



PATIENT

Ruby Rescue

SPECIES

Canine

BREED

Swiss Mountain Dog

SEX

Spayed female

AGE

3 years

WEIGHT

41 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores Veterinary
Emergency Center

REFERRING VET

Dr. Miller

INVOICE

77909

DATE

5/25/26

PRESENTING CLINICAL SIGNS

History: For the last 3 days has been having dh (some blood present prev now all blood) V+ started yesterday am - now with some blood noted.

Started bland diet last pm and turned nose up to it.

Previous Health Concerns Urinary incontinence at times.

Current Medications Proin - not given in 2 days

Owner/Foster has never seen pet eat anything she shouldn't

Hospitalized since Saturday, continues to regurgitate, NG tube placed.

Abnormal PE/Chem/CBC/UA Results: CBC: NR EPOC: NR Chem: Phos 5.2; TP 5.2; Lipase 742

Vcheck cPL 1215 Rads: 1. Nonspecific fluid-filled gastrointestinal tract with moderate gastric dilation and colonic content suggestive of impending diarrhea. Please note that proximal duodenal obstruction or mucosal irritation by progression of non-opaque foreign material through the intestines cannot be ruled out on the images provided. 2. Equivocally small renal silhouettes, possibly related to chronic nephropathy or juvenile renal dysplasia considering the young age of the patient. 3. Moderately distended urinary bladder, likely of uncertain significance on this single study in a patient with a history of urinary incontinence.

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 was noted. Ureteral papillae were normal.

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 7.5 cm. The left kidney measured 6.6 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 measured 3.07 x 0.5 cm at the cranial pole and 0.6 cm at the caudal pole. The right adrenal gland measured 0.8 cm at the cranial pole and 0.6 cm at the caudal pole.

Spleen

The **spleen** was uniform, yet folded upon itself cranially.



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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.

Gastrointestinal

The **stomach** revealed a moderate amount of gastric stasis. Minor echogenic material was noted in the stomach, yet was non-obstructive. The pyloric angle was slightly flattened in this patient with gastric over distension. This may be a predisposition to bloat and eventual torsion. This should be monitored for that potential especially with the folded spleen. The small intestines and colon are empty.

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

Moderate gastric stasis with minor echogenic material in the stomach. Slightly flattened pyloric angle with gastric over distension. Potential predisposition for bloat.

Spleen folded upon itself.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recheck sonogram is recommended in 24 hour after n.p.o. to assess for persistent stasis or resolution on medical management.



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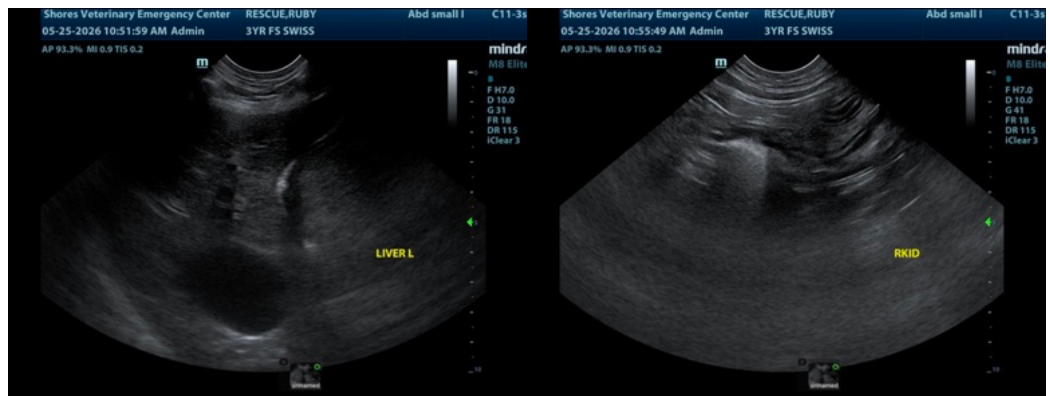
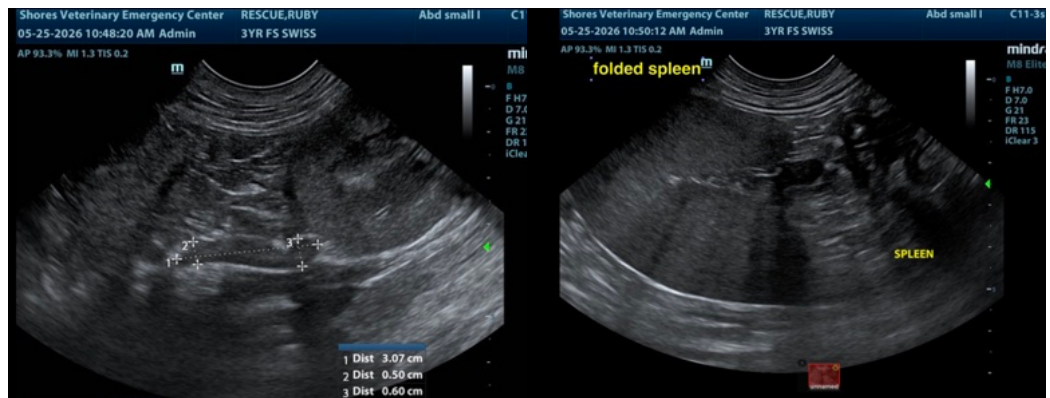
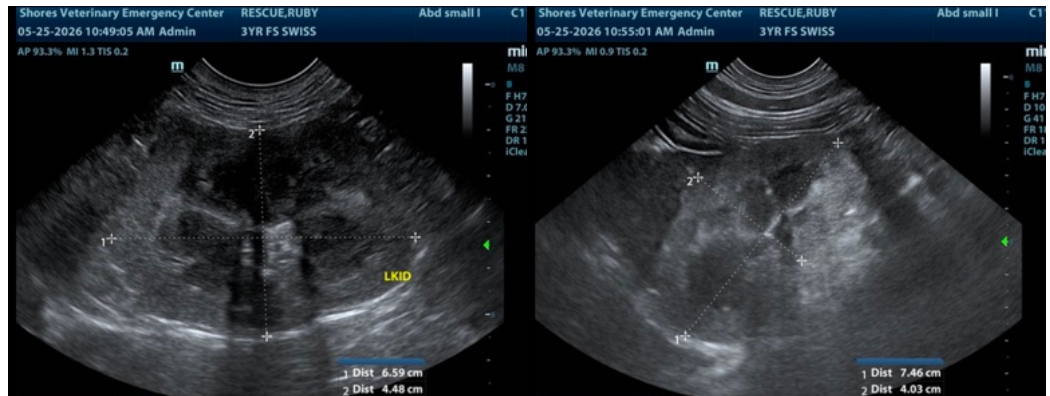
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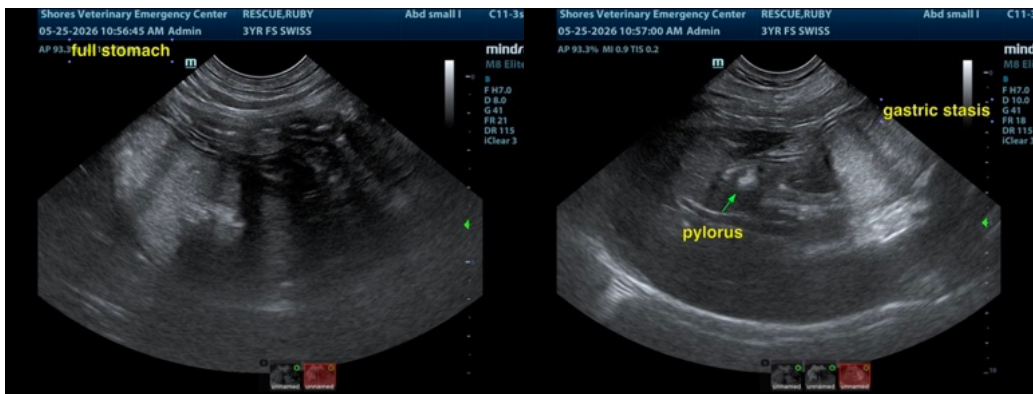
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, CEO of SonoPath.com

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