



PATIENT PRESENTING CLINICAL SIGNS

Barron Santora Rapid weight loss - great appetite. Current meds: Vetprofen for osteoarthritis. Normal blood work.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System

Canine

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.

BREED

Labrador Retriever

The residual prostate was uniform and measured 1.24 cm.

SEX

Neutered male

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 7.45 cm.

AGE

6 years

Adrenal Glands

WEIGHT

78.8 lbs

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 2.8 x 0.51 cm at the caudal pole and 0.39 cm at the cranial. The right adrenal gland measured 2.48 x 0.47 cm at the caudal pole and 0.9 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

IMAGING

PERFORMED BY

Kelly Vazquez, CVT

The **spleen** revealed subtle, heterogenous parenchymal changes and normal contour. The spleen was folded upon itself cranially. If weight loss is an issue FNA is indicated.

HOSPITAL NAME

New Bridge VH

Liver

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The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

DATE

1/31/22

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. Minor, excessive GI gas was noted. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively.



PATIENT

No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Barron Santora

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

Labrador Retriever

Heart

SEX

Rapid view of the heart revealed no evidence of pathology.

Neutered male

AGE

ULTRASONOGRAPHIC FINDINGS

6 years

Micronodular spleen. Likely age related changes. However, emerging round cell neoplasia cannot be completely ruled out.

Minor excessive GI gas.

WEIGHT

78.8 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Splenic FNA is ideal to ensure that hyperplasia is the underlying cause.

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

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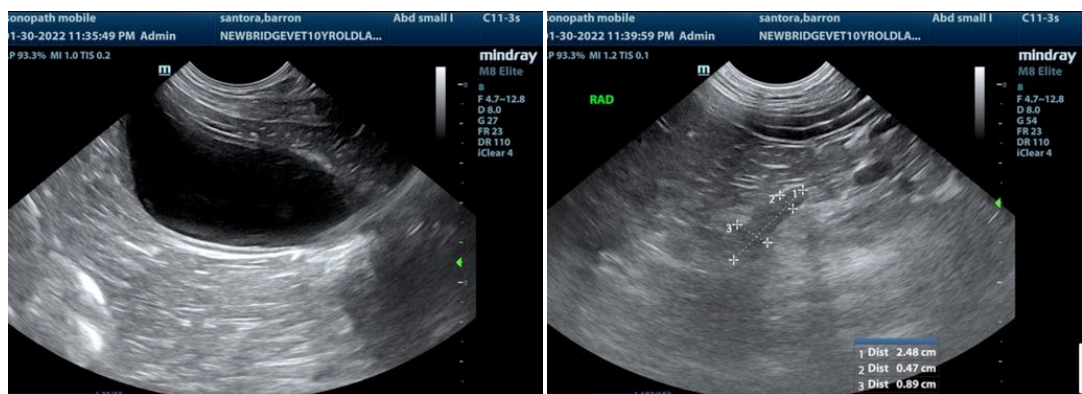
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PATIENT

Barron Santora

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered male

AGE

6 years

WEIGHT

78.8 lbs

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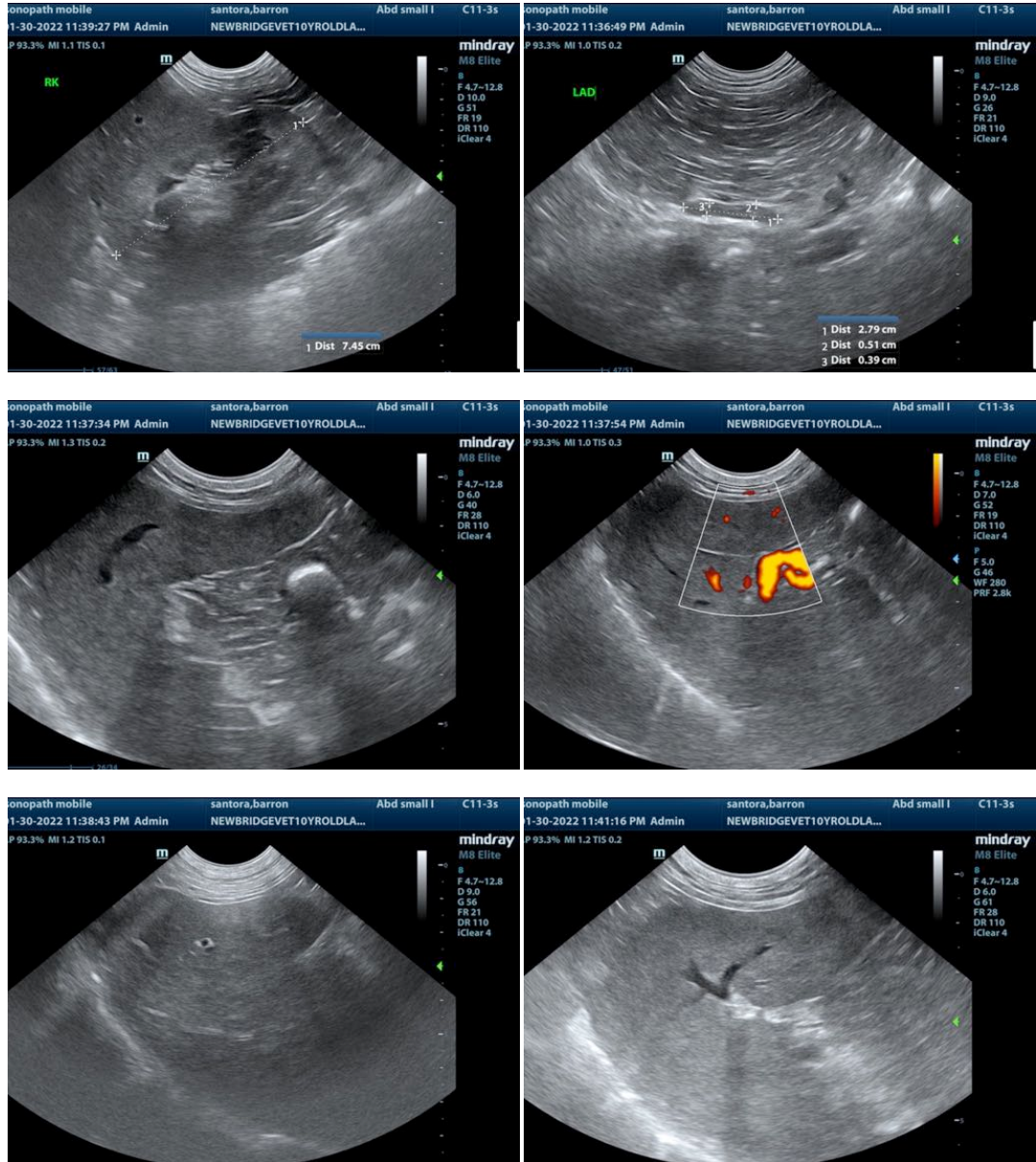
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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