



## PATIENT

Phoenix Giese

## SPECIES

Canine

## BREED

Boxer Mix

## SEX

Spayed Female

## AGE

8 Years

## WEIGHT

44.4 Pounds

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Megan Bray

## HOSPITAL NAME

Taylorville VC

## REFERRING VET

Dr. Megan Bray

## INVOICE

36723

## DATE

4/23/26

## PRESENTING CLINICAL SIGNS

History: Presented on 3/25/26 for a wellness exam and lab work. Abdominal palpation revealed nonpainful on palpation. No masses or organomegaly detected. Bowel loops smooth and soft. Hx of a 1-2/6 heart murmur. While here for recheck on 4/15 owner said patient had an accident in the house and while collecting free catch sample patient squatted multiple times and only let out a few dribbles. P was very dark and looked like it had some sediment in it.

Abnormal PE/Chem/CBC/UA Results: UA results revealed from 3/25/26: Free catch sample -Urine color was noted to be a DARK YELLOW TO ORANGE. There was BLOOD present in the urine (hematuria), No bacteria were observed. Bilirubin present, prescribed amoxicillin for 2 weeks. Free catch sample from 4/15/26 revealed: No infection in her urine but there is blood again See attached labs.

## 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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

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 6.2 cm. The left kidney measured 6.4 cm.

### 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 was slightly swollen at the caudal pole, measuring 0.7 cm at the caudal pole and 0.5 cm at the cranial pole. The right adrenal gland measured 0.93 cm at the cranial pole and 0.6 cm at the caudal pole.

### Spleen

The **spleen** was folded upon itself cranially with uniform minor enlargement. No significant disruption of architecture was noted. Power doppler revealed normal flow without evidence of thrombosis in the spleen.

### 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**

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.

**ULTRASONOGRAPHIC FINDINGS**

- Minor splenic enlargement
- Slightly swollen left adrenal caudal pole
- Structurally unremarkable abdomen otherwise

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

25-gauge FNA of the spleen is warranted for further definition, yet the spleen subjectively appears benign. Tick-borne disease panel is warranted, as well as assessing for any other cause of immune stimulation.

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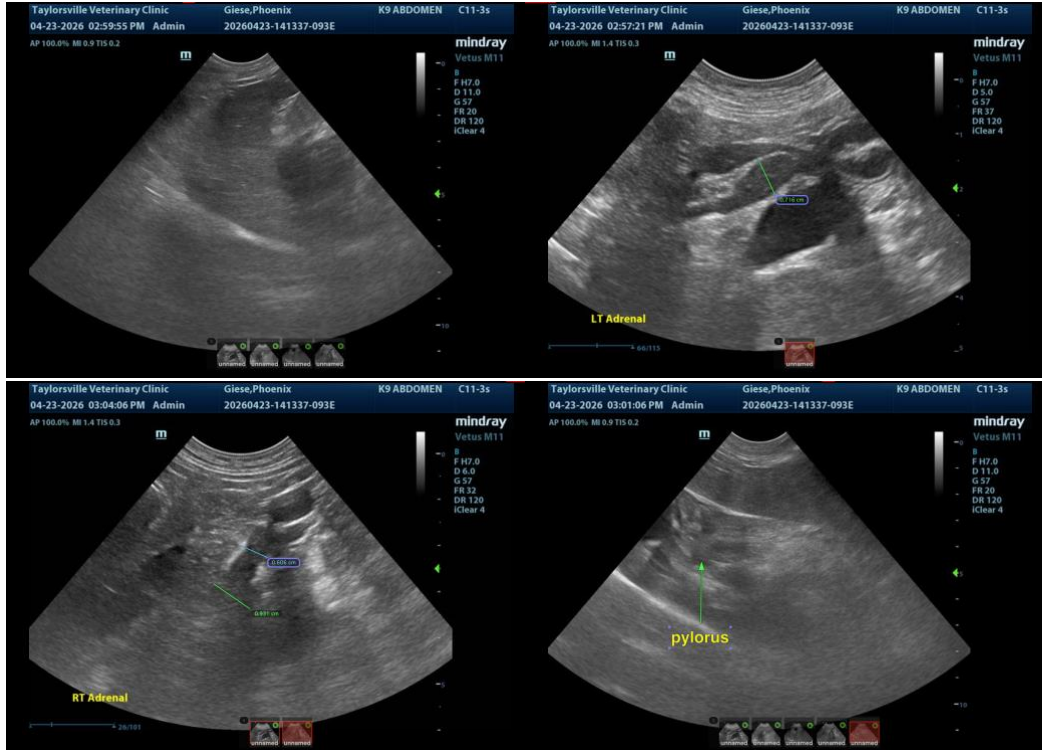
Dr. Megan Bray

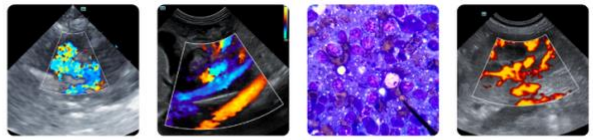
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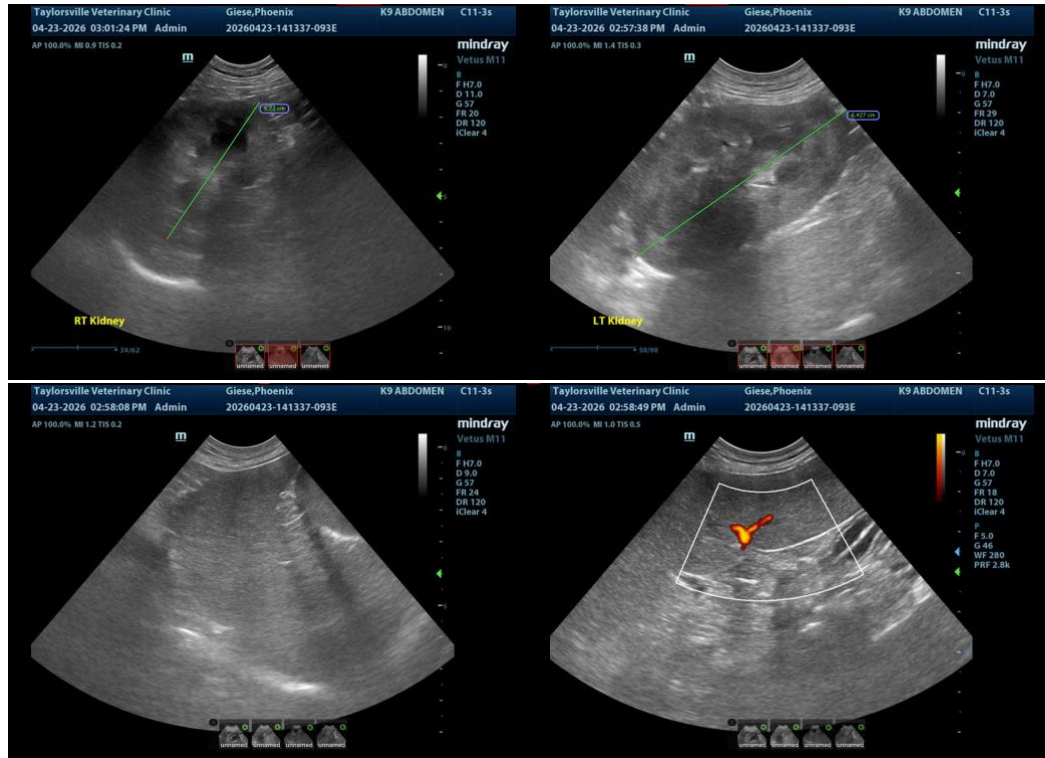
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,  
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