



PATIENT

Tiago Rodriguez

SPECIES

Canine

BREED

Mixed

SEX

Male

AGE

6 Years

WEIGHT

16.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Gabriel Ferrer
DVM

HOSPITAL NAME

Pulse Pet Ultrasound
Services

REFERRING VET

Dra. Maria S. Colon

INVOICE

13734

DATE

02/13/26

PRESENTING CLINICAL SIGNS

- Px presented as referral for an abdominal ultrasound. Owner indicated that Px is lethargic, vomiting on two occasions. Isn't drinking water, Isn't eating well. rDVM indicates abdominal pain. The Px Currently hospitalized.

Abnormal PE/Chem/CBC/UA Results: Bloodwork, radiographs, rDVM records attached below for your reference. CBC: WBC HIGH (31.00), NEU HIGH (27.36), MONO. HIGH (1.62) CHEMISTRY (2): ALT (?), ALP HIGH (1.233) BIL HIGH (1.0).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed small calculi measuring up to 0.36 cm.

The **prostate** was uniformly enlarged with lobar swelling appeared to impinge upon the urethra and mildly deviate the descending colon. The prostatic tissue was hyperechoic containing focal areas of decreased echogenicity. These changes are suggestive of either chronic inflammatory episodes, benign cystic pathology or both. Underlying neoplasia cannot be completely ruled out but is lower on the differential list. This presentation is most consistent with benign prostatic hyperplasia with possible active prostatitis. Neutering or off-label Finasteride (Propecia) (0.1-0.5 mg/kg Sid) treatment is indicated +/- FNA or prostatic wash cytology and culture. The testicles were imaged and found to be uniform. The prostate measured 3.0 cm. Some edema lines were noted in the prostate and suggest for prostatitis.

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 5.1 cm in length. The right kidney measured 5.2 cm in length.

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 2.0 cm x 0.45 cm width at the caudal pole and 0.33 cm width at the cranial pole. The right adrenal gland measured 1.9 cm x 0.63 cm width at the caudal pole and 0.59 cm width at the cranial 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 were noted. The spleen was folded upon itself caudally.

Liver



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The **liver** revealed slight increased portal markings and a mild amount of remodeling.

The gallbladder was mildly over distended with suspended bile yet not to mucocele formation. The gallbladder wall was slightly thickened measuring 2.2 cm. Pericapsular inflammatory pattern.

Gastrointestinal

The **stomach** presented with hypertrophied wall and a minor amount of gastric fluid consistent with gastritis. The small intestine revealed areas of spasm.

Pancreas

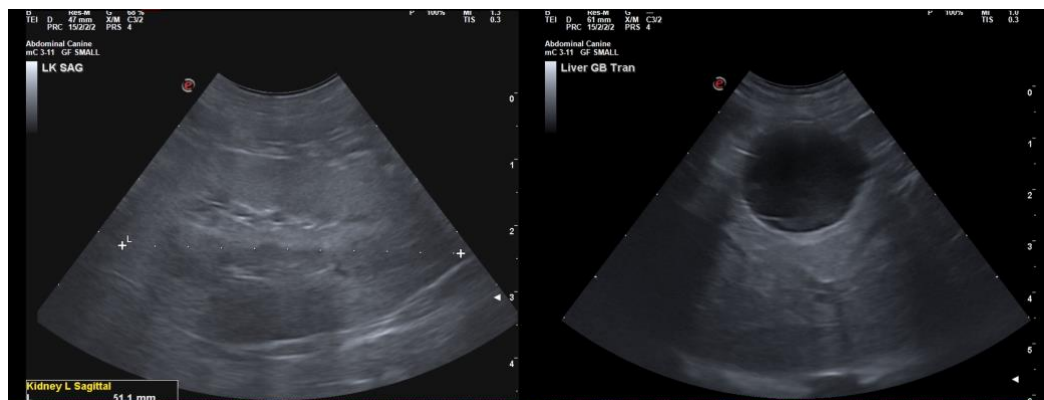
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Bladder calculi.
- BPH prostate.
- Cholangiohepatitis liver pattern- mild potential for emerging round cell neoplasia.
- Gastritis pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the liver is indicated. Leptospirosis titers and core liver biopsy may be appropriate with potential copper assessment and eventual neuter. Cystotomy may be appropriate. Cholecystocentesis would be ideal. Culture and sensitivity of the gallbladder bile is indicated.





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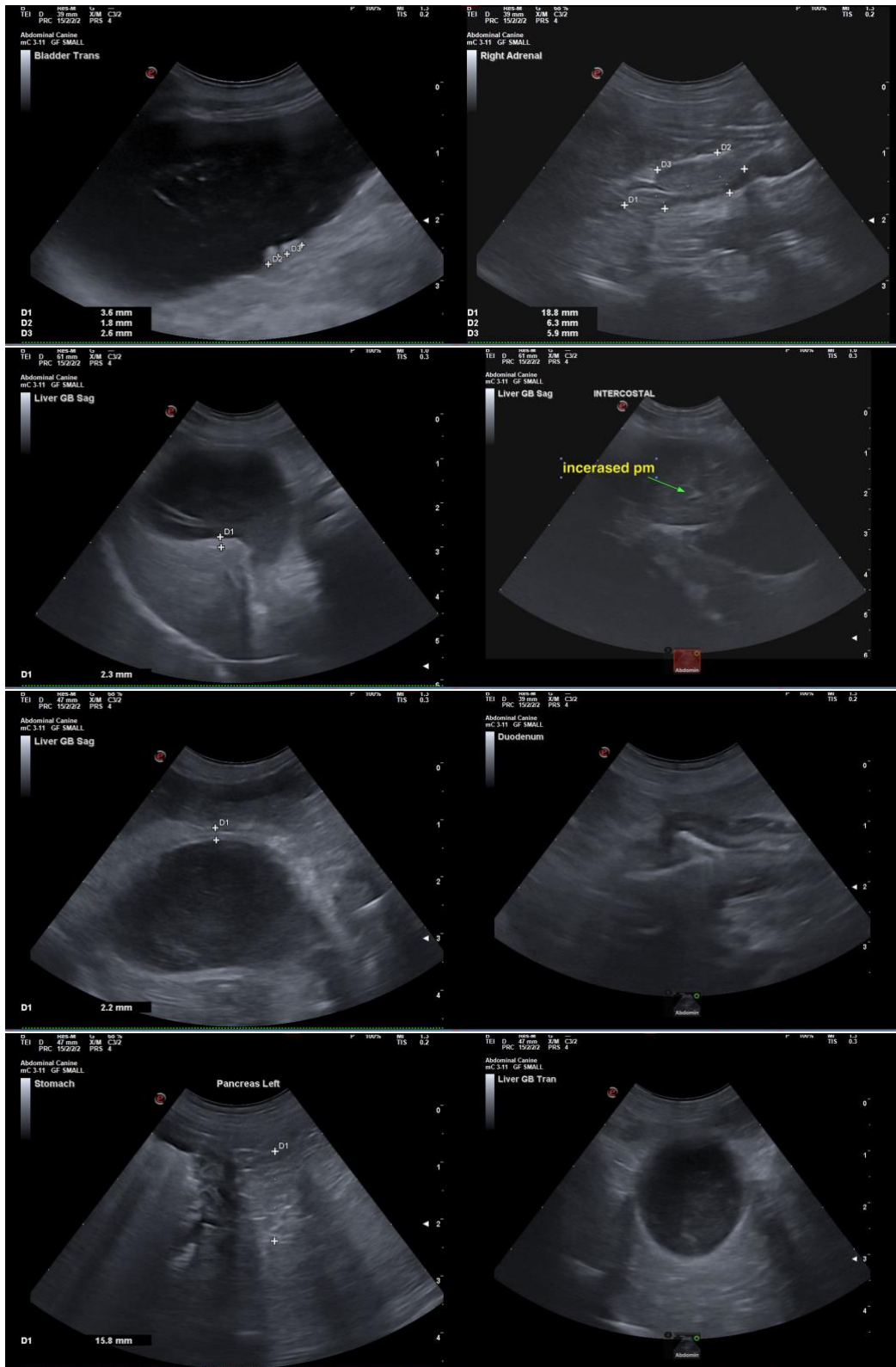
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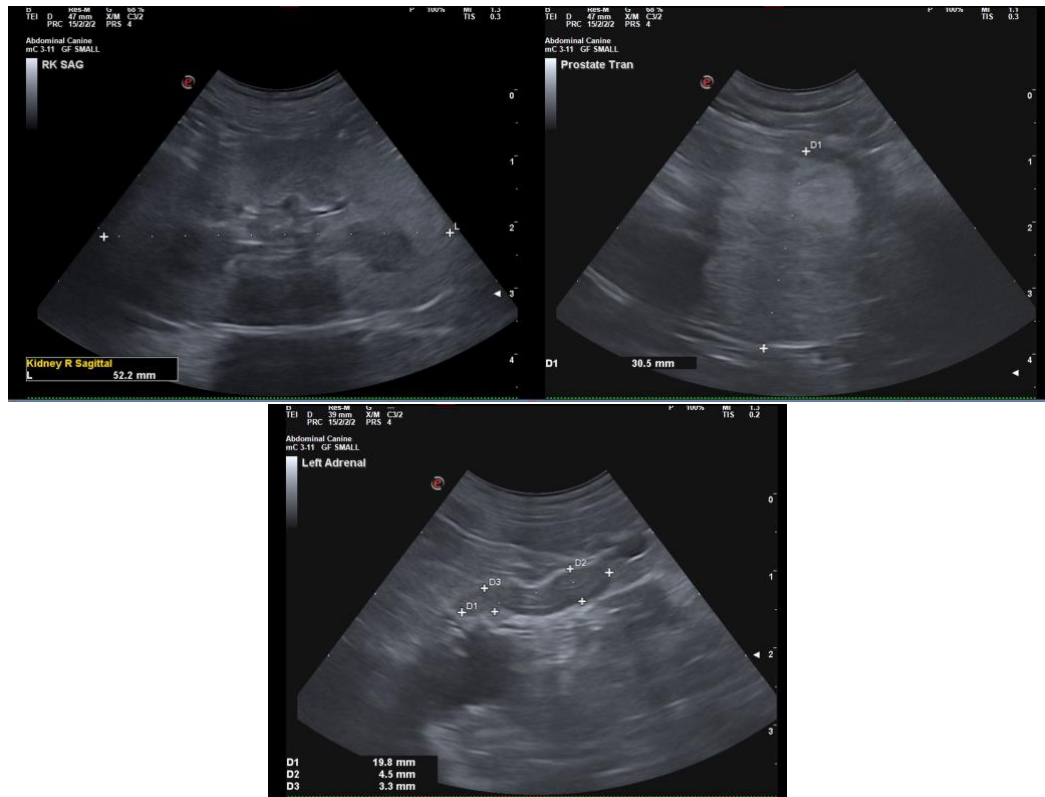
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com

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