



PATIENT	PRESENTING CLINICAL SIGNS
Sydney Gregory	History: Owner reports multiple episodes of vomiting 4/16/26. Pet appears very sensitive on the left side and is scratching at the left ear. Strabismus has returned.
SPECIES	P is painful on her Lt side
Canine	Abnormal PE/Chem/CBC/UA Results: WBC has improved, but ALT is elevated at 129 (0-120), prev 123. Amylase 1658 (100-1500), lipase >1000 (0-225), and triglyceride 357 (30-130) all elevated. cPL >2000. Cholesterol 441 (120-310)
BREED	
Japanese Chin	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
SEX	Urinary System
Spayed female	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 was noted. Ureteral papillae were normal.
AGE	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 right kidney measured 3.9 cm. The left kidney measured 3.43 cm.
10 ½ years	
WEIGHT	
9.52 lbs	
INTERPRETED BY	Adrenal Glands
Eric Lindquist, DMV DABVP, Cert. IVUSS	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 0.49 cm. The region of the right adrenal gland was imaged with no evidence of pathology.
IMAGING PERFORMED BY	
Dr. Anleu	Spleen
HOSPITAL NAME	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.
Ellwood AH	
REFERRING VET	
Dr. Maro	
INVOICE	
74645	
DATE	Liver
4/20/26	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



PATIENT

Sydney Gregory

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.

SPECIES

Canine

Gastrointestinal

BREED

Japanese Chin

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.

SEX

Spayed female

Pancreas

AGE

10 ½ years

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.

WEIGHT

9.52 lbs

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Structurally unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Dr. Anleu

There was no evidence of visceral disease. Screening for underlying Addison's is warranted as the left adrenal gland is low normal in size. The minor ALT elevation is likely owing to reactive hepatopathy owing to GI insult.

HOSPITAL NAME

Ellwood AH

Dietary indiscretion, food intolerance, structurally significant inflammatory bowel or occult parasitism and occult Addison's are all potentials.

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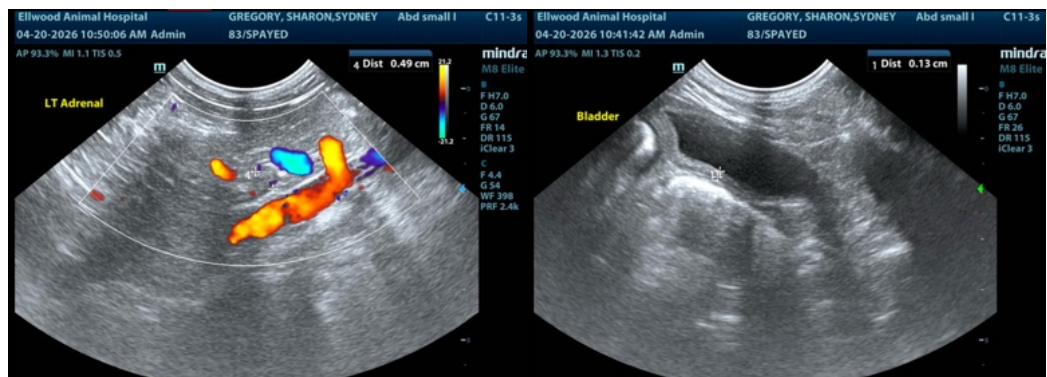
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SPECIES

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SEX

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AGE

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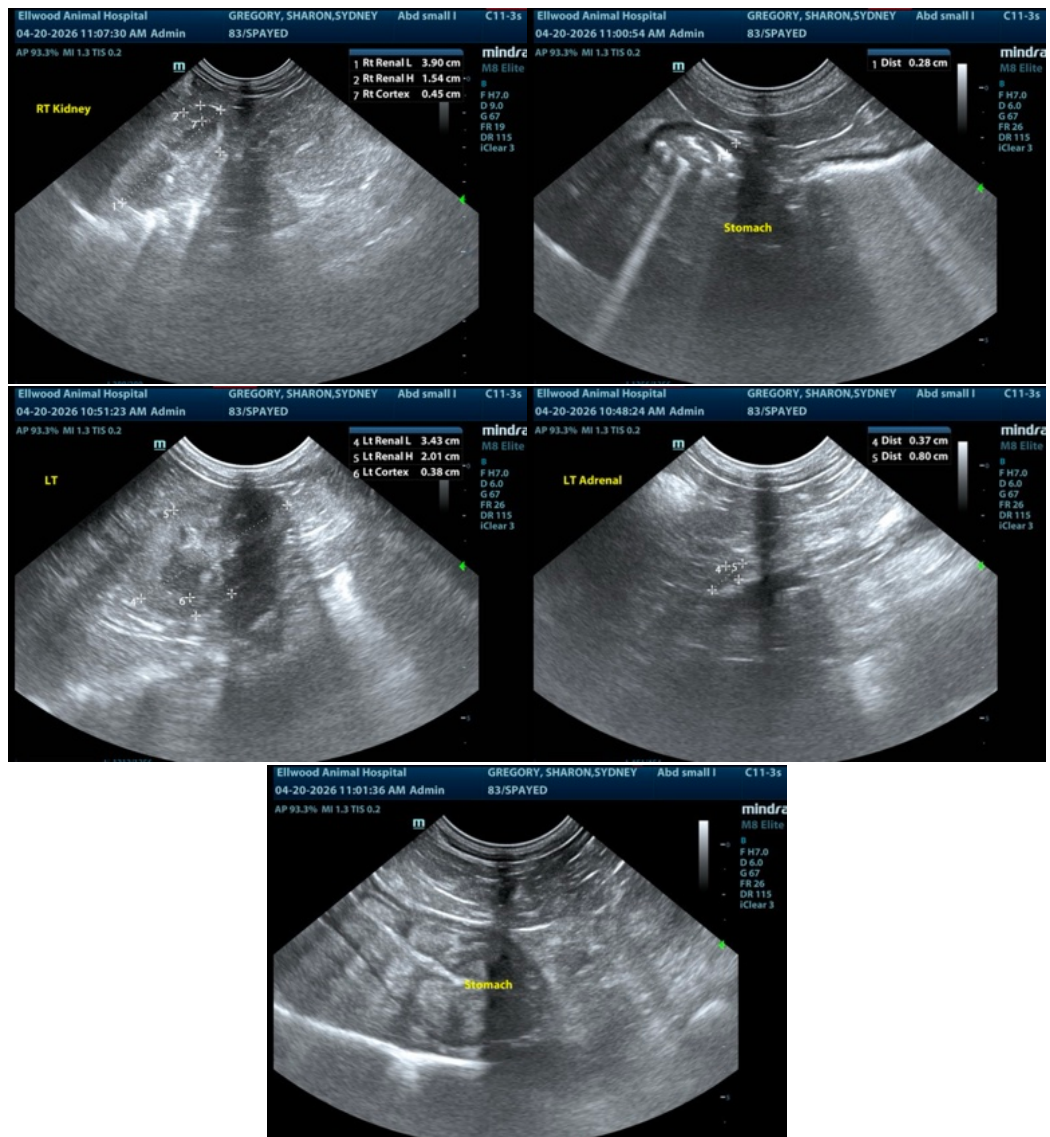
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 of SonoPath.com

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