



**PATIENT PRESENTING CLINICAL SIGNS**

Oscar Roney Increased ALT, not eating

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Canine 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 were noted. Ureteral papillae were normal. The residual prostate was uniform at 5.0 mm.

**BREED**

Scotty

**SEX**

Neutered Male

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.7 cm. The left kidney measured 4.71 cm.

**AGE**

8 Years

**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 0.59 cm at the caudal pole and 0.36 cm at the cranial pole. The right adrenal gland measured 0.56 cm at the caudal pole and 0.60 cm at the cranial pole.

**WEIGHT**

8 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**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.

**IMAGING PERFORMED BY**

Myers

**Liver**

The **liver** presented coarse architecture and increased portal markings. The common bile duct was mildly dilated and measured 0.48 cm with minor mucus debris. The gallbladder was overdistended with regional inflammation and double layered wall. An adjacent cystic structure was noted. Dilation of the adjacent cystic duct or duplicated gallbladder with mucocele and surrounding free fluid is a concern. This is a surgical emergency.

**HOSPITAL NAME**

Treasure Coast  
Animal ER

**REFERRING VET**

Dr. Cail

**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. 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.

**INVOICE**

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**Pancreas**

**DATE**

1/13/22

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.



**PATIENT**

**Free Abdomen**

Oscar Roney

Free fluid noted in the cranial abdomen.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

- Inflamed gallbladder mucocele with regional free fluid – suspect localized bile peritonitis and mucoduct
- Chronic inflammatory hepatopathy

**BREED**

Scotty

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend surgical intervention with cholecystectomy and common bile duct lavage. There are two structure structures in the region of the gallbladder. Idiopathic duplicated gallbladder with mucocele and inflammation suspected, or ectasia of the cystic duct. Regardless, this is a surgical emergency.

**SEX**

Neutered Male

**AGE**

8 Years

**WEIGHT**

8 kg



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Canine

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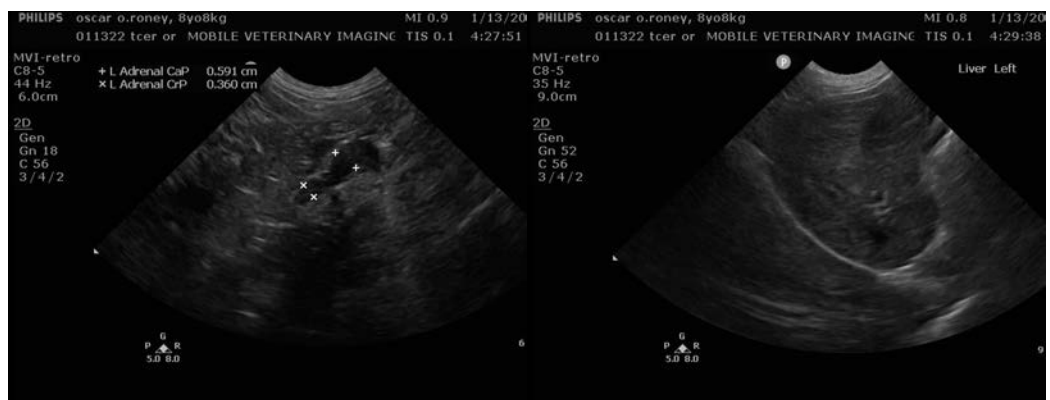
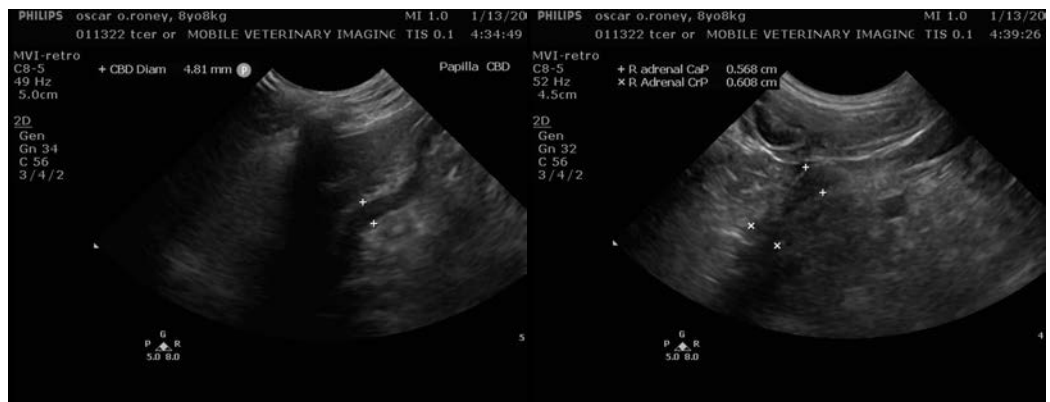
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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