

**DATE PRESENTING CLINICAL SIGNS**

1/27/23

Cardiomegaly with mild left axis deviation, wandering pacemaker, elevated ALT and GGT liver enzymes. Hx of seizures (controlled). Excessive appetite and thirst suggestive of Cushing's disease. Some evidence of dental disease. Hx of atopy and furunculosis. Hx of echocardiogram at CVCA showing mitral valve regurgitation in 2021. Enlarged popliteal lymph nodes.

**PATIENT**

Boze Marron

Current Medications: Cytopoint 100mg SQ q mon, Carprofen PRN, Phenobarbital 1.5gr BID.

Lab Results: Phenobarbital level normal, ALT 90 (4-75), GGT 7 (0-7), ALK 141 (18-214), Tbili 0.11, Tot prot 8.6 (5.3-8.4), BUN 86, USG 1.024, pH 5.0, chem and micro normal, T4 2.3, BP ave 127/73, MAP 91, PP 54.

**SPECIES**

Canine

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Stephanie Warga RDCS, RVT.

**BREED**

Vizsla

**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.

**AGE**

4/1/14

The residual prostate measured 0.7 cm.

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 right kidney measured 7.5 cm. The left kidney measured 8.5 cm.

**WEIGHT**

90 lbs

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**Adrenal Glands**

Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The right adrenal gland measured 3.23 x 0.89 cm at the cranial pole and 0.66 cm at the caudal pole. The left adrenal gland measured 2.87 x 0.81 cm at the caudal pole and 0.65 cm at the cranial pole.

**HOSPITAL NAME**

Friendly Paws VC

**REFERRING VET**

Dr. Price

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. Occasional cortical cyst was noted in the kidneys. 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.

**INVOICE**

42365

**Liver**

The **liver** presented heterogenous parenchyma with increased portal markings and coarse architecture. Slight undulating capsular contour was noted. The gallbladder wall was echogenic and slightly mineralized. This is consistent with chronic inflammatory hepatopathy.

### ***Gastrointestinal***

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. 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.

### ***Pancreas***

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.

### **ULTRASONOGRAPHIC FINDINGS**

Minor, heterogenous adrenal gland changes.  
Minor non-specific, benign hepatopathy.  
Gallbladder fibrosis.

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA of the liver can be considered for further definition, yet this is subjectively a benign presentation.





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.

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