



PATIENT

Guchy Gonzalez

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

14 years

WEIGHT

24 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gabriel Ferrer

HOSPITAL NAME

Pulse Pet Ultrasound
Services

REFERRING VET

Dr. Balestra

INVOICE

72359

DATE

3/10/26

PRESENTING CLINICAL SIGNS

- Px presented as a referral for an abdominal ultrasound because Px had not defecated nor urinated in a concerning amount of time as per owner
- Owner stated that Px originally visited rDVM because Px had failed to defecate for 2 days and when urinating, Px managed to only get a few droplets out
- Client reports that Px has been drinking more amounts of water, has a voracious appetite, and that Px's abdomen has been looking more distended lately
- Px has a Grade II - III / VI Heart Murmur and is currently taking Vetmedin and Enalapril

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. Calculi were noted up to 1.3 cm each with a dorsal bladder mass that measured 3.0 x 2.0 cm. This appears resectable. Other smaller calculi were also noted. Smaller polyps are noted in the dorsal apical wall which may need to be surgically removed.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralization was noted. The right kidney measured 5.4 cm. The left kidney measured 5.13 cm.

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 1.65 x 0.47 cm at the caudal pole and 0.44 cm at the cranial pole.

The **right adrenal gland** was enlarged, nodular and irregular measuring 2.14 x 1.3 cm. There was capsular expansion without capsular escape.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself caudally. This is a positional variant and is not pathological. There was no evidence of significant disease.

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



PATIENT

Guchy Gonzalez

lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

SPECIES

Canine

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.

BREED

Mix

SEX

Spayed female

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.

AGE

14 years

WEIGHT

24 lbs

ULTRASONOGRAPHIC FINDINGS

Enlarged right adrenal gland. Adenoma, adenocarcinoma or pheochromocytoma.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Dorsal bladder mass and multiple bladder calculi. The bladder mass appears resectable. Consistent with carcinoma.

IMAGING PERFORMED BY

Dr. Gabriel Ferrer

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ideally, partial bladder cystectomy, stone removal and analysis along with normal and retrograde urethral flush with right adrenalectomy would all be performed. Reexamination of the history as to potential for urinary straining as opposed to straining to defecate.

HOSPITAL NAME

Pulse Pet Ultrasound
Services

Serial blood pressure measurements are recommended in this patient. If hypertension is an issue metanephrine level is recommended. If the patient appears Cushingoid and urine specific gravity is less than 1.020 then work-up for adrenal dependent Cushing's is indicated. Recheck is recommended in 2-3 weeks to assess for any progression of the adrenal gland.

REFERRING VET

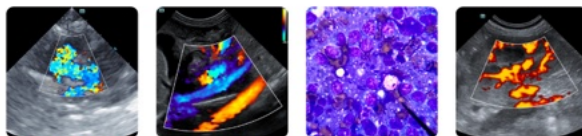
Dr. Balestra

INVOICE

72359

DATE

3/10/26



PATIENT

Guchy Gonzalez

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

14 years

WEIGHT

24 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gabriel Ferrer

HOSPITAL NAME

Pulse Pet Ultrasound
Services

REFERRING VET

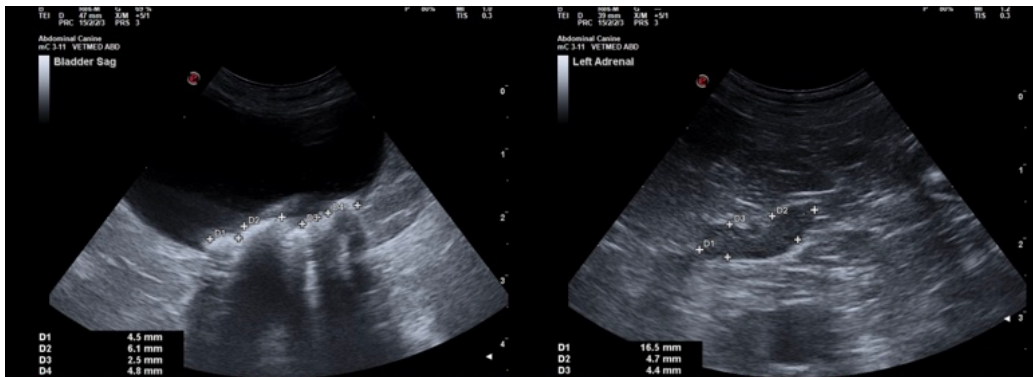
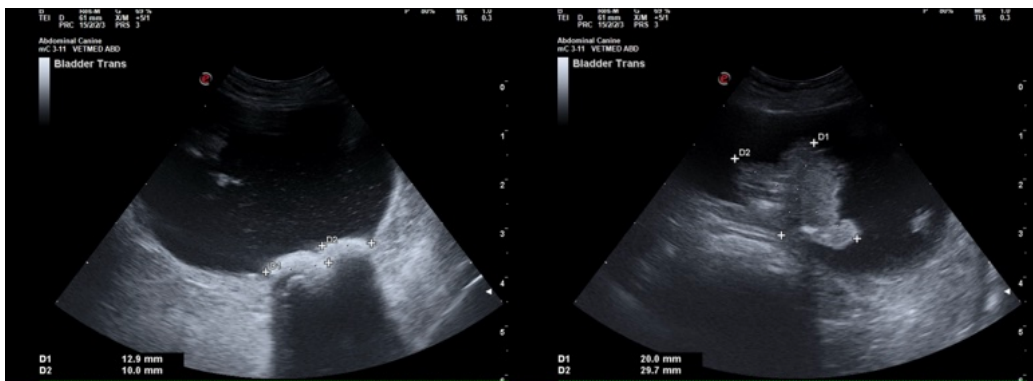
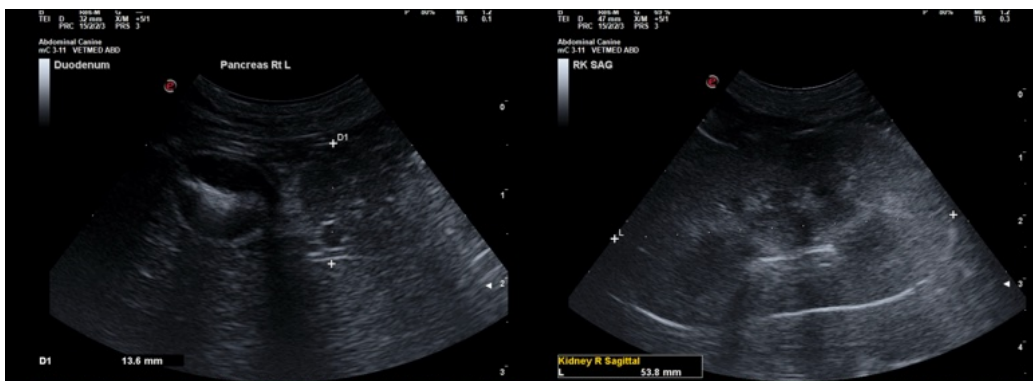
Dr. Balestra

INVOICE

72359

DATE

3/10/26





PATIENT

Guchy Gonzalez

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

14 years

WEIGHT

24 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gabriel Ferrer

HOSPITAL NAME

Pulse Pet Ultrasound
Services

REFERRING VET

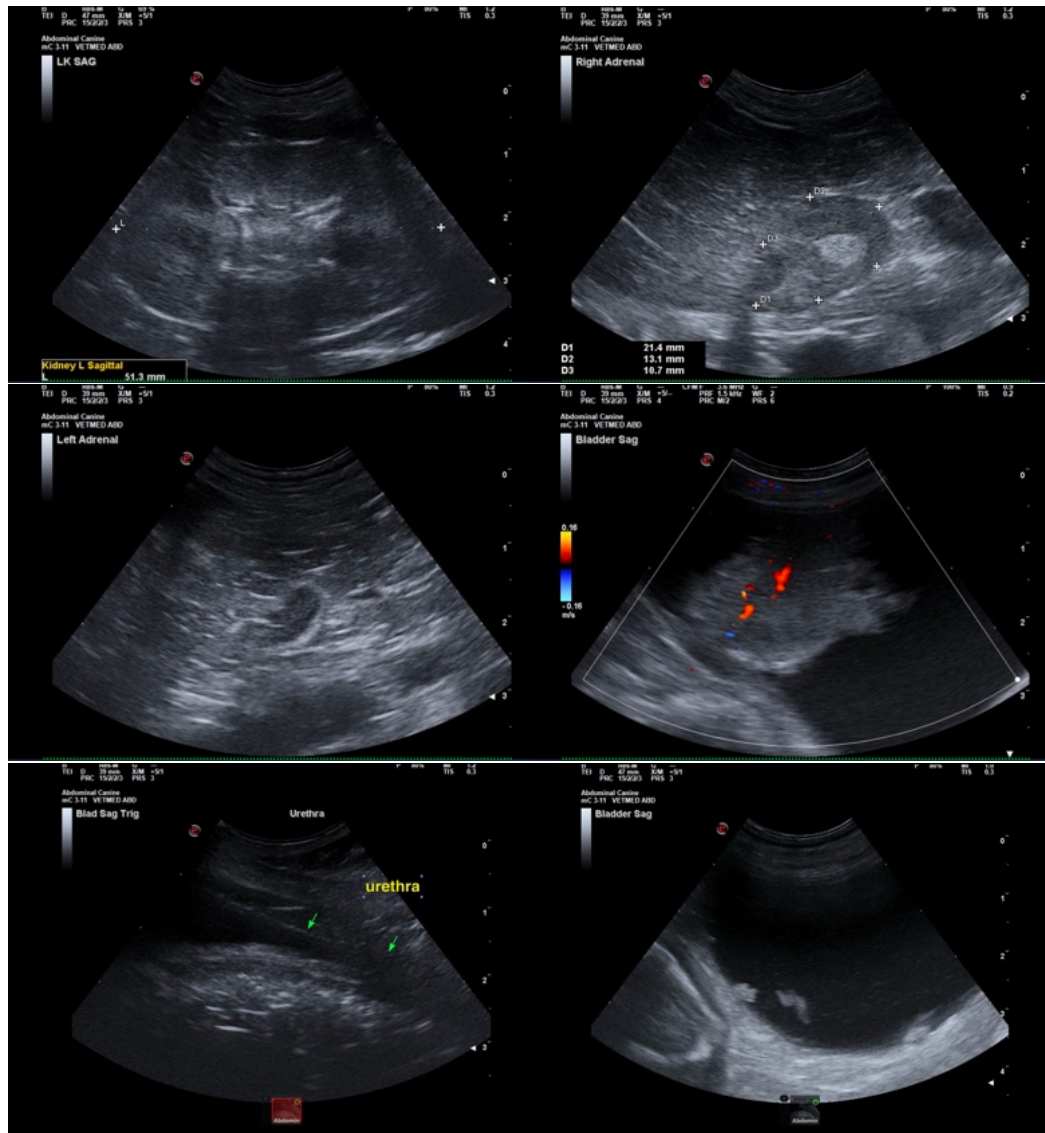
Dr. Balestra

INVOICE

72359

DATE

3/10/26



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