

PATIENT

Bo Herring

SPECIES

Canine

BREED

Shetland Sheepdog

SEX

Neutered Male

AGE

12 Years

WEIGHT

30.5

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Heather

HOSPITAL NAME

ACC Flanders

REFERRING VET

Chris Hallihan

INVOICE

17675

DATE

10/13/22

PRESENTING CLINICAL SIGNS

History: Patient is having diarrhea on and off. When on the metronidazole he does better but after being off for a few days he gets soft stool again. On J/D Hills diet took Trazadone 100mg and Gabapentin 300mg for sedation 0.45 Torb IV for sedation

Abnormal PE/Chem/CBC/UA Results: AlkPhs - 658(hi), chol. 410(hi), EOS- 1 (lo)

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 **left kidney** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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. Mineralization was noted in the left kidney.

The **right kidney** was subnormal in size with dystrophic mineralization and infarcts.

Adrenal Glands

The **right adrenal gland** was not visualized.

The **left adrenal gland** was enlarged, visualized obliquely, measuring at least 1.2 cm.

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.

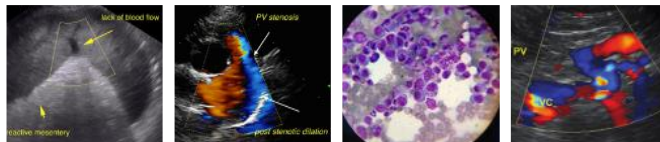
Liver

The **liver** revealed age-related changes. The gallbladder was moderately overdistended with suspended and dependent debris, consistent with emerging mucocele. The gallbladder measured 7.5 cm in long axis. No adjunctive inflammation was noted.

Gastrointestinal

The **stomach** itself was unremarkable. Soft stool was noted in the colon.

Pancreas



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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.

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ULTRASONOGRAPHIC FINDINGS

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Shetland Sheepdog

- Enlarged, irregular left adrenal gland- further imaging is recommended under sedation
- Dystrophic right kidney with infarcts
- Minor degenerative left kidney changes with mineralization
- Emerging gallbladder mucocele, age-related hepatic changes otherwise
- Soft stool in the colon

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ursodiol therapy is warranted or gallbladder motility study. Recheck sonogram in 6-weeks. Imaging of the adrenals under full sedation is recommended, especially the irregularity of the left adrenal gland. Blood pressure measurements are recommended.

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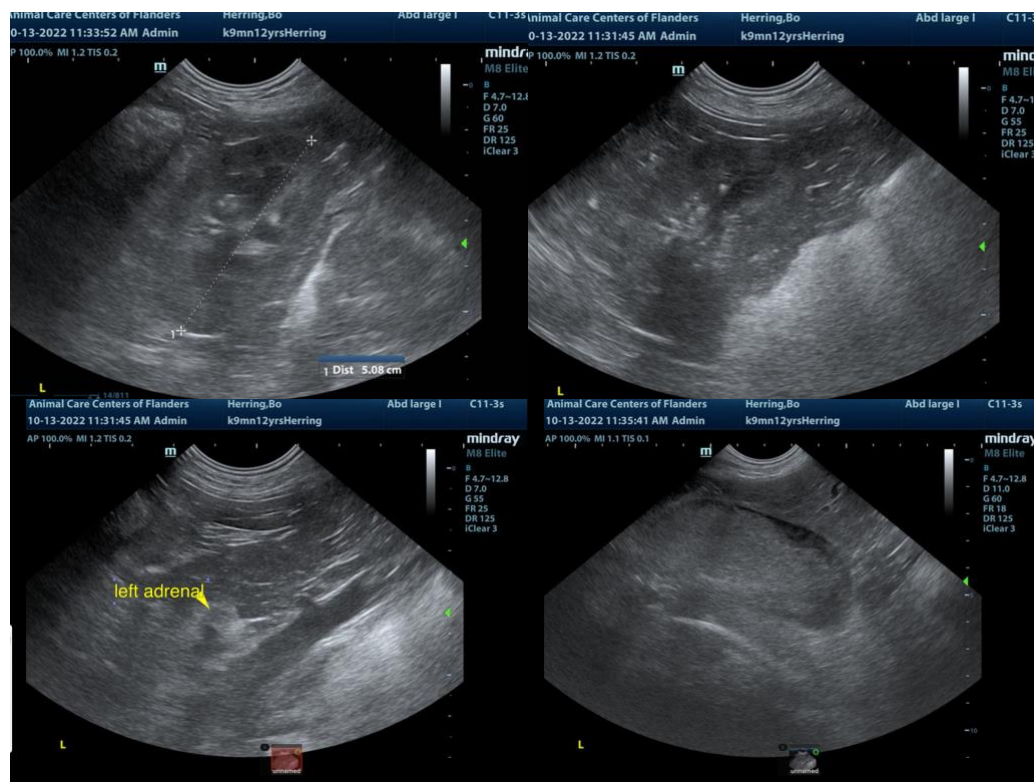
Chris Hallihan

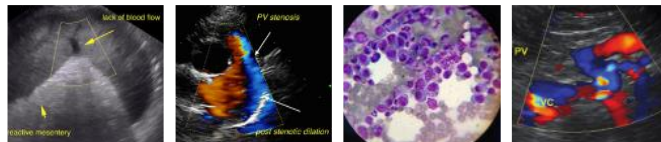
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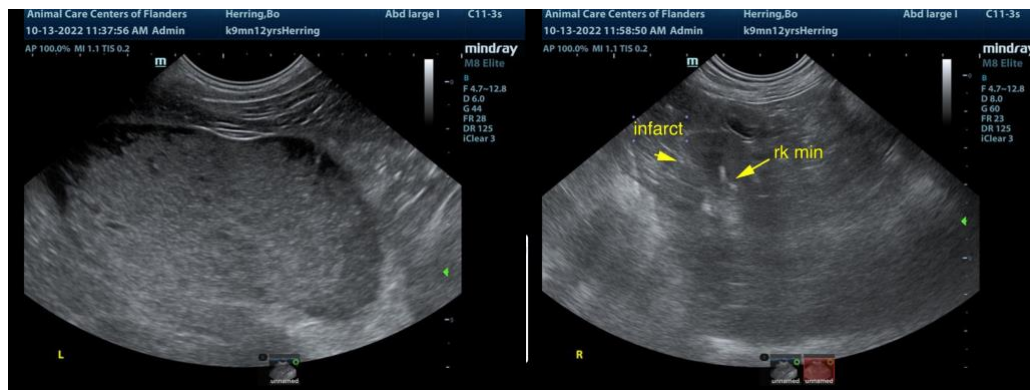
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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