



PATIENT

Loki Pontrelli

SPECIES

Canine

BREED

Chiweenie

SEX

Neutered Male

AGE

10 Years

WEIGHT

20.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Saum Hadi

HOSPITAL NAME

Nimbus Pet Hospital

REFERRING VET

Dr. Saum Hadi

INVOICE

14880

DATE

04/05/26

PRESENTING CLINICAL SIGNS

P presents for work up of increased liver values. Minimal improvement on Denamarin. P is on phenobarbital for seizures, recent phenobarbital levels at low end of therapeutic range

Abnormal PE/Chem/CBC/UA Results: ALT 153 U/L ALKP 716 U/L Mild hypoalbuminemia 2.6 g/dL Rest WNL (glucose, BUN, AST, GGT, T.bili)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a mild amount of sand measuring approximately 1.0 cm and appeared nonobstructive.

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 4.1 cm in length. The right kidney measured 4.8 cm in length.

Adrenal Glands

The regions of the **adrenal glands** were imaged with no evident pathology.

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** presented mildly swollen and slightly heterogenous with iso- to hypoechoic occasional nodular changes were noted without disruption of architecture. The hepatic lymph nodes were slightly enlarged at approximately 1.5 cm x 0.50 cm. 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.



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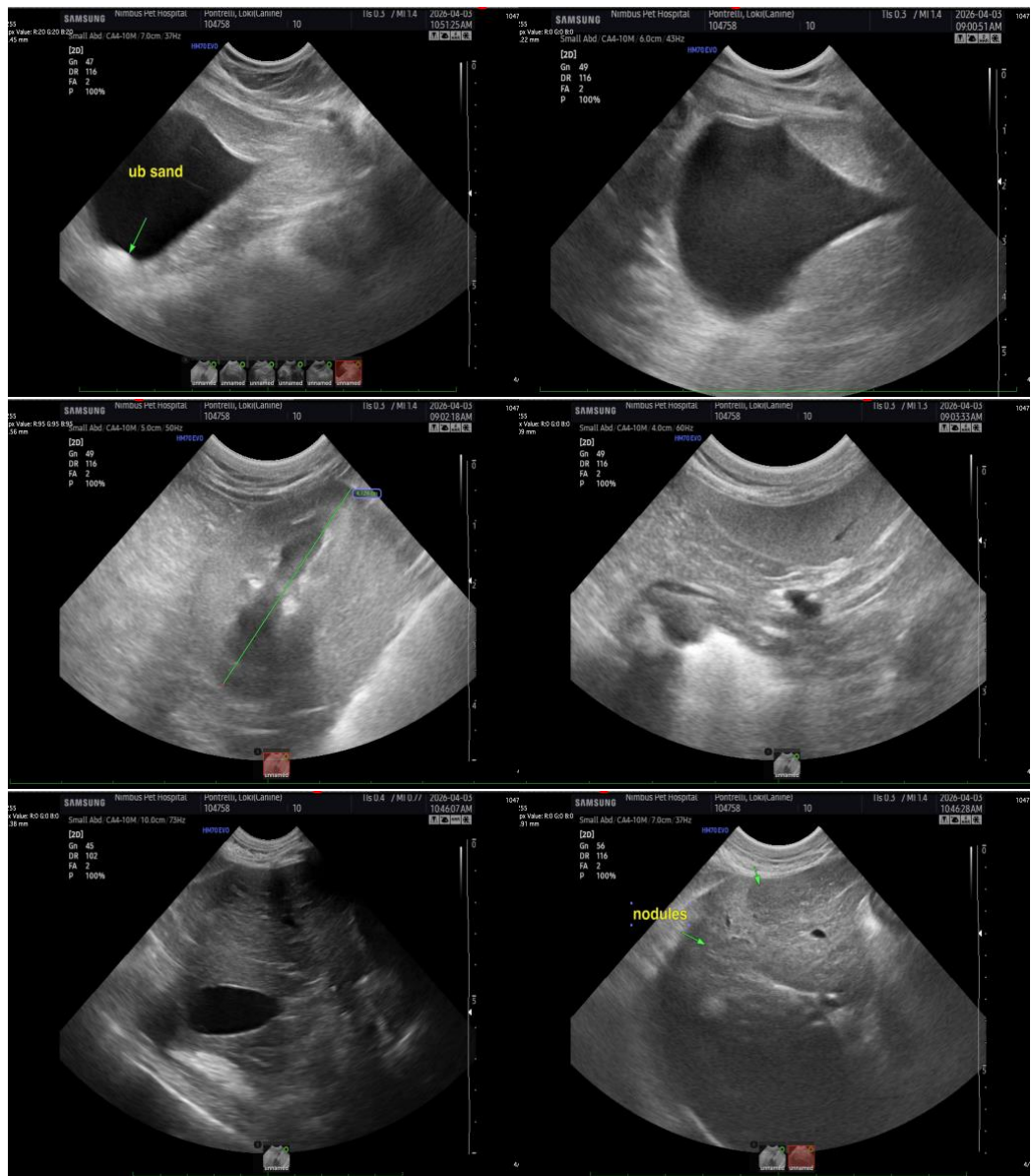
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ULTRASONOGRAPHIC FINDINGS

- Nonspecific hepatomegaly with nodular changes and minor hepatic lymphadenopathy.
- Urinary bladder sand.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound-guided FNA in the liver is essential in this patient to assess for round cell neoplasia versus hepatitis. Leptospirosis titers are indicated. Prognosis is guarded depending upon FNA results. The cause of low albumin is unclear. Protein-losing nephropathy, protein-losing enteropathy and occult Addison's should all be considered.





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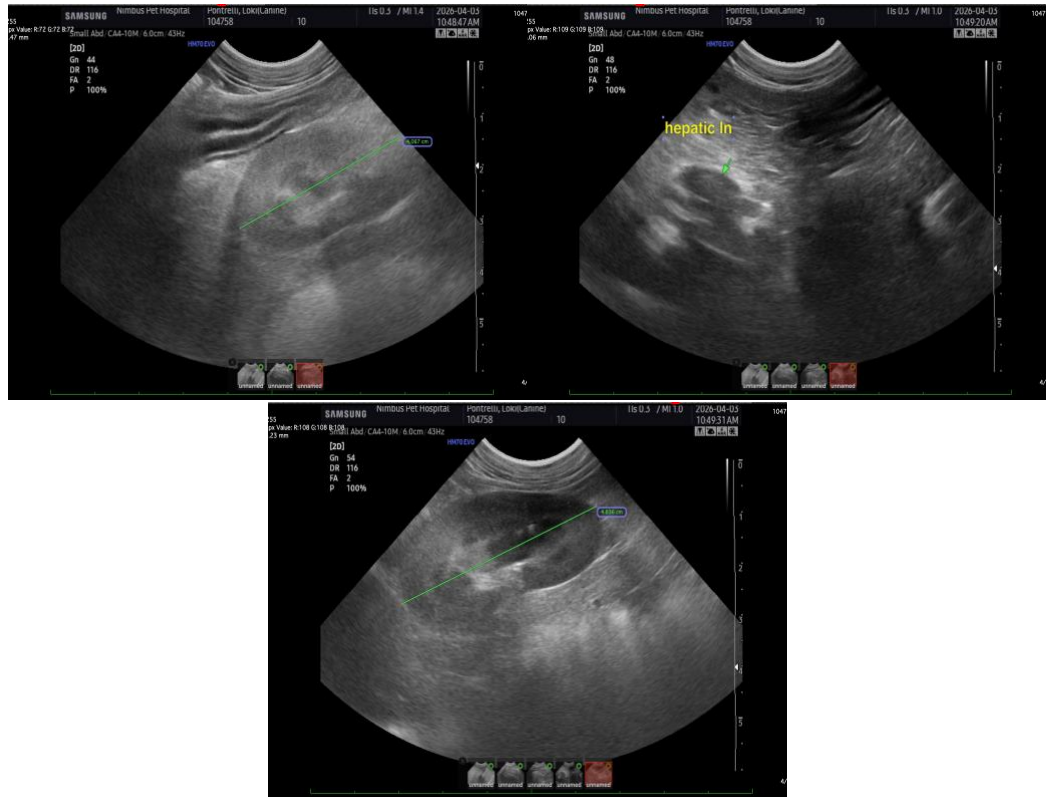
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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