



PATIENT

Kona Rahl

SPECIES

Canine

BREED

Doberman

SEX

Spayed female

AGE

6 years

WEIGHT

82.6 lbs

PRESENTING CLINICAL SIGNS

History: Ongoing forelimb lameness, carpal swelling. On chronic carprofen than galliprant. Mild progressively liver enzymes over the past 6-9 months

Abnormal PE/Chem/CBC/UA Results: AST 108 (15-66) ALT 762 (12-118) ALP 319 (5-131)

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 6.6 cm. The right kidney measured 6.4 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

The **left adrenal gland** was 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 0.55 cm. The right adrenal gland was not visualized.

IMAGING PERFORMED BY

Dr. Hendricks

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 was noted.

HOSPITAL NAME

Grove Small AH

REFERRING VET

Dr. Dunaway

INVOICE

78153

Liver

The **liver** revealed coarse architecture with mildly increased portal markings. The gallbladder and common bile duct were unremarkable.

DATE

5/29/26



PATIENT

Kona Rahl

SPECIES

Canine

BREED

Doberman

SEX

Spayed female

AGE

6 years

WEIGHT

82.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Hendricks

HOSPITAL NAME

Grove Small AH

REFERRING VET

Dr. Dunaway

INVOICE

78153

DATE

5/29/26

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.

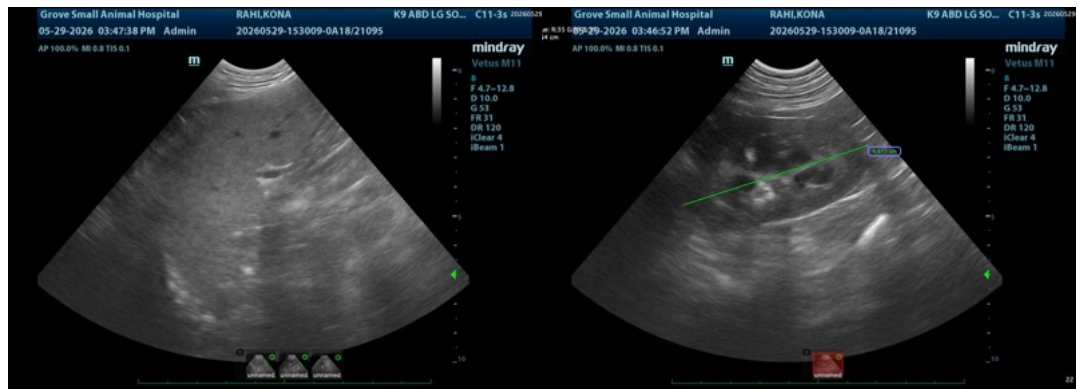
ULTRASONOGRAPHIC FINDINGS

Non-specific inflammatory hepatopathy.

Minor chronic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis titers are indicated in this patient. Full coagulation panel and VonWillebrand's factor is warranted prior to sampling. Ultrasound-guided core biopsy or surgical core biopsy with copper assessment would be ideal. Ultrasound-guided FNA would allow for inflammatory cell type evaluation. This is a non-specific presentation.





PATIENT

Kona Rahl

SPECIES

Canine

BREED

Doberman

SEX

Spayed female

AGE

6 years

WEIGHT

82.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Hendricks

HOSPITAL NAME

Grove Small AH

REFERRING VET

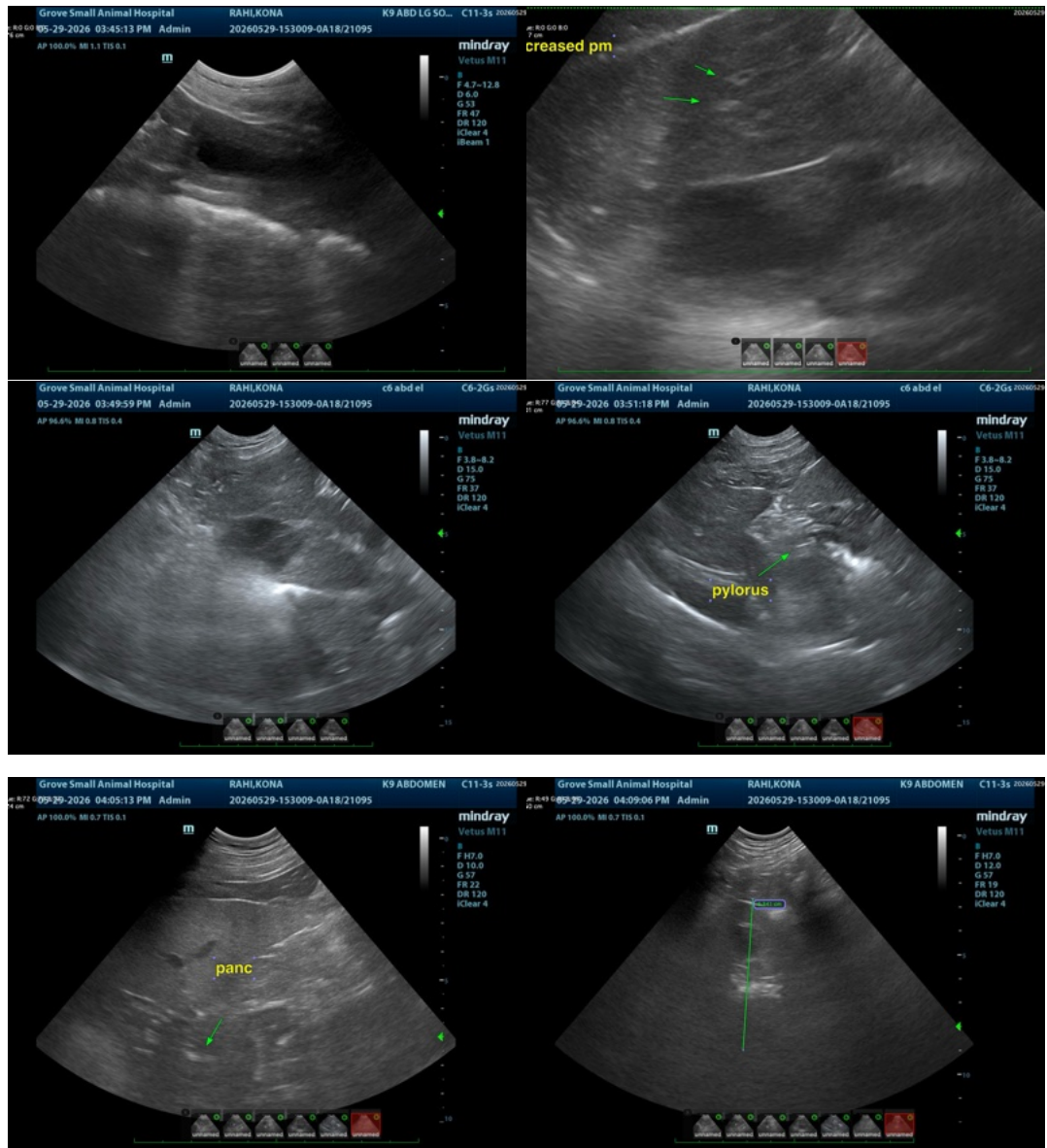
Dr. Dunaway

INVOICE

78153

DATE

5/29/26



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 of SonoPath.com

info@SonoPath.com