



## PATIENT

Lucy Chinchilla

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Female

## AGE

4 years

## WEIGHT

42 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway AH

## REFERRING VET

Dr. Maniar

## INVOICE

71293

## DATE

2/6/26

## PRESENTING CLINICAL SIGNS

- Recheck from 2/4 dog is not urinating

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The **urinary bladder** was over distended with urine. The bladder walls revealed normal thicknesses and normal tone. The urethra was unremarkable; however, an echogenic ureterocele was present impinging upon the cystourethral junction. This may be causing midstream pollakiuria or dysuria.

The **left kidney** presented dysplastic changes with lack of structural detail. The left kidney measured 4.9 cm with dilated, irregular, disrupted pelvic structure with thickened, irregular cortices.

The region of the **right kidney** revealed no viable kidney.

### *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 2.1 x 0.72 cm at the caudal pole and 0.65 cm at the cranial pole. The right adrenal gland measured 1.74 x 0.58 cm at the caudal pole and 0.73 cm 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 was noted.

### *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.



## PATIENT

Lucy Chinchilla

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Female

## AGE

4 years

## WEIGHT

42 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway AH

## REFERRING VET

Dr. Maniar

## INVOICE

71293

## DATE

2/6/26

## 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

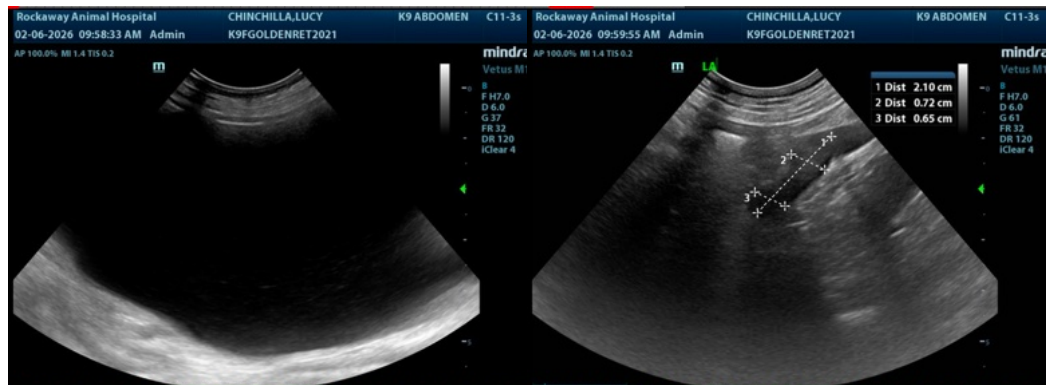
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

Right renal aplasia with left renal dysplasia and ureterocele.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The prognosis is poor in this patient given the azotemia. I cannot rule out a neoplastic process of the ureter, but not suspected. The ureterocele measured approximately 2.0 cm.





**PATIENT**

Lucy Chinchilla

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Female

**AGE**

4 years

**WEIGHT**

42 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

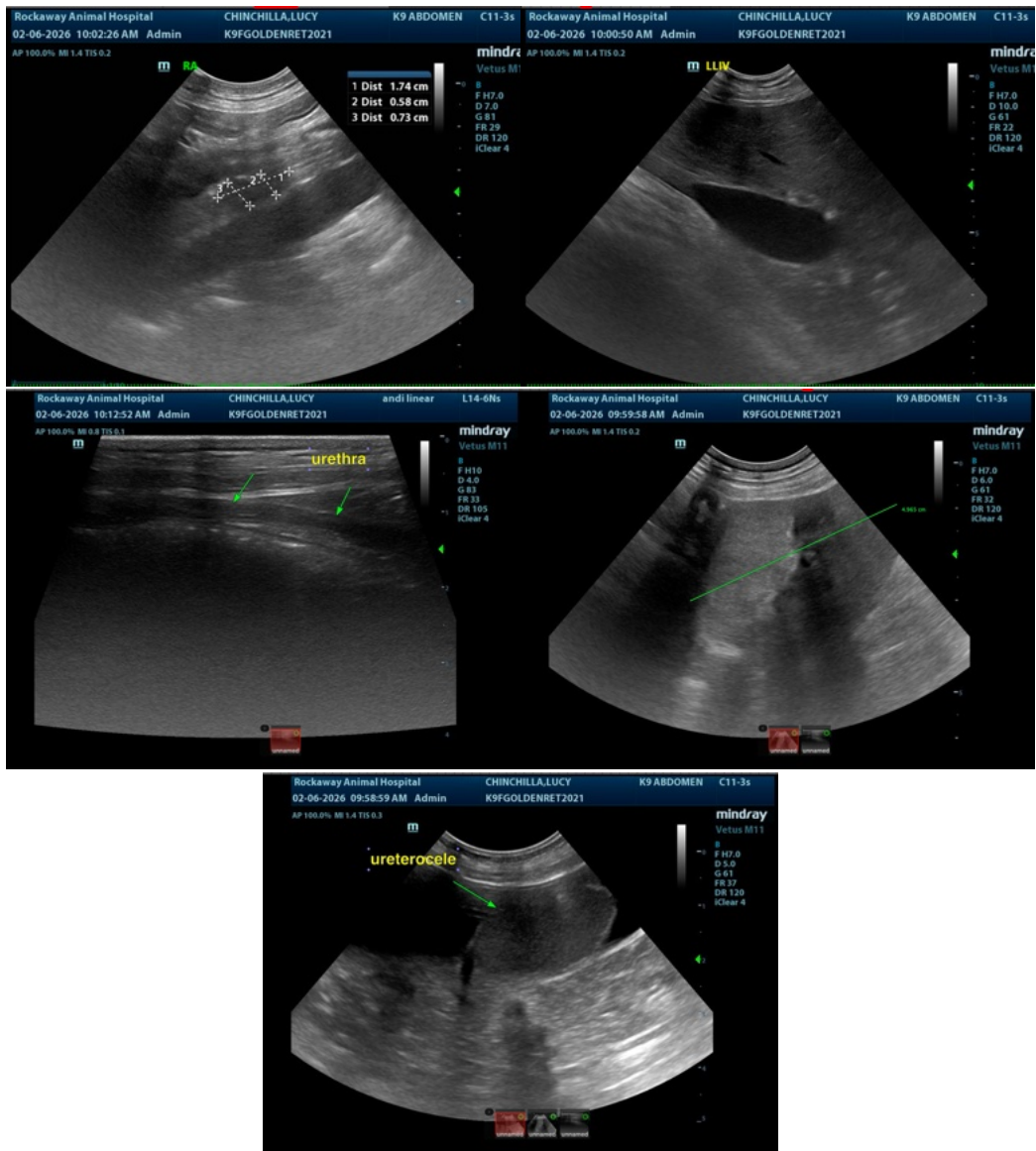
Dr. Maniar

**INVOICE**

71293

**DATE**

2/6/26



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

[info@SonoPath.com](mailto:info@SonoPath.com)