



PATIENT

Abbie Struebel

SPECIES

Canine

BREED

Cockapoo

SEX

Spayed female

AGE

9 years

WEIGHT

22 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Meghan Morse, LVT,
CVT

HOSPITAL NAME

Banister AH

REFERRING VET

Dr. Banister

INVOICE

69528

DATE

12/23/25

PRESENTING CLINICAL SIGNS

History: Vomiting +/- pancreatitis, febrile, lethargic Current meds: Cerenia, Pantoprazole
Abnormal PE/Chem/CBC/UA Results: Abn snap CPL, u/a not yet performed

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented a relatively uniform thickening of the cranioventral and craniodorsal mucosae with micropolypoid mucosal changes without involvement of the submucosae. The urine presented some echogenicity consistent with suspended debris. No evidence of urethral pathology was present. This presentation is most consistent with chronic cystitis. Technically transitional cell carcinoma cannot be ruled out without histopathological review but is not overtly suspected based on this pattern. Cystocentesis and urine culture +/- pathological review of urine cytology would be warranted. No overt calculi were present at this time.

The **kidneys** were both swollen with some loss of corticomedullary definition noted. Mineralization was noted in the kidneys. The kidneys were hypervascular on Power Doppler assessment. Inflammation was noted around both kidneys. The left kidney measured 4.68 cm. The right kidney measured 6.5 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 1.86 x 0.66 cm at the cranial pole and 0.53 cm at the caudal pole. The right adrenal gland measured 1.84 x 0.71 cm at the cranial pole and 0.6 cm at the caudal pole.

Spleen

The **spleen** was mildly enlarged with normal vascularity. The spleen is likely reactive state.

Liver

The **liver** revealed mildly increased portal markings. The gallbladder had a mildly thickened wall, yet was otherwise unremarkable.

Gastrointestinal

A minor amount of non-shadowing, non-obstructive ingesta was noted in the **stomach**. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.



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Pancreas

Mild, heterogenous **pancreatic** changes were noted.

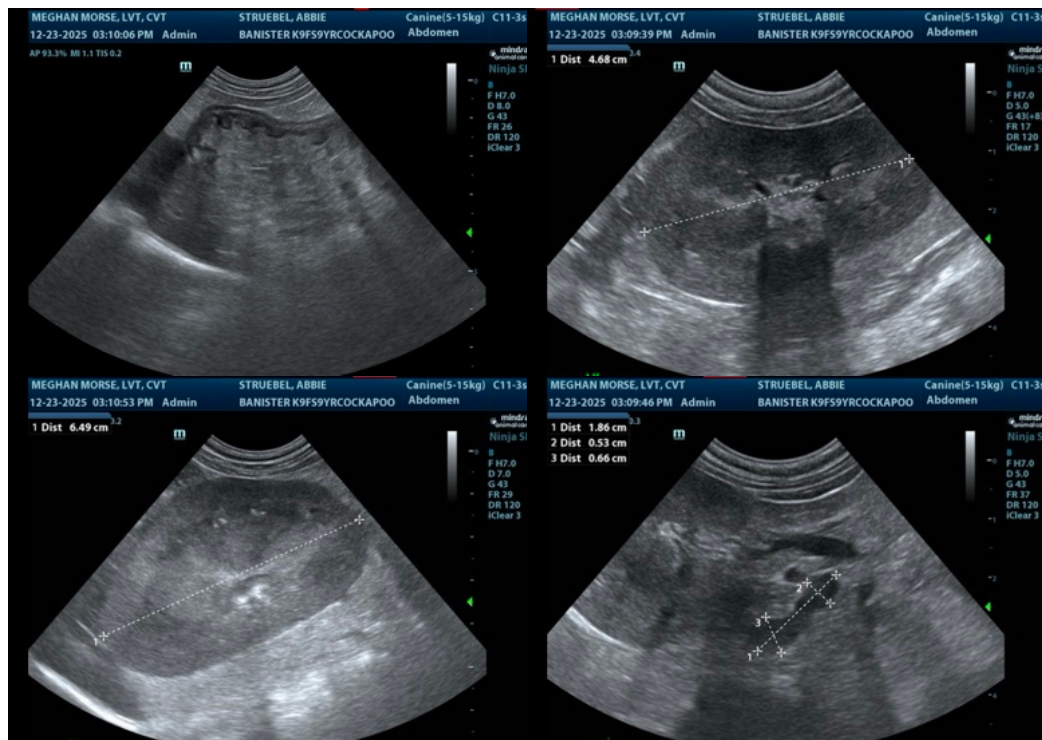
ULTRASONOGRAPHIC FINDINGS

Nephritis pattern, non-specific.

Heterogenous pancreatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a potential for emerging round cell neoplasia. Coagulation panel and 25-gauge FNA of the spleen, liver and renal cortex is indicated to assess for emerging round cell neoplasia versus multi-focal, inflammatory state. Blood pressure measurements are indicated. Given the nephritis CPL elevation and lipase elevation may be secondary to renal dysfunction. Leptospirosis titers are indicated as well. The prognosis is guarded. Treatment for nephritis is warranted.





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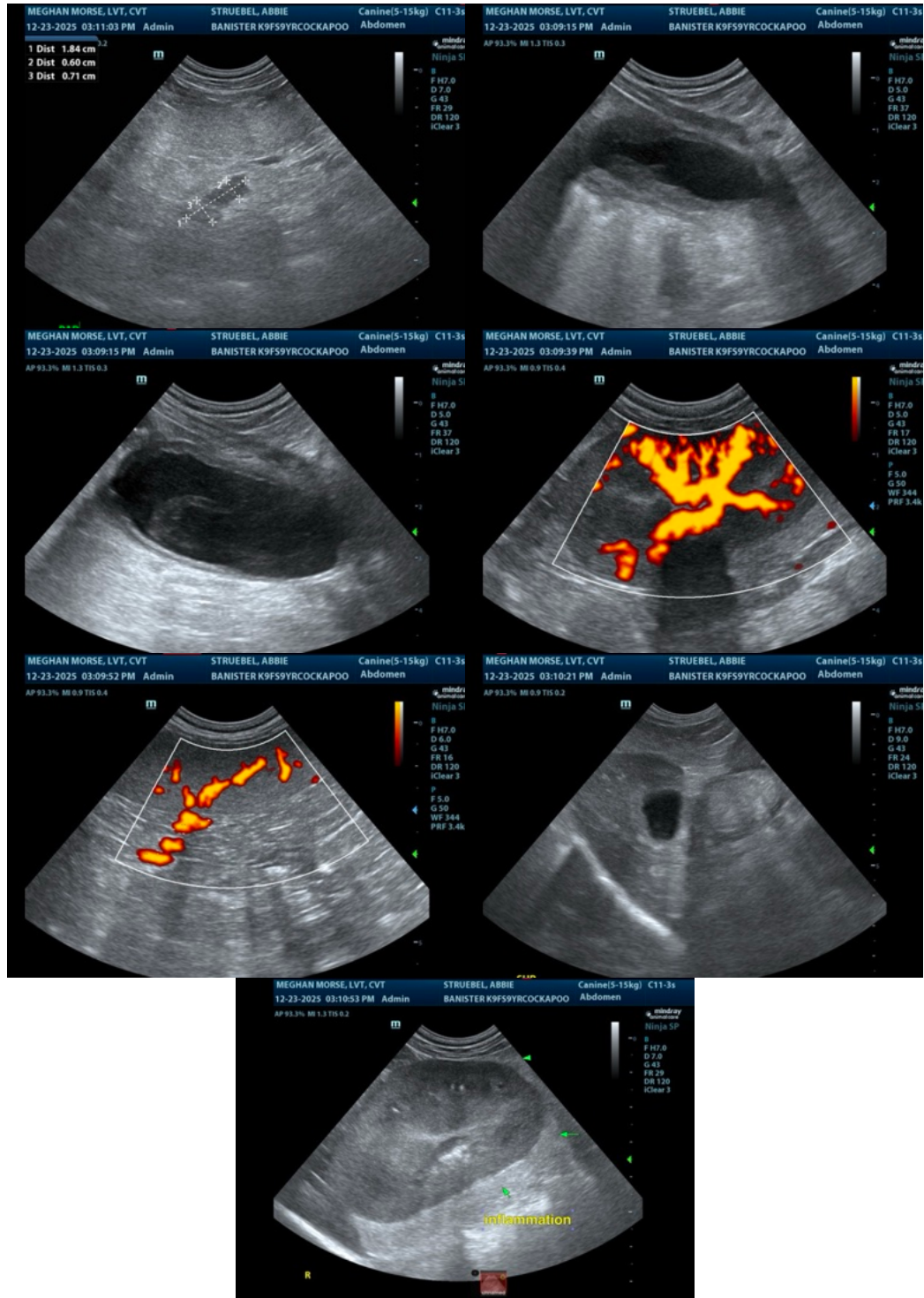
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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.

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