

**PATIENT**

Cody Linke

SPECIES

Canine

BREED

Papillon

SEX

Neutered Male

AGE

9 Years 7 Months

WEIGHT

11 Pounds

INTERPRETED BYBeth Johnson, DVM
DACVIM**IMAGING PERFORMED BY**

Amy Mayhew, LVT

HOSPITAL NAME

SVS Imaging MI

REFERRING VET

Family Pet Practice

INVOICE

39669

DATE

7/19/22

PRESENTING CLINICAL SIGNS

Current Medications: pimobendan 5mg 1/4 tab PO BID Revolution monthly Patient History: Last seen for biannual exam June 15, 2022 - discussed upcoming anesthesia/dental procedure, rec imaging (echo, AUS? prior to procedure), cardiac patient Recent BW/UA did show CaOx crystals in urine- had recommended further bladder eval to see if consistent finding, presence of urolith/renoliths for potential diet change. BW chems were unremarkable. Last abdominal ultrasound was done IH 9/2020 - was unremarkable at that time

Abnormal PE/Chem/CBC/UA Results: (exam done June 15, 2022): 5. Mild to mod tartar - considering dental cleaning, ideally with echo prior. 6. Grade II/VI heart murmur- left sided- radiographs obtained 6/15/22 for monitoring, VHS:11- consistent with last rads 6m prior. No pulmonary edema. slight narrowing of trachea. No cardiac clinical signs, has been doing well on pimobendan. No progression noted. 7. lung sounds normal, mild panting while here. No coughing at home 8. SQ soft mass over left lateral thigh- skin appears more erythematous. Some growth noted, prev measures 2 x2.5cm at time of FNA (Oct 2021-was suggestive of lipoma), now measures 2.4x 2.5cm. Consider removal with dental procedure? 13. wt loss noted-down 2lbs. No change in activity, but O is working on monitoring food intake. BCS looks great today, but checking BW to rule out metabolic causes

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

Urinary bladder is only mildly distended (empty). Visible contents are anechoic. Urinary bladder wall is unable to be fully assessed for pathology without further distension. No visible masses or cystoliths are observed. The trigone and visible pelvic urethra are normal thickness with a smooth mucosal surface. If there are urinary signs and/or concern for urinary bladder pathology, reassessment after complete filling is recommended.

Prostate is normal in size, echotexture and echogenicity for a neutered male.

The right kidney is normal in size (3.87 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

The left kidney is normal in size (3.74 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

Adrenal Glands

The right adrenal gland is normal in size (0.38 cm thick), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (0.34 cm at the cranial pole and 0.47 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

Liver

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and

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homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

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The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

BREED

Papillon

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with very echogenic reverberation artifact from intraluminal gas. There is no evidence of obstruction, foreign material or infiltrative disease; however, complete visualization of far wall is partially inhibited by gas. Pyloric outflow tract appears patent.

SEX

Neutered Male

The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

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The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

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Pancreas

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

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Free Abdomen

There is no evidence of free peritoneal effusion noted in these images.

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There is no apparent lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- Unremarkable normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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There are no ultrasonographically visible contraindications to proceeding with the dental procedure as planned.

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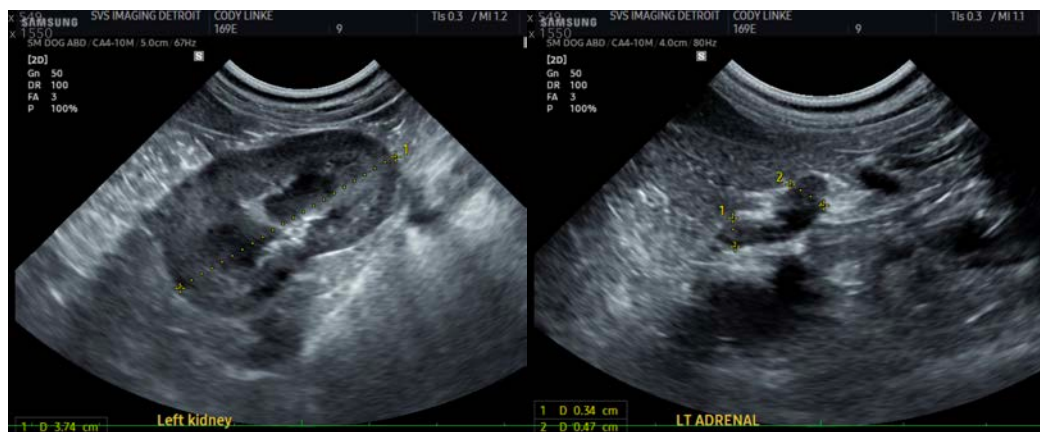
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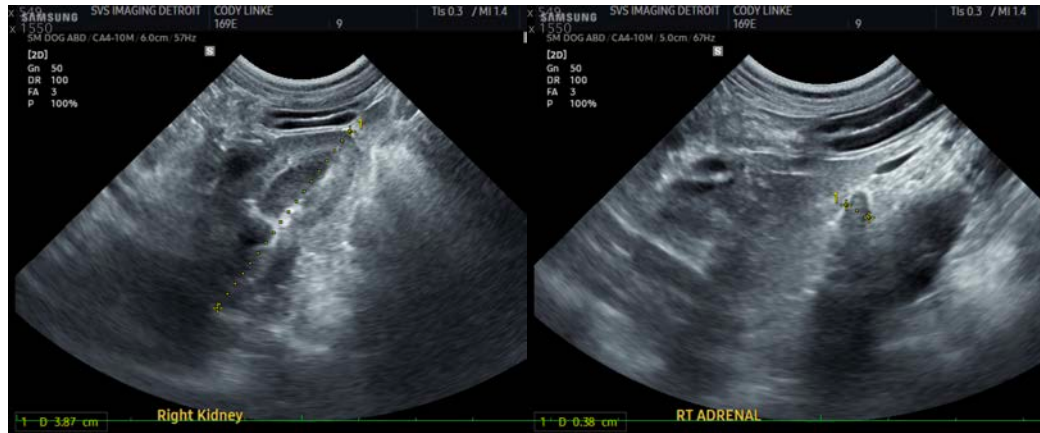
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM, DACVIM
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