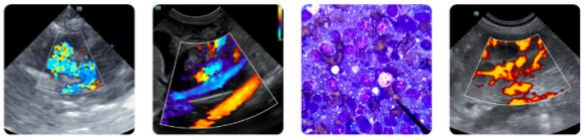


PATIENT

Sophia Mozuch

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 Years

WEIGHT

4.89 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Carver

INVOICE

16200

DATE

05/14/26

PRESENTING CLINICAL SIGNS

P presented as a transfer for acute pancreatitis, acting painful. P has been seen by rDVM multiple times in the last week. P had BW & Radiographs performed. P is already on GI LF diet. Gets dental treat only. O reports no V+ or D+. P yelping and shaking all started within the last week. Concerns for possible IVDD. rDVM started Carprofen on 5/8. Added on Gabapentin at a later visit due to p not responding well. On PE today - p is painful on abdominal and spinal palpation, shaking, randomly yelping. Concerns for IVDD v Panc v other.

5/8 rDVM BW: ALP 141 PSL: 935 Amylase 1742 GLOB 3.9 5/14 EPOC: WNL 5/14 Radiographs: Assessment 1. Normal thorax. There is no pulmonary metastasis or intrathoracic lymphadenopathy. 2. Normal abdomen. No evidence of peritoneal effusion, gastrointestinal mechanical obstruction, or obvious evidence of pancreatitis. 3. No evidence of intervertebral disc disease, fractures, or luxation's involving the spine.

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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex. Slight renal mineralizations were noted and appeared nonobstructive. The left kidney measured 4.1 cm in length. The right kidney measured 4.4 cm in length. The largest calculus measured 0.4 cm at the corticomedullary junction.

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 measured 0.5 cm width. The right adrenal gland measured 0.64 cm width at the cranial pole and 0.48 cm width at the caudal pole.

Spleen

The **spleen** revealed occasional hyperechoic lipid plaques.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical

PATIENT

Sophia Mozuch

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 Years

WEIGHT

4.89 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Carver

INVOICE

16200

DATE

05/14/26

significance to this presentation. The hepatic lymph nodes were unremarkable. The gallbladder was mildly over distended with mild suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

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

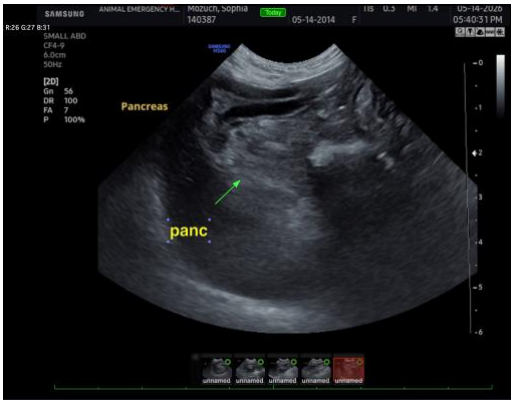
The **pancreas** revealed mild heterogenous parenchymal changes. The amount of pancreatic remodeling was best represented in the right base. Some level of low-grade pancreatitis is possible. Subxiphoid palpation is recommended to assess if there is any pain or discomfort.

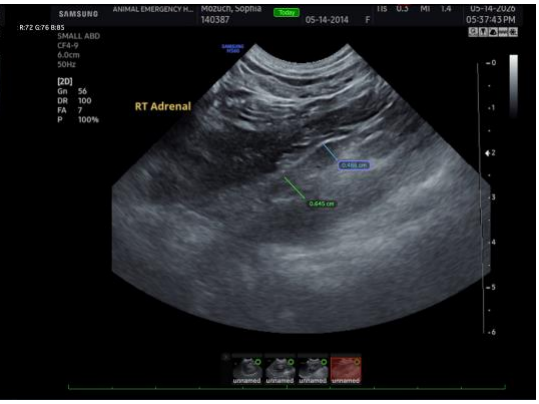
ULTRASONOGRAPHIC FINDINGS

- Age-related abdominal changes with mild hepatic remodeling and pancreatic remodeling.
- Age-related renal changes with nonobstructive nephrolithiasis.

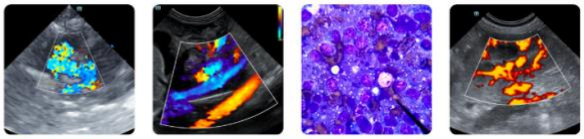
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant disease. Supportive care should prove effective.





SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Sophia Mozuch

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 Years

WEIGHT

4.89 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

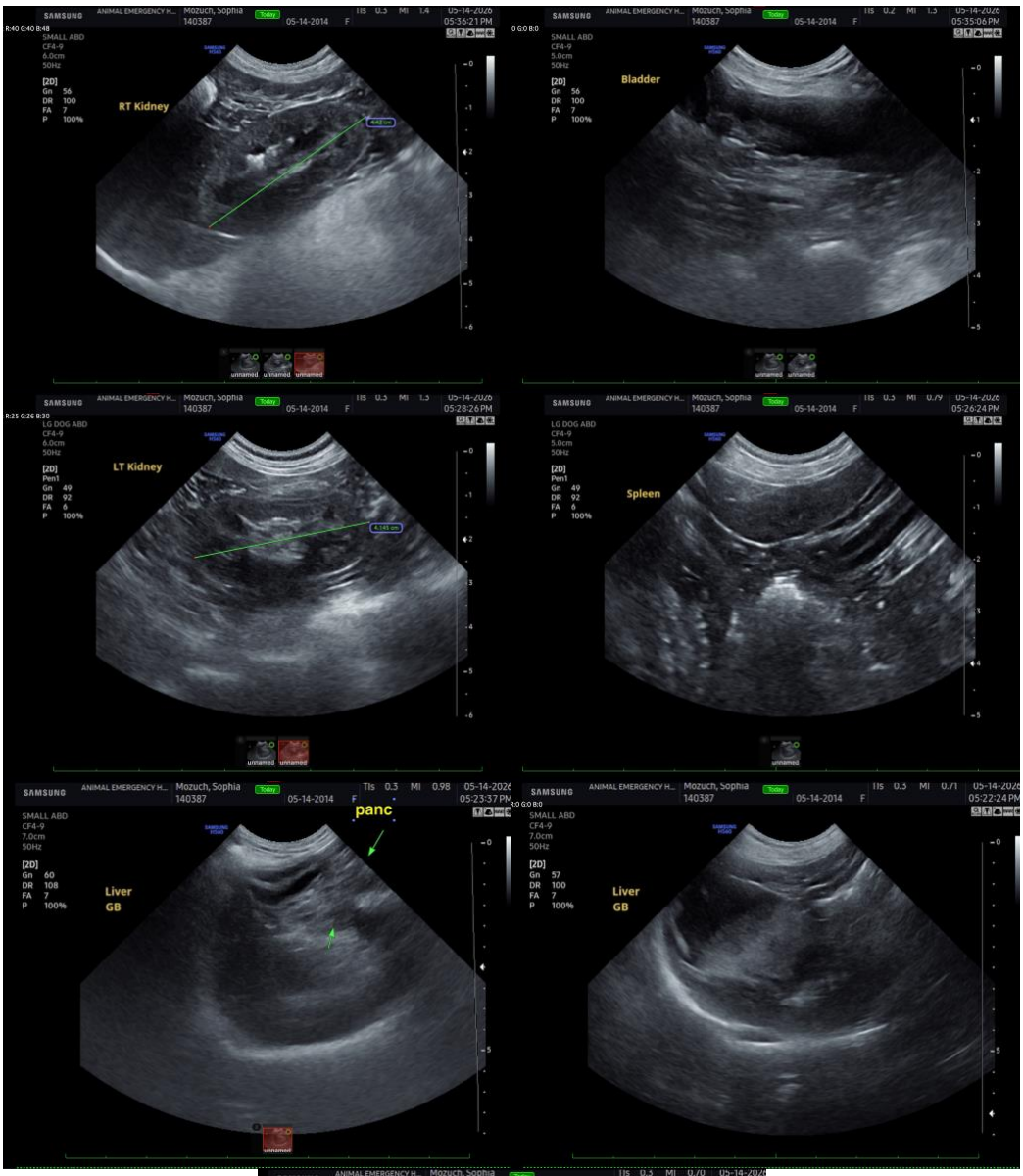
Dr. Carver

INVOICE

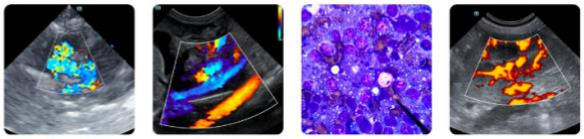
16200

DATE

05/14/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Sophia Mozuch

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 Years

WEIGHT

4.89 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Carver

INVOICE

16200

DATE

05/14/26

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