



**PATIENT**

CC Peralta

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

Intact Female

**AGE**

9 Years

**WEIGHT**

4.4 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Lemanski

**HOSPITAL NAME**

AEH Volusia

**REFERRING VET**

Dr. Kari Lemanski

**INVOICE**

16651

**DATE**

8/1/22

**PRESENTING CLINICAL SIGNS**

History: Patient had vaginal discharge and elevated liver values in March . RDVM treated with antibiotics and denamarin. Today patient was presented lethargic.

Abnormal PE/Chem/CBC/UA Results: Coag : pt/aPTT - normal

47 still images and 3 videos were submitted.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal. This is a minor change.

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 kidneys measured 3.0 cm each.

**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 0.4 cm. The left adrenal gland measured 0.3 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 congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

**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**

Minor stasis was noted in the **stomach** with gas accumulation. The small intestine and colon were unremarkable.



## PATIENT

**Pancreas**

CC Peralta

Diffuse hyperechoic changes were present in the area of the **pancreas**. The pancreatic remodeling was evident with multifocal to diffuse hyperechoic changes. These changes are consistent with fibrosis, amyloid, saponification of fat and may contain areas of low-grade chronic active inflammation especially if pain on imaging (+ Murphy sign) was present +/- focal subxyphoid palpation reveals pain response. No overt masses were noted.

## SPECIES

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Chihuahua

## Other

The **uterus** was visualized in one still image, measuring 4.0 mm. Closed pyometra noted, however, given the patient history, underlying low grade metritis or open pyometra is possible.

## SEX

Intact Female

## ULTRASONOGRAPHIC FINDINGS

- Mild gastritis pattern
- Pancreatic fibrosis pattern
- Age-related urinary bladder changes
- Close pyometra, underlying low grade metritis or open pyometra is possible

## AGE

9 Years

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ovariohysterectomy and treatment for gastritis indicated.

## WEIGHT

4.4 kg

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Lemanski

## HOSPITAL NAME

AEH Volusia

## REFERRING VET

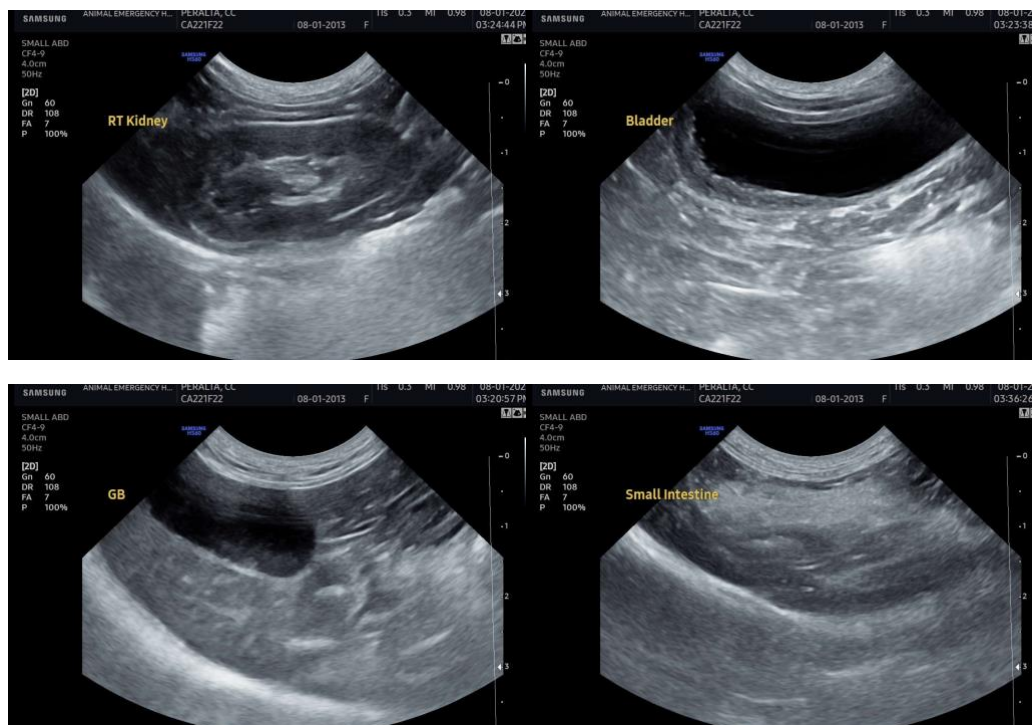
Dr. Kari Lemanski

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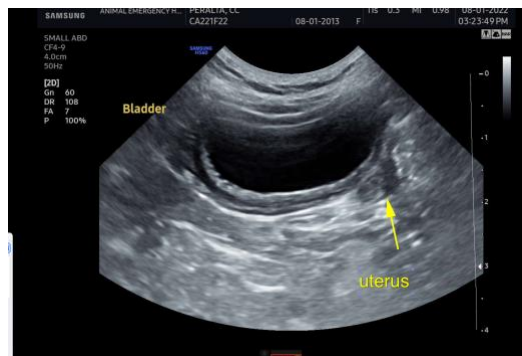
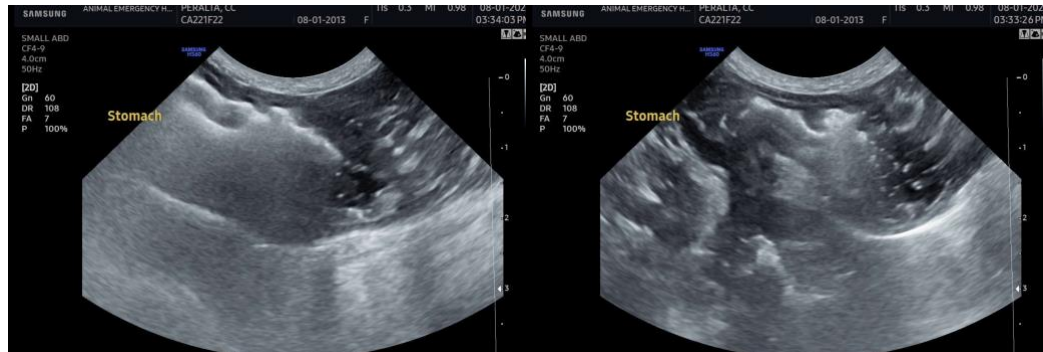
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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, Cert. IVUSS, CEO of SonoPath.com**  
info@SonoPath.com