



DATE PRESENTING CLINICAL SIGNS

03/27/26

Patient History: Shaela presents as a transfer from Atwood due to increased respiratory effort and cyanosis during ventrodorsal thoracic radiograph. Occasional coughing at home when overly excited, but not regular. Heart: Normal rate and rhythm, no murmurs or arrhythmias. Lungs: Increased respiratory effort, significant abdominal effort. Abdomen: Possible hepatic or splenic mass noted on abdominal scan

PATIENT

Shaela Rohring

Current Medications: None listed.
Labwork Results: Labwork not attached.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed by: Stephanie Warga RDCS, RVT.

SPECIES

Canine

BREED

Min Pin

SEX

Intact Female

AGE

01/09/16

WEIGHT

22.8 pounds

INTERPRETED BY

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

HOSPITAL NAME

Homeward Bound
Veterinary

REFERRING VET

Dr. Vance

INVOICE

14698

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 **uterus** was unremarkable and empty. The left ovary was uniform measuring 1.0 cm. No evidence of pathology. The region of the right ovary was unremarkable.

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 4.21 cm in length. The right kidney measured 4.42 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 2.03 cm x 0.33 cm width at the cranial pole and 0.29 cm width at the caudal pole. The right adrenal gland measured 0.80 cm width at the cranial pole and 0.50 cm width at the caudal 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.

Liver

The **liver** revealed a cystic hepatic lymph node grouping measuring 3.6 cm yet not overtly pathological and likely secondary to chronic inflammation. The gallbladder and common bile duct 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.

Free Abdomen

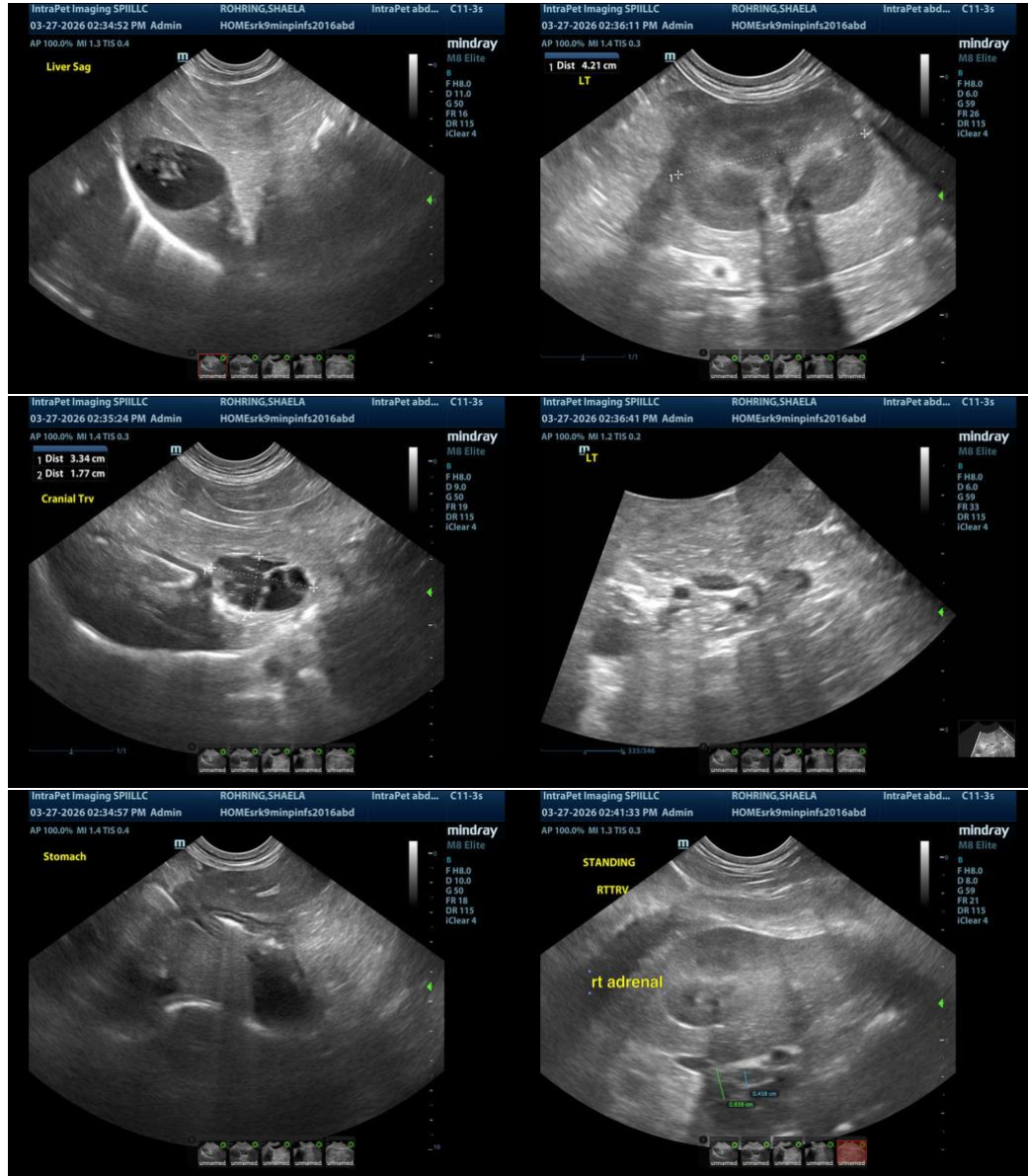
A comet tail lung pattern was noted in the lung fields/B lines.

ULTRASONOGRAPHIC FINDINGS

- Cystic hepatic lymph nodes.
- Unremarkable urinary tract.
- Comet tail lung pattern.
- Empty uterus.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend thoracic workup as a clinical focus as there is no evidence of abdominal disease directly related to the clinical history.



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.

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