



PATIENT

Maddy Myer

SPECIES

Canine

BREED

JRT

SEX

Spayed Female

AGE

13 Years 9 Months

WEIGHT

27.1 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Sarah Green

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Sarah Green

INVOICE

26193

DATE

10/11/21

PRESENTING CLINICAL SIGNS

Presented on emergency due to anorexia and lethargy
Abnormal PE/Chem/CBC/UA Results: mildly febrile (T-102.9°F), pale mm, tense abdomen with suspected hepatomegaly, CBC: RBC=1.47 (5.5-8.5) M/uL, HGB=6.7 (12-18) g/dL, HCT=10.64 (37.0-55.0) %, MCH=45.8 (19.5-24.5) pg, MCHC=63.2 (31-39) g/dL, MPV=11.3 (3.9-11.1) fL PCV=22%
CHEMISTRY: ALT=316 (10-118) U/L, Tbili=0.9 (0.1-0.6) mg/dL, K=3.5 (3.7-5.8) mmol/L T4=0.9 (1.1-4.0) ug/dL POSITIVE saline agglutination test

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 were noted. Ureteral papillae were normal.

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. Trace pyelectasia noted. The left kidney measured 5.0 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** was mildly enlarged, yet uniform, measuring 2.0 cm in width. Likely hyperplasia.

Liver

The **liver** presented uniform enlargement. The gallbladder presented double layered, edematous wall, likely owing to immune mediated pathology.

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.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

Free Abdomen

A mid abdominal lipoma was noted, not pathological. However, it is space occupying and measuring approximately 7.0 cm x 3.0 cm.



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Falciform fat was excessive.

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ULTRASONOGRAPHIC FINDINGS

- Mild splenohepatomegaly – likely reactive state.

SPECIES

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Canine

Blood transfusion and FNA of the spleen and liver could be justified. CBC path review and bone marrow aspirates all indicated. No obvious evidence of neoplasia. However, early Splenohepatic round cell neoplasia could not be completely ruled out without aspirates.

BREED

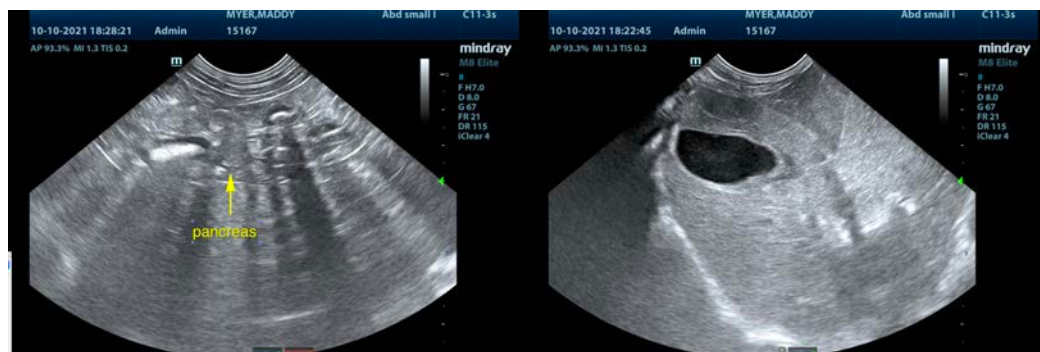
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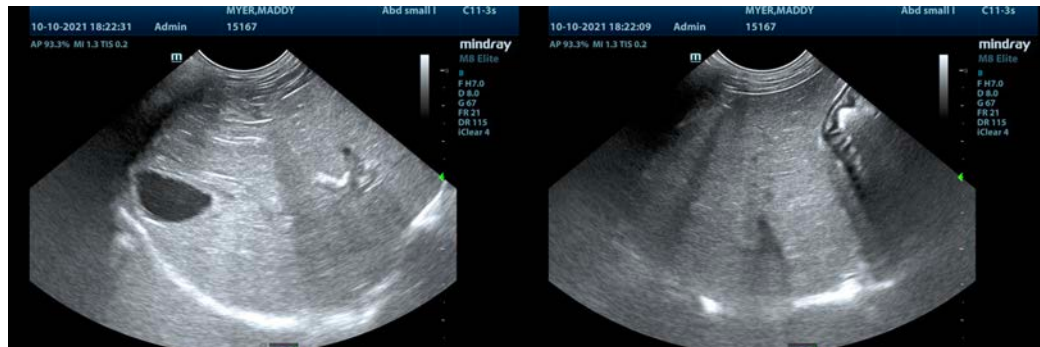
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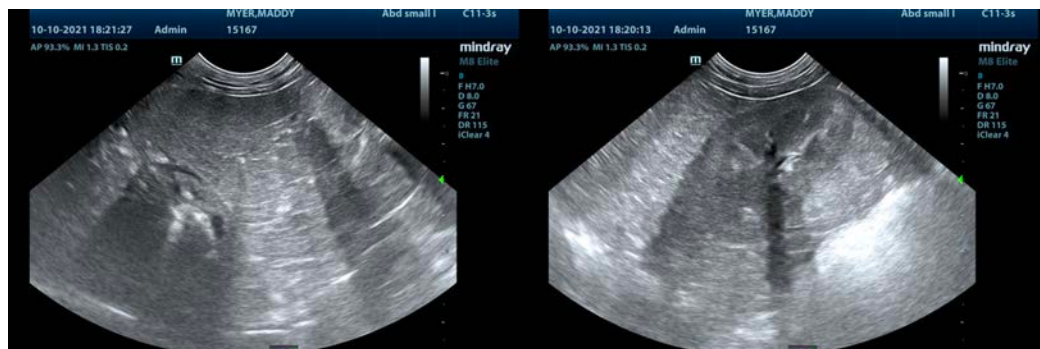
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com