



DATE PRESENTING CLINICAL SIGNS

5/12/26

Patient History: Patient has flank alopecia and crusty nipples, otherwise WNL. Looking for ovarian cysts or uterine cancer and if patient looks like she is a candidate for surgery.

Current Medications: None.

PATIENT

Abby Wilson

Labwork Results: Labwork not attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

SPECIES

Guinea Pig

Imaging Performed by: Stephanie Warga RDCS, RVT.

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Intact female

Urinary System

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

AGE

7/22

The **kidneys** revealed normal size and structure. 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. Corticomedullary, hyperechoic, mineralization was noted in this patient and is not pathological. The right kidney measured 2.52 cm. The left kidney measured 1.8 cm.

WEIGHT

932 g

The right **ovary** was cystic and measured 0.72 cm. The right ovary itself measured 1.5 cm. The left ovary was completely cystic and measured 2.0 cm. The uterus was thickened and irregular with minor fluid filled lumen. This is most consistent with uterine hypertrophy or hyperplasia. However, I cannot rule out an underlying neoplastic event. A focal area of mineralization was noted in the uterus. The uterine body measured 1.3 cm in width.

INTERPRETED BY

Eric Lindquist, DMV,
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IVUSS, CEO of
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HOSPITAL NAME

Chadwell AH

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 right adrenal gland measured 0.25 cm. The left adrenal gland measured 0.2 cm.

REFERRING VET

Dr. Weeks

Spleen

The **spleen** was volume contracted and folded upon itself.

INVOICE

75357

Liver

The **liver** revealed slightly increased portal markings and minor remodeling. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy 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.

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.

Free Abdomen

A slight amount of free fluid was noted in the cranial abdomen adjacent to the liver.

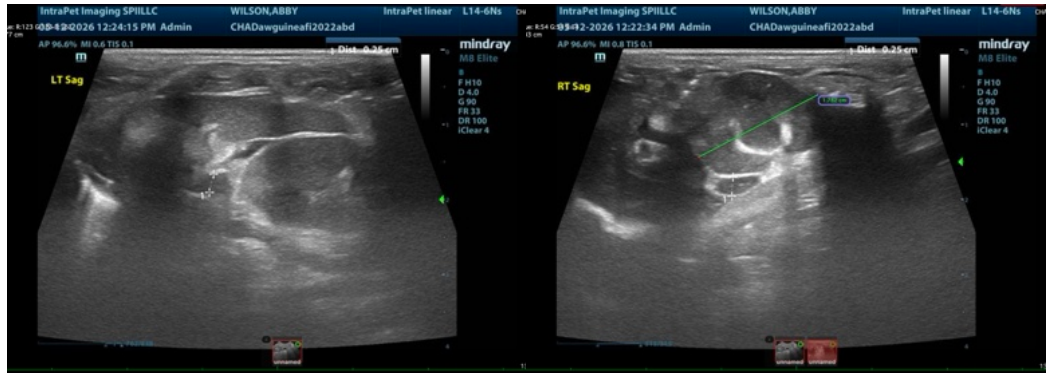
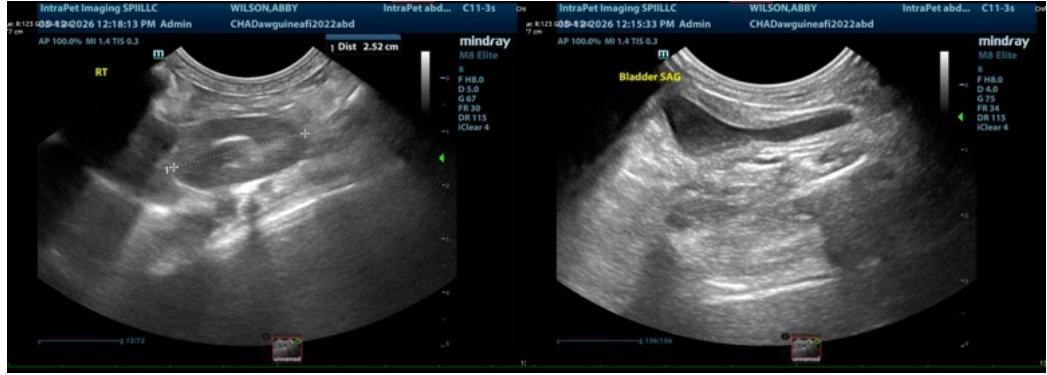
ULTRASONOGRAPHIC FINDINGS

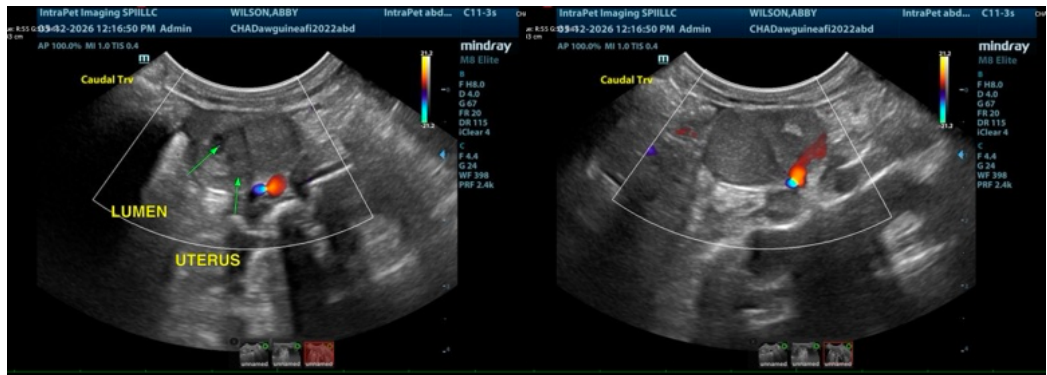
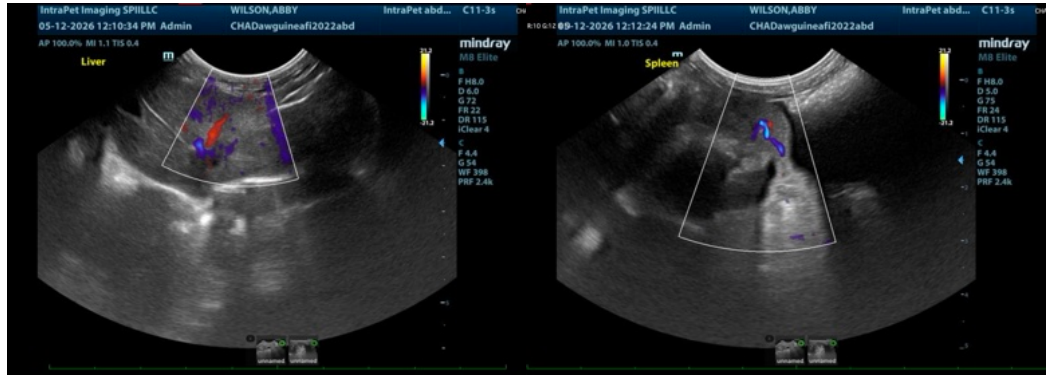
- Mild hepatic remodeling.
- Slight free fluid. This may be owing to uterine cyst rupture.
- Macrocystic left ovary
- Microcystic right ovary
- Thickened irregular uterus with fluid filled lumen.
- Renal mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend exploratory surgery with expectations towards ovariohysterectomy. Sampling of the free fluid at the beginning of surgery would be recommended with immediate cytospin. However, ovariohysterectomy is recommended.







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.

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