



PATIENT

Lily Cain

PRESENTING CLINICAL SIGNS

Immune mediate thrombocytopenia diagnosed on November 26, 2021. Responded well to steroids (prednisone). Abdominal radiographs at time of diagnosis showed a rounded soft tissue opacity in location of caudal liver. Cancer screening. No other concerns.
Abnormal PE/Chem/CBC/UA Results: Thrombocytopenia

SPECIES

Canine

BREED

Standard Poodle

SEX

Spayed Female

AGE

9 ½ years

WEIGHT

22 kg

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 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 left kidney measured 6.0 cm. The right kidney measured 6.0 cm.

Adrenal Glands

The left **adrenal gland** was 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 0.5 cm. The right adrenal gland was no visualized.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ward

HOSPITAL NAME

Kenora VC

REFERRING VET

Dr. Ward

INVOICE

95414

DATE

1/19/22

Spleen

The **spleen** was uniformly enlarged. The parenchyma was unremarkable. There was no evidence of masses.

Liver

The **liver** was uniformly swollen with minor. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia. The gallbladder was unremarkable.

Gastrointestinal



PATIENT

The **stomach** presented a minor amount of ingesta or chyme. The small intestines and colon were unremarkable.

Lily Cain

SPECIES

Pancreas

Canine

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.

BREED

Standard Poodle

ULTRASONOGRAPHIC FINDINGS

SEX

Steroid induced hepatopathy.

Spayed Female

Minor age related abdominal changes.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

9 ½ years

There was no evidence of neoplasia. Bile acid profile could be considered to assess if the hepatic presentation has functional significance.

WEIGHT

22 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ward

HOSPITAL NAME

Kenora VC

REFERRING VET

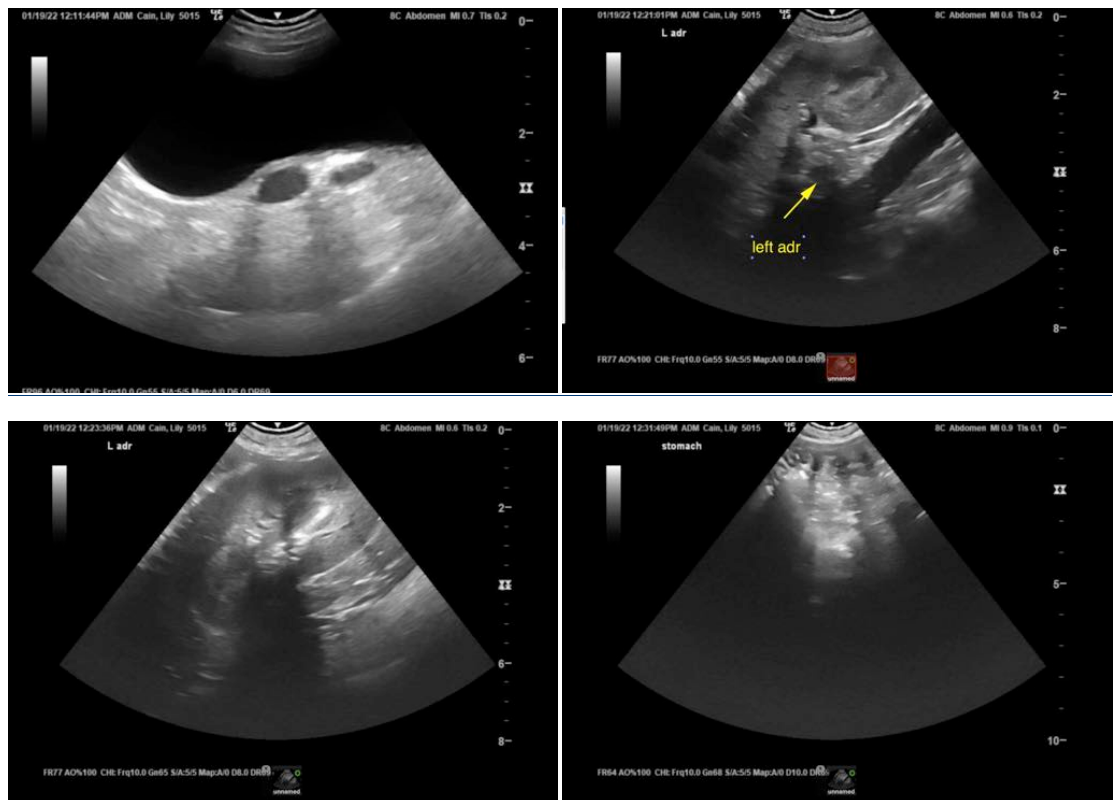
Dr. Ward

INVOICE

95414

DATE

1/19/22





PATIENT

Lily Cain

SPECIES

Canine

BREED

Standard Poodle

SEX

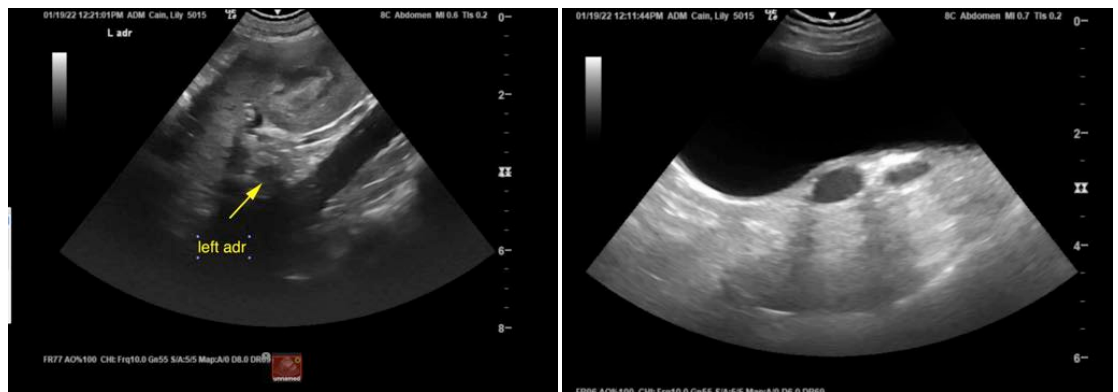
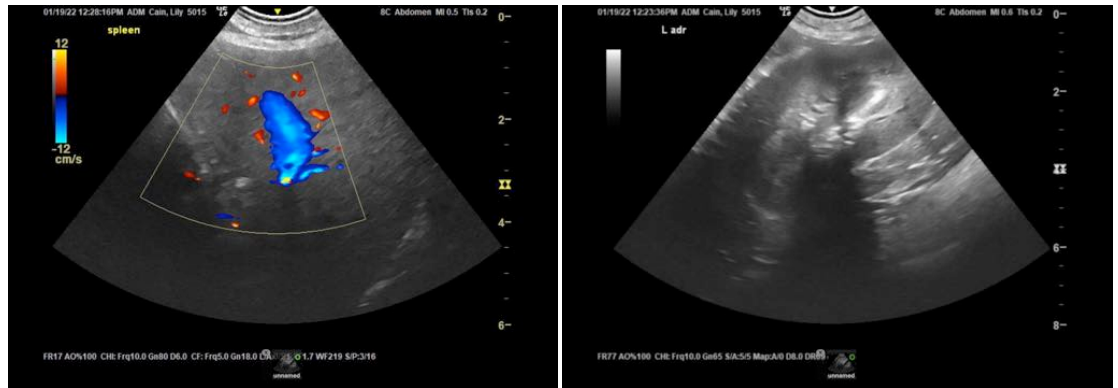
Spayed Female

AGE

9 ½ years

WEIGHT

22 kg



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ward

HOSPITAL NAME

Kenora VC

REFERRING VET

Dr. Ward

INVOICE

95414

DATE

1/19/22

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
info@SonoPath.com