at this time. The left kidney measured 4.25 cm in length. The right kidney measured 4.31 cm in length.

### *Adrenal Glands*

The **left adrenal gland** was 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 0.45 cm width.

The **right adrenal gland** was not visualized.

### *Spleen*

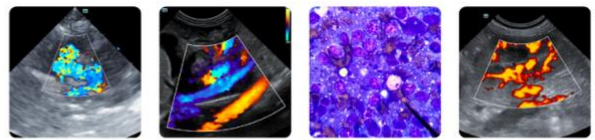
The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

### *Liver*

The **liver** revealed a minor amount of suspended debris in the gallbladder with mild echogenic gallbladder wall. Hepatic vascularity was unremarkable. The parenchyma was uniform and unremarkable. Slight increased portal markings were noted. The common bile duct was unremarkable.

### *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 with soft stool noted in the colon. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.



## PATIENT

## Pancreas

Tank Schmidt

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.

## SPECIES

Canine

## ULTRASONOGRAPHIC FINDINGS

## BREED

- Age-related renal changes with mineralization.
- Low-grade cholangitis pattern.

French Bulldog

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## SEX

Cholecystocentesis and culture with FNA of the liver is indicated. Leptospirosis titers is indicated. This may represent a reactive hepatopathy type presentation. Note that leptospirosis grippotyphosa may not be covered by vaccine history.

Neutered Male

## AGE

The hepatic clinical sonographic presentation is most consistent with Reactive Hepatopathy which is the most common cause of liver enzyme elevation in dogs and cats. The presumption is that gut and other organ antigen stimuli may be causing a low-grade immune response through portal system with which the liver is reacting to causing low-grade enzyme elevations. US-guided FNA could be performed to assess if low grade lymphoplasmacytic inflammation is present that would support this theory. If FNA is performed, please ask the cytologist to emphasize the primary inflammatory cell type. Empirical treatment measures to address this issue can include diet change to hydrolyzed diet, probiotics, deworming, nutraceuticals (SAME, Actigall...), dental exam and cleaning, and potentially antibiotics such as Clavamox. Metronidazole and Tylosin have traditionally been utilized for this purpose but new studies show that both these antibiotics can disrupt the normal intestinal bacterial flora (intestinal dysbiosis) for weeks and up to 4-6 months. Therefore, Metronidazole and Tylosin should be utilized as a last resort if other efforts have not been effective and sonographic organ appearance remains benign.

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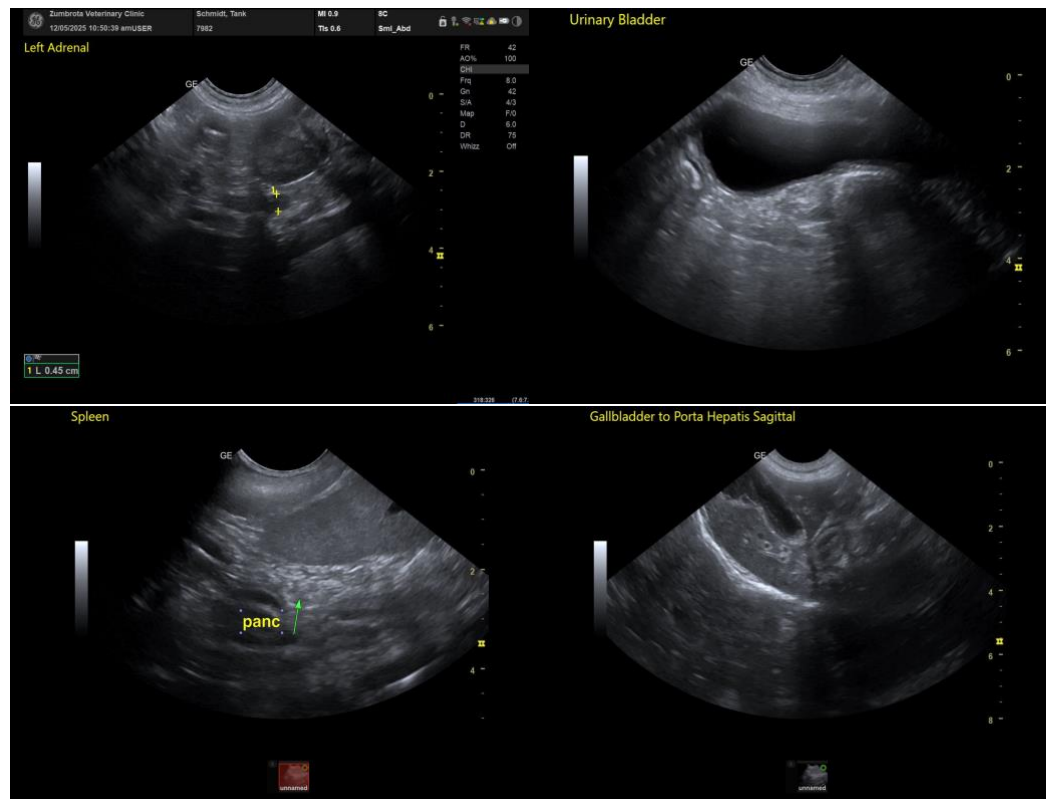
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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