



**PATIENT**

Adare Whiting

**SPECIES**

Canine

**BREED**

Rhodesian Ridgeback

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

76.8 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

Ringwood AH

**REFERRING VET**

Dr. Endy

**INVOICE**

36683

**DATE**

4/21/26

**PRESENTING CLINICAL SIGNS**

History: Frequent urinary issues squatting straining, 1/2/26 hematuria

Abnormal PE/Chem/CBC/UA Results: rare cocci free catch usg 1.029

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

The **urinary bladder** presented a relatively uniform thickening of the cranioventral and craniodorsal mucosae with micropolypoid mucosal changes without involvement of the submucosae. The urine presented some echogenicity consistent with suspended debris. Poor urethral tone was noted. The urethra measured 4.0 mm in diameter. This presentation is most consistent with chronic cystitis. Technically transitional cell carcinoma cannot be ruled out without histopathological review but is not overtly suspected based on this pattern. Cystocentesis and urine culture +/- pathological review of urine cytology would be warranted. No overt calculi were present at this time. The bladder wall measured up to 1.5 cm in wall thickness. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. Underlying occult incontinence may be an issue.

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 7.13 cm. The right kidney measured 6.67 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 1.87 cm x 0.65 cm at the cranial pole and 0.59 cm at the caudal pole.

The **right adrenal gland** measured the upper limits of normal in size. The right adrenal gland measured 2.06 cm x 1.37 cm at the cranial pole and 0.8 cm 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** 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.



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**Gastrointestinal**

Some **gastric** stasis was noted. Minor gastric artifact was also noted, cannot rule out minor foreign matter. The small intestine and colon were unremarkable.

**Pancreas**

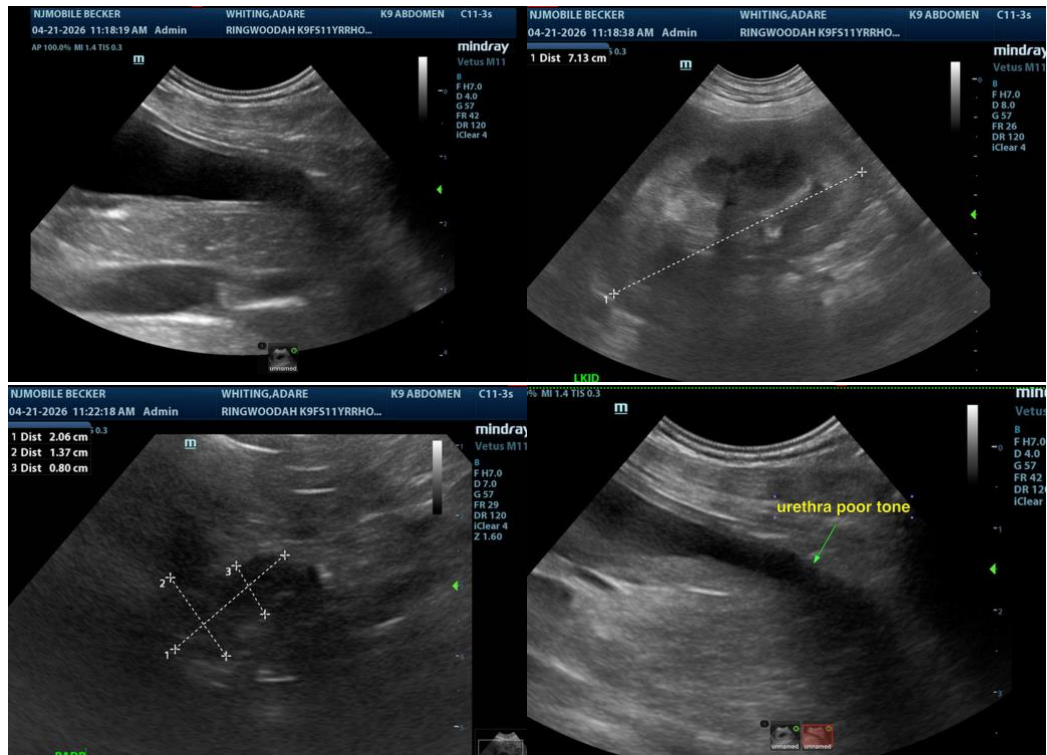
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**ULTRASONOGRAPHIC FINDINGS**

- Subjectively poor urethral tone and chronic cystitis pattern
- Right adrenal gland upper limits of normal in size
- Minor gastric artifact, cannot rule out minor foreign matter

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Assessment for any recessed vulva or predisposing issues such as urine pooling is indicated. Urine culture and sensitivity and 4-6 week antibiotic therapy based on culture results would be ideal. Further intervention upon any predisposing vaginal issues is recommended. Phenopropanolamine trial could also be considered to proactively enhance urethral tone as recurrent reflex UTI may be playing a role owing to poor tone.





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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](mailto:info@SonoPath.com)