



PATIENT PRESENTING CLINICAL SIGNS

Izzy Jones unremarkable PE incidentally identified elevated liver values last month
Abnormal PE/Chem/CBC/UA Results: labs emailed albumin 2.5 globulin 4.6 ALT 313 AST 97 ALP 203

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Pit Bull

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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

SEX

Spayed Female

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 6.5 cm. The left kidney measured 5.89 cm.

AGE

8 Years

Adrenal Glands

WEIGHT

55 Pounds

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 1.68 cm x 0.44 cm at the caudal pole and 0.5 cm at the cranial pole. The right adrenal gland measured 2.32 cm x 0.78 cm at the cranial pole and 0.74 cm at the caudal pole.

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

Jenna Walsh, CVT

Liver

HOSPITAL NAME

Willakenzie AC

The **liver** was non-specific with coarse architecture. Mild to moderate heterogenous remodeling noted. Increased portal markings noted. The gallbladder was unremarkable.

REFERRING VET

Dr. Brandt

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.

DATE

10/1/21

INVOICE

26021



PATIENT *Pancreas*

Izzy Jones 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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

- Non-specific hepatic remodeling

BREED

Pit Bull

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bile acid profile and ultrasound guided FNA warranted to assess inflammatory cell type. If bile acids are elevated, core surgical biopsy would be ideal. Leptospirosis titers warranted to rule out occult infection. A clinical trial of Clavamox/Metronidazole combination, liver oriented diet, and reassessment of liver values as well as bile acids could also be considered over a 3 week period.

SEX

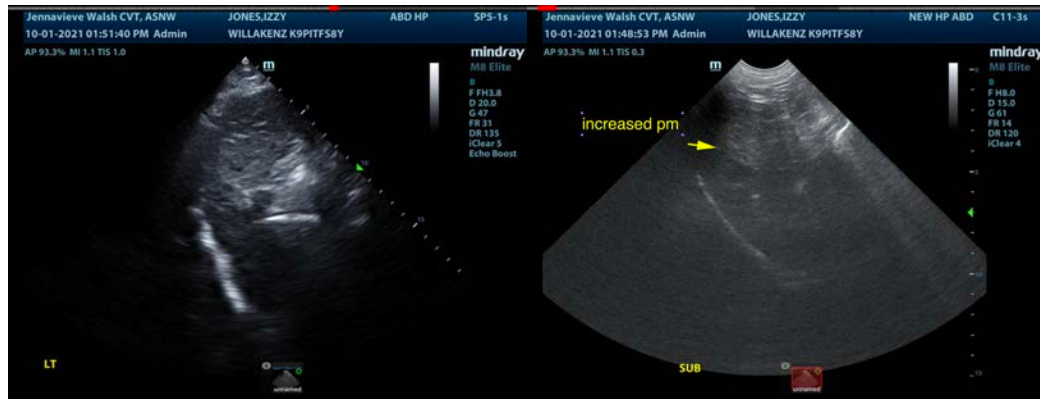
Spayed Female

AGE

8 Years

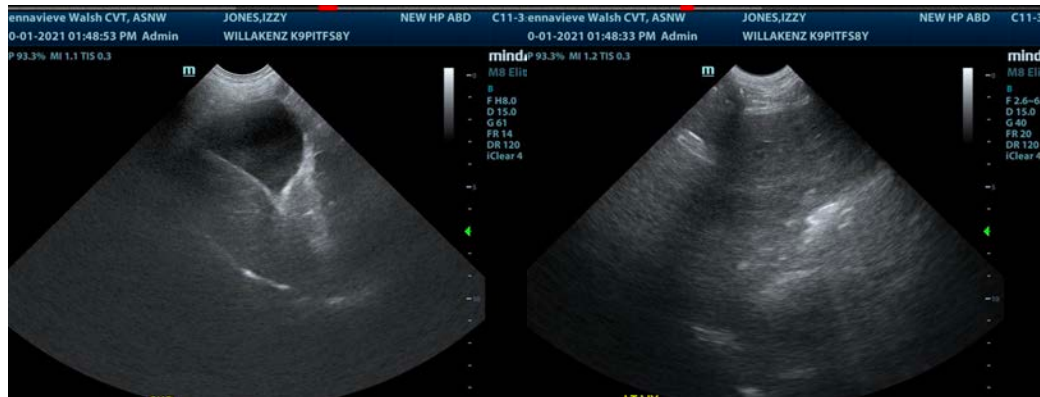
WEIGHT

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HOSPITAL NAME

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PATIENT

Izzy Jones

SPECIES

Canine

BREED

Pit Bull

SEX

Spayed Female

AGE

8 Years

WEIGHT

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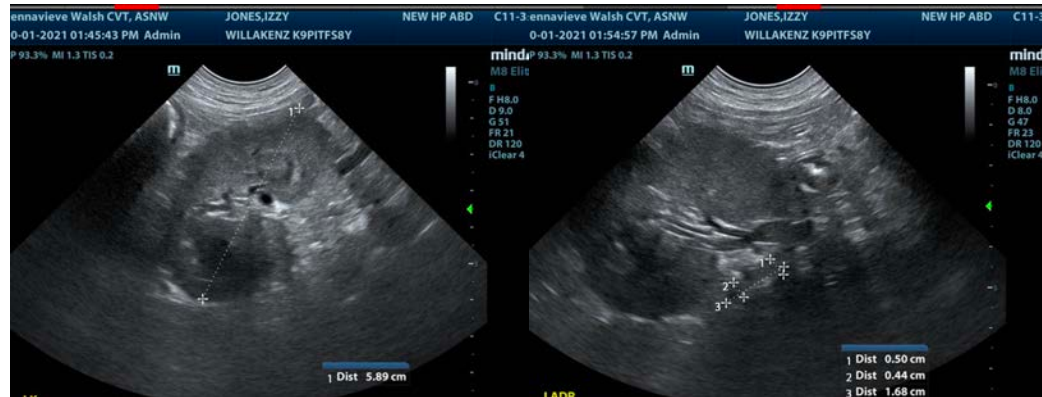
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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