



PATIENT

Cooper Burau

SPECIES

Canine

BREED

French Bulldog

SEX

Neutered male

AGE

8 years

WEIGHT

6.9 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency
Hospital Hospital
Volusia

REFERRING VET

Dr. Carver

INVOICE

77927

DATE

5/26/26

PRESENTING CLINICAL SIGNS

History: P presented as a transfer from AEHPC for cont hospitalization. P had IVF, abx for the last 24 hrs. IVC blown in the early AM and not replaced.

P presented for AEPHC for V+ on and off for the last 3 days. P had fever on presentation which has normalized overnight. P had CPL (normal), radiographs, and BW at AEPHC. BW reveals elevated liver enzymes.

Radiology Report: Assessment

There is suspicion of irregular mineral opacity foreign material in the duodenum. No conclusive evidence of duodenal obstruction is seen. The remainder the small intestine is fluid filled; this is suggestive of enteritis. Gastroenteritis secondary to dietary indiscretion is a consideration. Pancreatitis is a consideration. There is suspicion of gallbladder and bile duct cholelithiasis. Correlate with clinical and laboratory findings. Medical management of clinical signs is recommended as indicated with recheck three view abdominal radiographs after an 8-12 hour fast to evaluate gastrointestinal emptying. Ultrasound may be indicated for further evaluation of the gastrointestinal tract, pancreas, and hepatobiliary structures.

ALT: >3K ALP>993 GGT: 32 TBIL: 0.5 THCOL>450

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 left kidney measured 4.2 cm. The right kidney measured 4.3 cm.

The residual prostate measured 0.6 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 0.5 cm. The right adrenal gland measured 0.68 cm.

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



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congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The **liver** revealed increased portal markings and mild swollen contour. This is consistent with cholangiohepatitis pattern. The liver parenchyma was fairly uniform. There were no overt masses present. The gallbladder revealed inspissated bile. There was no evidence of mucocele formation. The common bile duct measured 0.45 cm with minor inspissated debris.

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 pancreatic base and right limb of the **pancreas** were heterogenous with mixed echogenic changes. The region measured approximately 3.0 cm.

ULTRASONOGRAPHIC FINDINGS

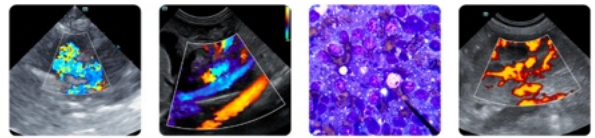
Cholangiohepatitis liver pattern.

Minor biliary congestion, not to mucocele formation. Minor mucoduct.

Chronic active pancreatitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis titers, ultrasound-guided FNA of the liver is indicated. Treatment for pancreatitis, cholangiohepatitis and Ursodiol therapy over the next 6-8 weeks are indicated. More specific therapy is recommended based on FNA or core liver biopsy results. There was no evidence of neoplasia. Recheck sonogram is recommended in 5-7 days depending upon progression or regression of the clinical signs.



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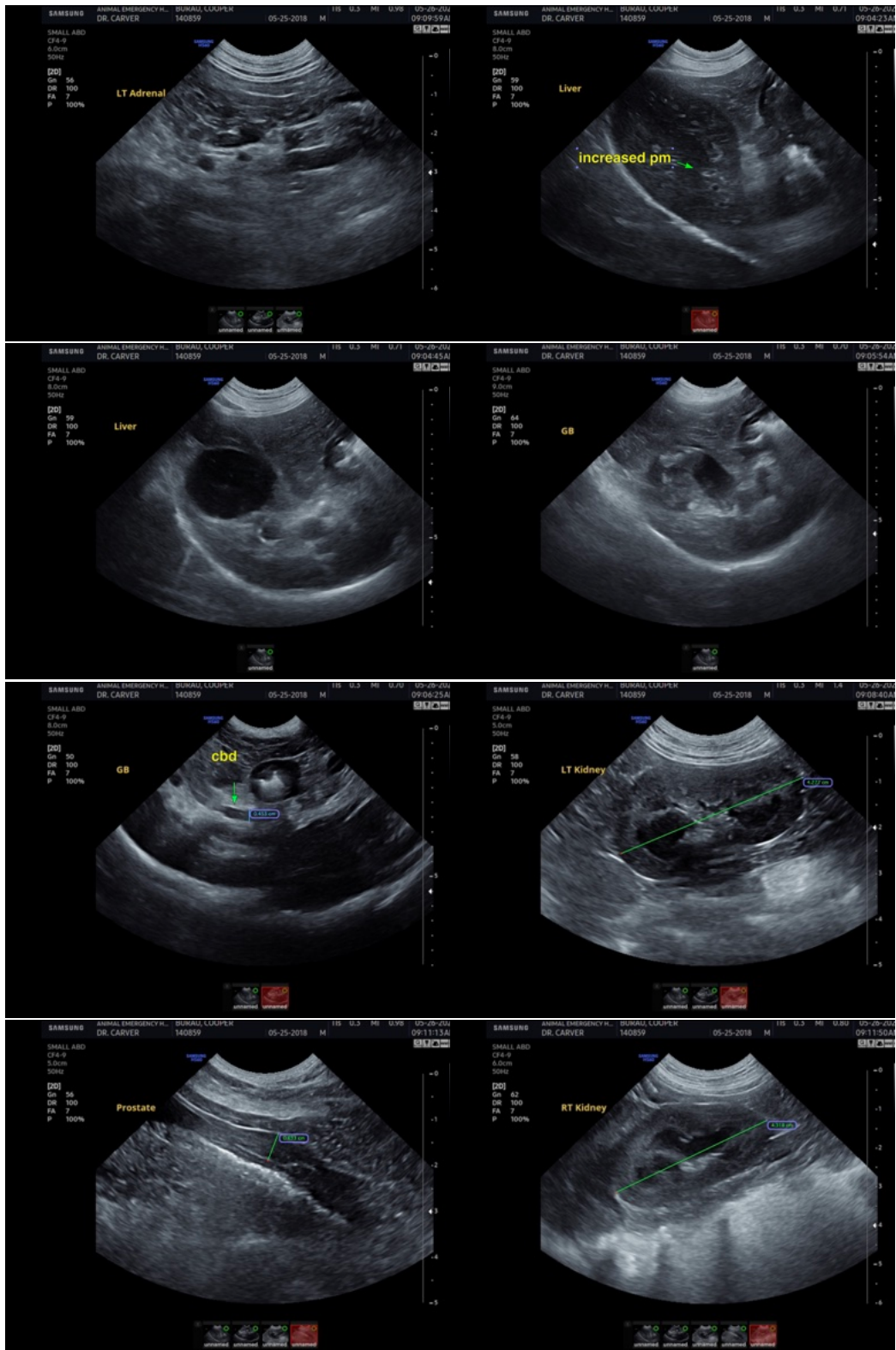
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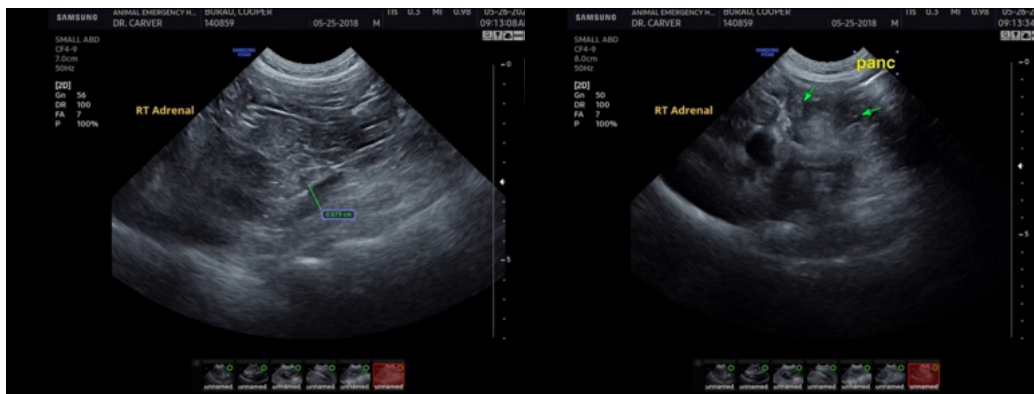
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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