



PATIENT

Bella Drogaris

SPECIES

Canine

BREED

Rat Terrier

SEX

Spayed Female

AGE

12 Years

WEIGHT

22 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Alexandra Pasaturo

HOSPITAL NAME

Greater Staten island
Veterinary Services

REFERRING VET

Dr. Alexandra Pasaturo

INVOICE

13776

DATE

02/14/26

PRESENTING CLINICAL SIGNS

- Bella presented to GSIVS as referral for elevated renal values, and WBC.
- Previously seen for RH lameness Tuesday evening where she received a rimadyl injection and sent home with meloxicam to start the following day.
- Two days later owner noticed vomiting, lethargy, hyporexia
- A few weeks ago owner noticed increase water consumption, owner went to primary at that time where a urinalysis was only performed and was unremarkable.

Abnormal PE/Chem/CBC/UA Results: Abnormal PE: QAR, dehydrated, tense non-painful abdomen, grade II/VI heart murmur, liquid brown diarrhea on rectal Diagnostics 2/13: CBC/CHEM done at Complete Care -MCV 59.7 L (61.6-73.5), WBC 65.10 H (5.05-16.76), NEU 42.68 H (2.95-11.64), LYM 19.30 H (1.05-5.10), MONO 2.83 H (0.16-1.12) -CREA 6.5 (0.5-1.8), BUN 160 (7-27), PHOS > 16.1 (2.506.8), GLOB 4.8 (2.5-4.5), ALKP 536 (23-212) CHLO 387 (110-320), NA 139 (144-160), K 7.3 (3.5-5.8), CI 96 (109-122) Diagnostics 2/14: BP: 80mmHG USG: 1.010 iSTAT 4AM: bun 126 (10-26), creat 4.9 (0.5-1.3), 5.1 (3.4-4.9) Urinalysis, and culture: pending

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 were noted. Ureteral papillae were normal.

The **right kidney** 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 with slight pyelectasia. The capsules were acceptably uniform without significant irregularities. The right kidney measured 3.6 cm in length.

The **left kidney** was irregular with swollen contour and slight pyelectasia. The left kidney measured 4.8 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 0.60 cm width.

The region of the **right adrenal gland** was imaged with no evident pathology.

Spleen

The **spleen** presented with hyperechoic lipid plaques measuring 1.5 cm with cortical indentation with potential for cortical infarct. Splenic thrombus was noted in the mid body of the spleen. This is an incidental finding and likely a reflection of the systemic pathology. The remainder of the spleen was unremarkable.

Liver



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The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were 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 and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

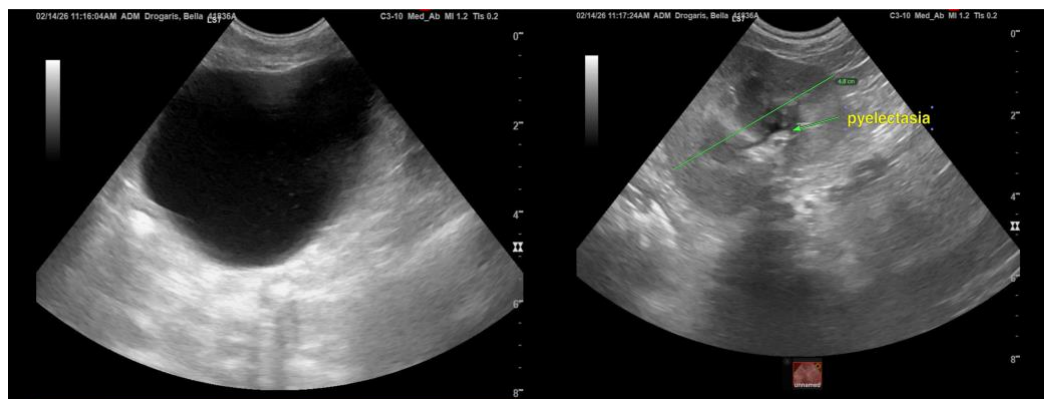
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Age-related renal changes with bilateral pyelectasia- acute on chronic insult likely. The kidneys do not subjectively appear end stage.
- Age-related abdominal changes.
- Splenic thrombus.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

72-hour IV fluid support, assessment for toxin exposure and leptospirosis is indicated. Urine culture and blood pressure is indicated. Reassessment of the clinical status and GI protectants are also indicated.





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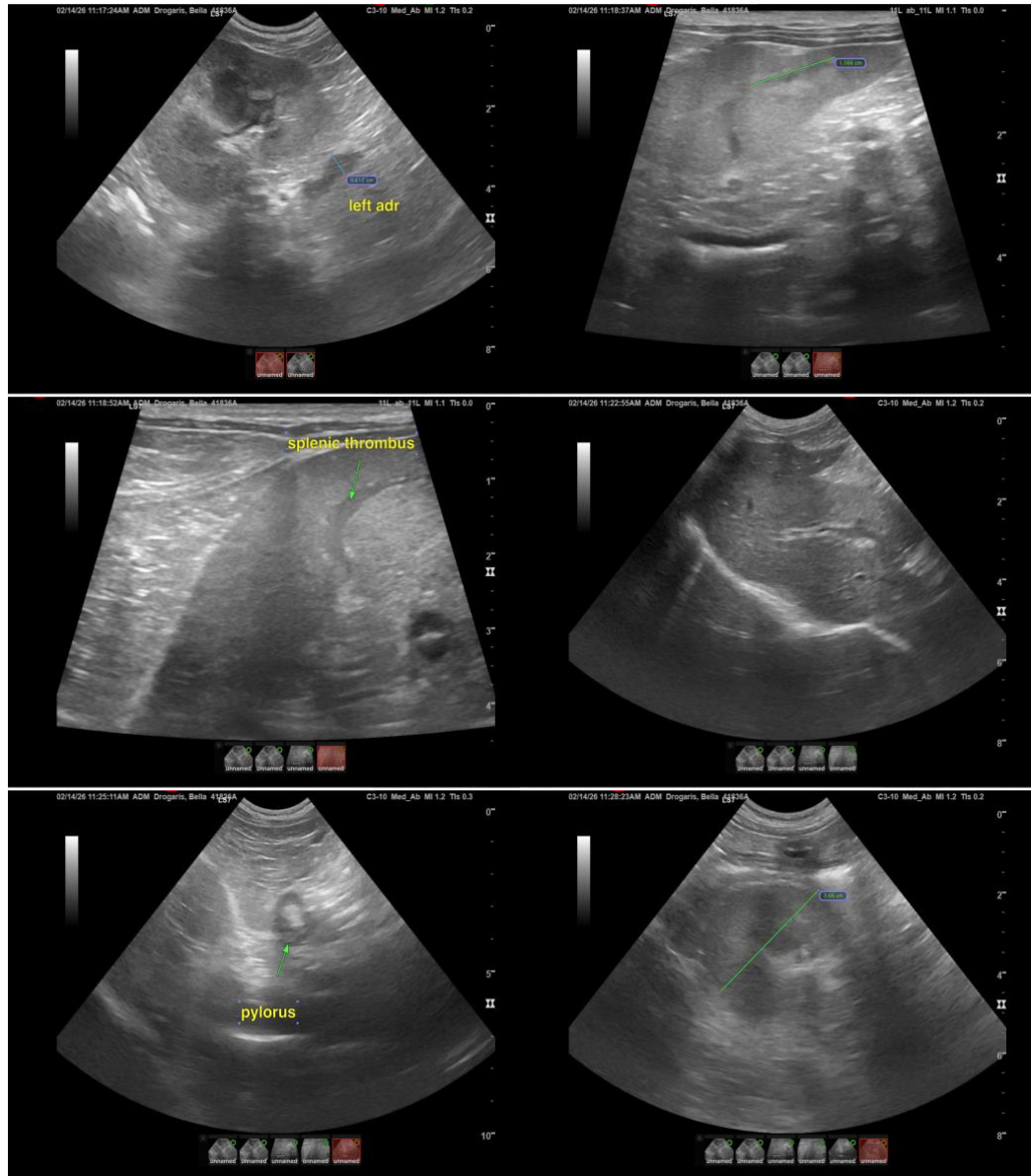
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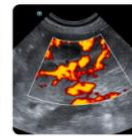
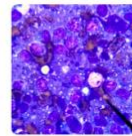
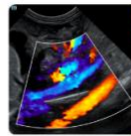
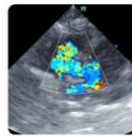
The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com



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