



PATIENT

Reggie Fitzpatrick

SPECIES

Canine

BREED

Goldendoodle

SEX

Neutered Male

AGE

2 Years 10 Months

WEIGHT

35 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Graham Sager-
Gellerman DVM

HOSPITAL NAME

Back Bay Veterinary
Clinic

REFERRING VET

Dr. Alex Chapman
DVM

INVOICE

14789

DATE

04/02/26

PRESENTING CLINICAL SIGNS

To evaluate the following condition: AKI and chronic GI issues. 2y MN Goldendoodle. Presented on 4/2 for once episode of frank blood in stool, lethargy, hunched posture, and anorexia. No vomiting or diarrhea. On PE patient was QAR with normal vitals and was uncomfortable on abdominal palpation and rectal exam. IH CBC/Chem 10/Lytes/UA and 4DX revealed a newly elevated creatinine of 2.4 and a USG of 1.028; otherwise labs WNL and 4DX negative. Chronic history of recurrent GI issues since significant pancreatitis episode on 6/1/2025. Has vomiting and diarrhea flare ups any time P is given any fatty foods or proteins outside his normal diet. Responds to supportive care within a week. Last time confirmed ate was last night for dinner around 6 pm (~18 hours ago)

Abnormal PE/Chem/CBC/UA Results: 4/2/26: IH CBC/Chem 10/Lytes/UA and 4DX revealed a newly elevated creatinine of 2.4 and a USG of 1.028; otherwise labs WNL and 4DX negative. 2/22/2024: creatinine 0.8

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 3.0 cm 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 residual prostate was uniform measuring 0.45 cm.

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 3.9 cm in length. The right kidney measured 4.29 cm in length.

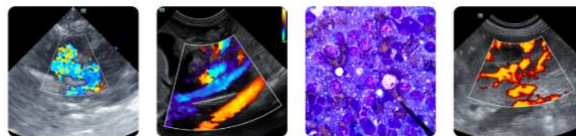
Adrenal Glands

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 1.67 cm x 0.54 cm width at the caudal pole and 0.42 cm width at the cranial pole. The right adrenal gland measured 2.5 cm x 0.49 cm width at the caudal pole and 0.69 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.

Liver



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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.

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. Some areas of mucosal speckling was noted in the small intestine.

Pancreas

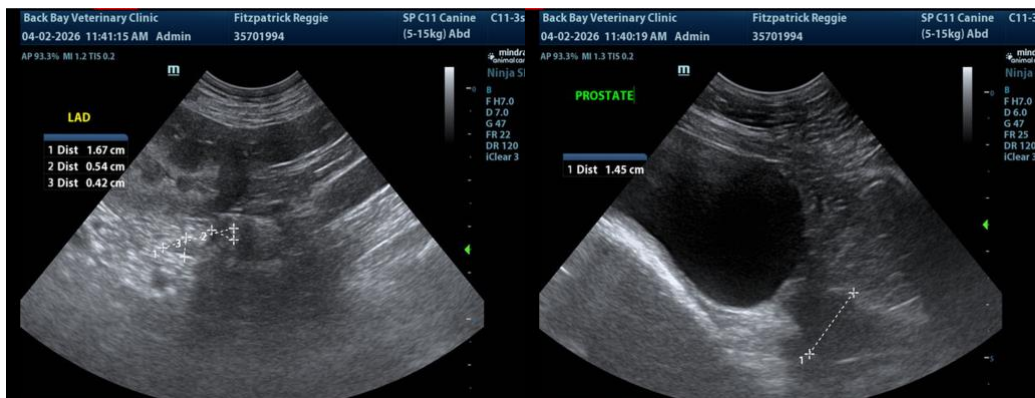
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. Screening for occult Addison's is indicated even though the adrenals appear normal.





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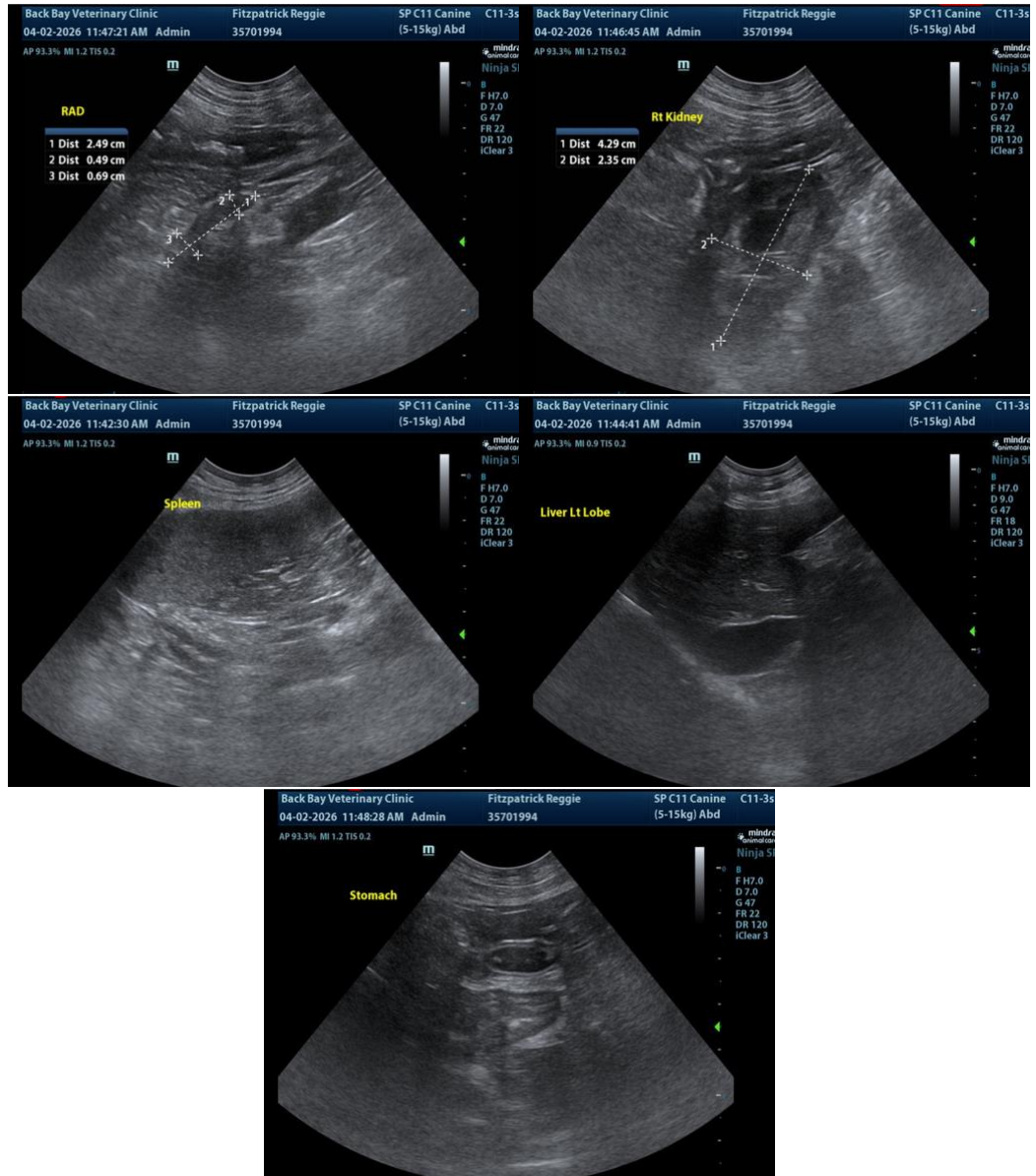
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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