



PATIENT

Sadie Siple

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

6 years

WEIGHT

53.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ken Leal

HOSPITAL NAME

Blairstown AH

REFERRING VET

Dr. Chciuk

INVOICE

70369

DATE

1/21/26

PRESENTING CLINICAL SIGNS

- Vomiting, diarrhea, abdomen painful
- Radiographs unremarkable
- severe dehydration, lethargic
- Medication: Cerenia, metronidazole, sucralfate, IVF
- Hemoconcentration and mild azotemia (suspect from dehydration) Mild AlkPhos, and ALT elevations, hyponatremic, hypochloremia

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction and appeared normal. 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 7.2 cm. The left kidney measured 5.8 cm.

Adrenal Glands

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The right adrenal gland measured 2.56 x 1.13 cm at the cranial pole and 0.9 cm at the caudal pole. The left adrenal gland measured 2.33 x 0.8 cm at the cranial pole and 0.75 cm at the caudal pole.

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.



PATIENT

Sadie Siple

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

6 years

WEIGHT

53.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ken Leal

HOSPITAL NAME

Blairstown AH

REFERRING VET

Dr. Chciuk

INVOICE

70369

DATE

1/21/26

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. 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 significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

The **stomach** was empty with normal wall thicknesses and structure. Variable areas of intestine were noted with reactive mesentery. Fluid filled colon was noted.

Pancreas

Mild, mixed hypoechoic parenchymal changes were noted in the **pancreas** with enhanced surrounding mesentery.

ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis.
- Colitis pattern with minor pancreatitis.
- Bilateral adrenal hypertrophy.
- Reactive hepatopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no overt evidence of neoplasia; however, I cannot rule out a pre-neoplastic state. There was no evidence of foreign bodies. Eventual work-up for Cushing's/PDH is recommended. If the patient appears Cushingoid and urine specific gravity is less than 1.020 then management for gastroenteritis is warranted.

The hepatic clinical sonographic presentation is most consistent with Reactive Hepatopathy which is the most common cause of liver enzyme elevation in dogs and cats. The presumption is that gut and other organ antigen stimuli may be causing a low-grade immune response through portal system with which the liver is reacting to causing low-grade enzyme elevations. US-guided FNA could be performed to assess if low grade lymphoplasmacytic inflammation is present that would support this theory. If FNA is performed, please ask the cytologist to emphasize the primary inflammatory cell type. Empirical treatment measures to address this issue can include diet change to hydrolyzed diet, probiotics, deworming, nutraceuticals (SAME, Actigall...), dental exam and cleaning, and potentially antibiotics such as Clavamox. Metronidazole and Tylosin have traditionally been utilized for this purpose but new studies show that both these antibiotics can disrupt the normal intestinal bacterial flora (intestinal dysbiosis) for weeks and up to 4-6 months. Therefore, Metronidazole and Tylosin should be utilized as a last resort if other efforts have not been effective and sonographic organ appearance remains benign.



PATIENT

Dietary indiscretion, food intolerance, structurally significant inflammatory bowel or occult parasitism and occult Addison's are all potentials.

Sadie Siple

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

6 years

WEIGHT

53.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ken Leal

HOSPITAL NAME

Blairstown AH

REFERRING VET

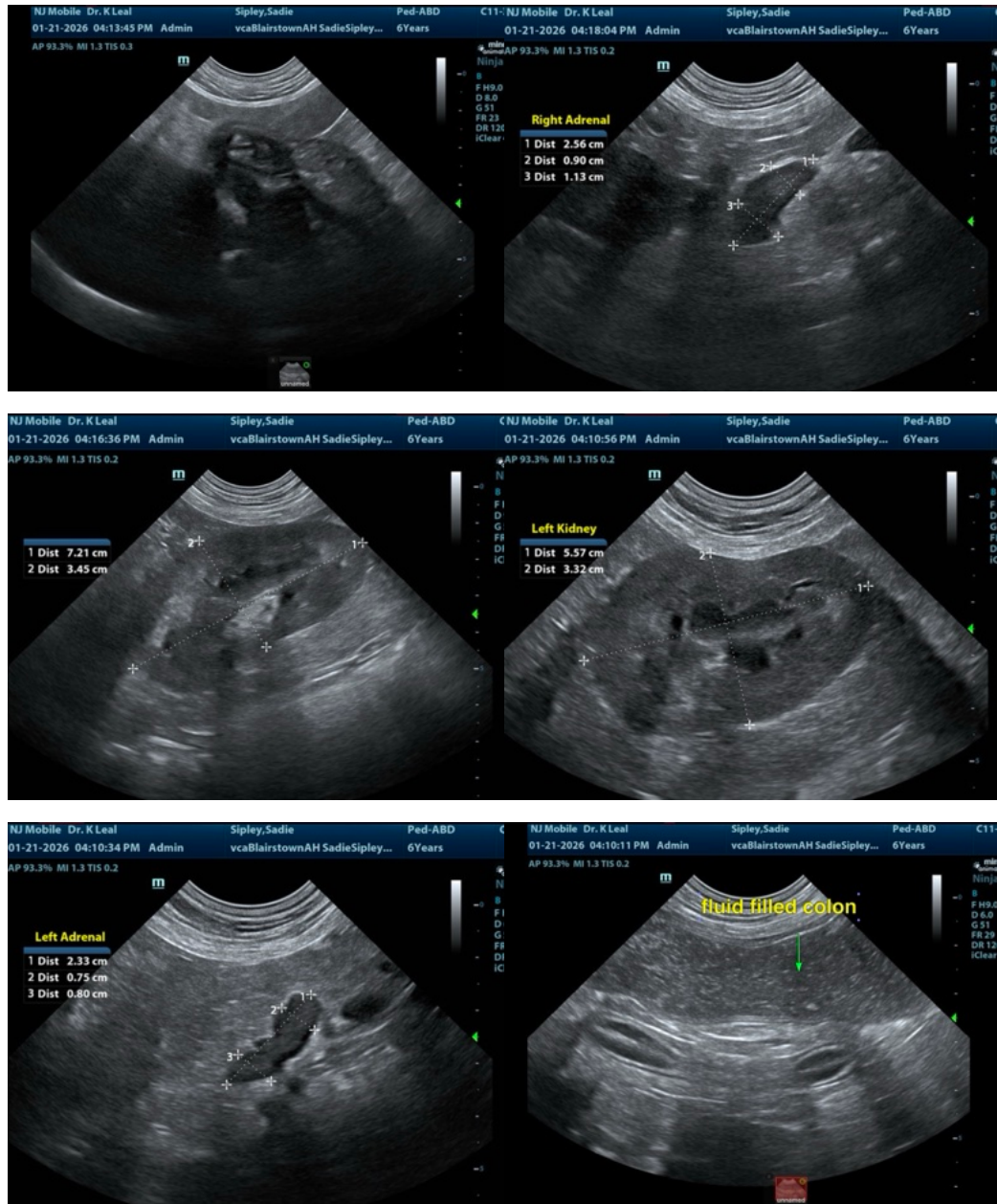
Dr. Chciuk

INVOICE

70369

DATE

1/21/26





PATIENT

Sadie Siple

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

6 years

WEIGHT

53.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ken Leal

HOSPITAL NAME

Blairstown AH

REFERRING VET

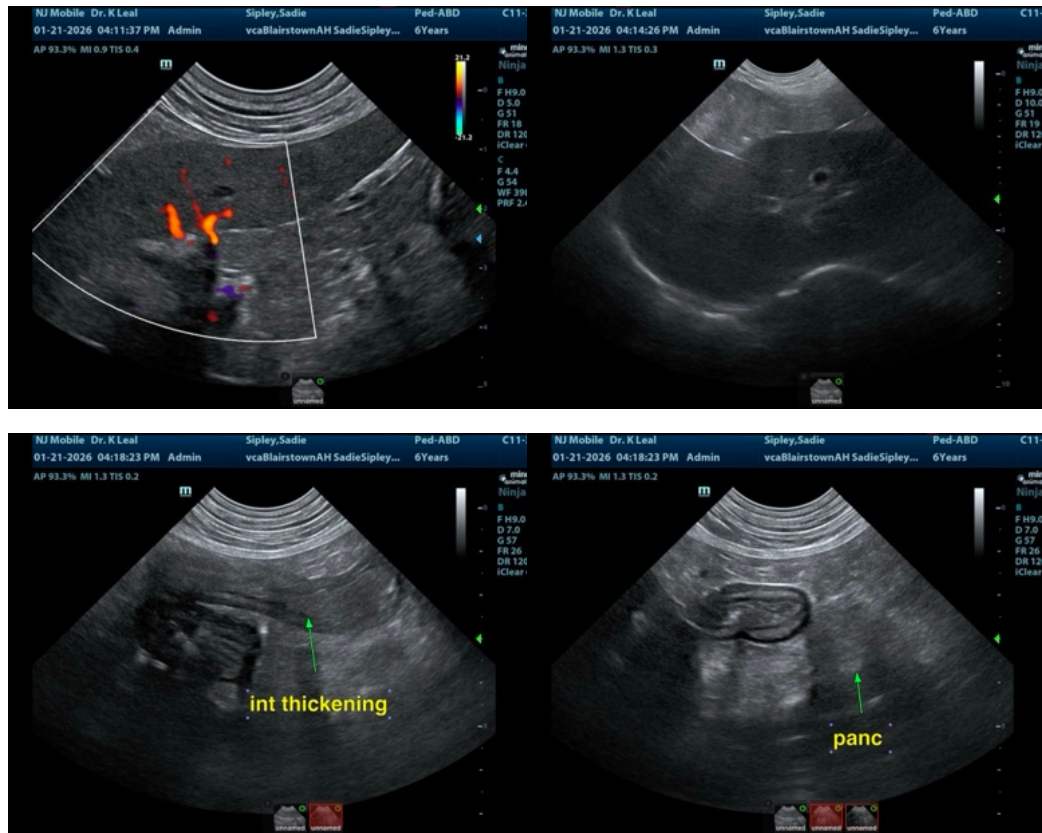
Dr. Chciuk

INVOICE

70369

DATE

1/21/26



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, Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com