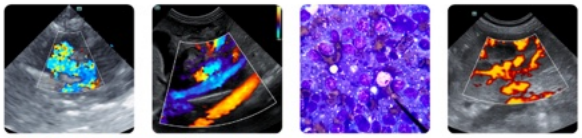

PATIENT

Bella Lewczyk

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

Spayed female

AGE

8 years

WEIGHT

8.2 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Harmony AH

REFERRING VET

Dr. Gzurer

INVOICE

69162

DATE

11/28/25

PRESENTING CLINICAL SIGNS

History: Frequent bouts of V+/D+ +/- hospitalization/ HGE, dehydration, this time with hematochezia and hematemesis, hx of mild HM, no evidence of FBO on xray Current meds: Ondansetron and Cerenia at Urgent care 11/25, NOW famotidine, prednisone, Endosorb, metronidazole, sucralfate, ampicillin, panoquell
Abnormal PE/Chem/CBC/UA Results: Mild dehydration (increased BUN and increased ALB), Normal CBC w/ mild neutrophilia

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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.58 cm. The right kidney measured 4.0 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 right adrenal gland measured 1.4 x 0.35 cm at the cranial pole and 0.35 cm at the caudal pole. The left adrenal gland measured 1.51 x 0.45 cm at the cranial pole and 0.51 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.

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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 **gastric** wall was thickened and measured 0.84 cm with some early loss of mural detail was noted. The small intestine presented spasming with loss of mural detail. There was no evidence of foreign bodies. The colon was unremarkable with soft stool in the colon.

Pancreas

The **pancreas** was mildly heterogenous. This is consistent with remodeling from prior episodes of pancreatitis. However, active inflammation is suspected with enhanced surrounding mesentery around the pancreas.

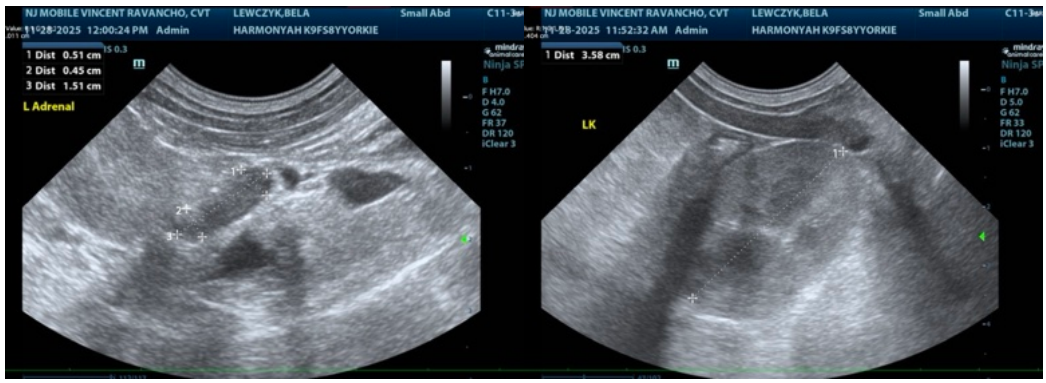
ULTRASONOGRAPHIC FINDINGS

Gastroenteritis and pancreatitis pattern.

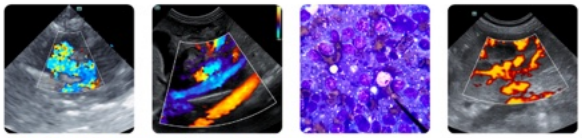
Mild, degenerative renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

GI protectants, plasma expanders, and broad-spectrum antibiotics are all indicated over the next 48-72 hours. A recheck sonogram is recommended in 5-7 days to ensure adequate resolution.



New Jersey Mobile
FUELED BY SONOPATH VETERINARY ULTRASOUND



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath www.SonoPath.com info@sonopath.com 800.838.4268

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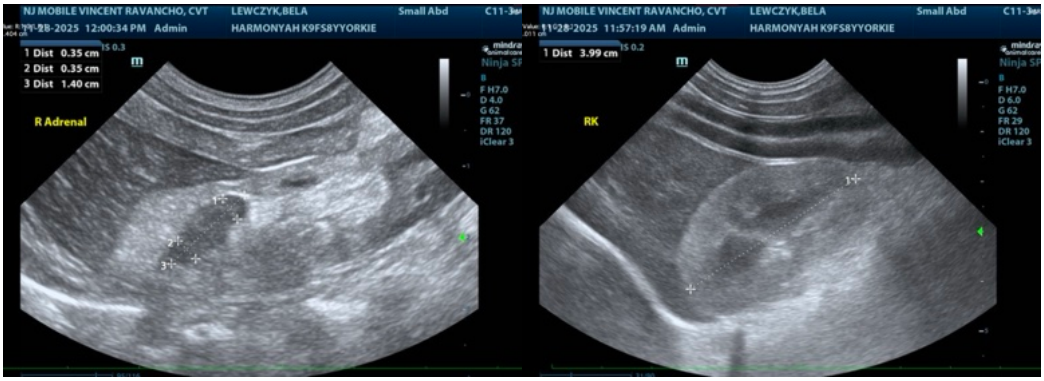

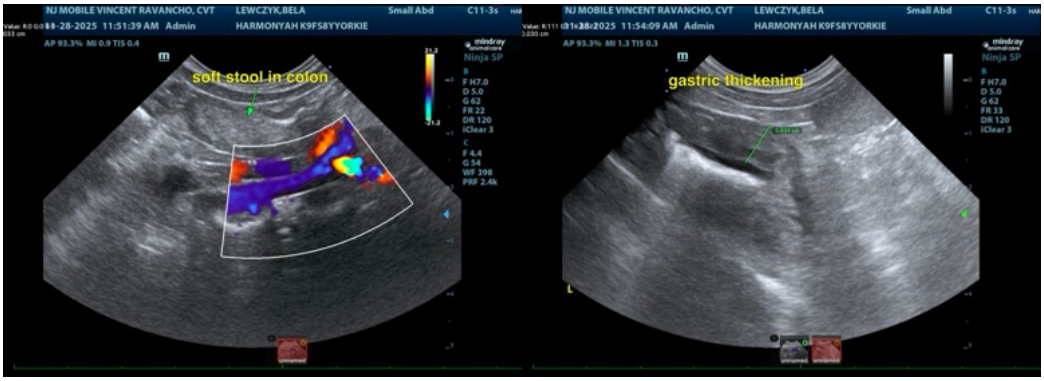

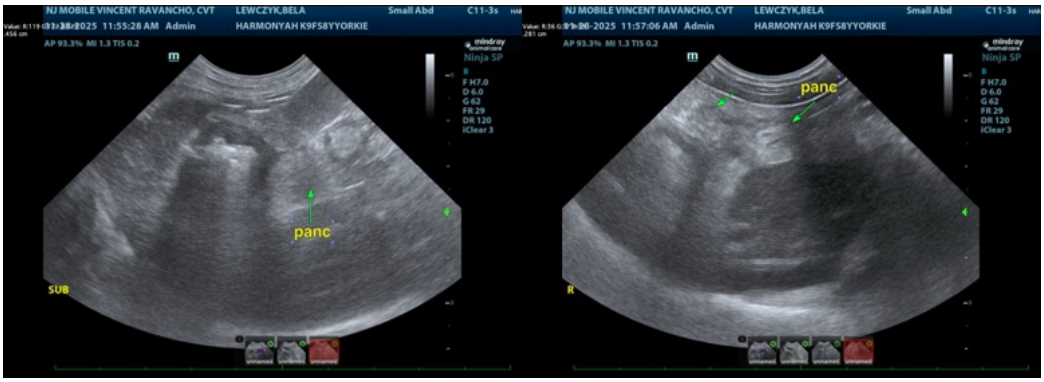

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com

Info@SonoPath.com