



DATE	PRESENTING CLINICAL SIGNS
10/15/21	History: Recently diagnosed diabetic (DKA). Elevation in liver enzymes (ALT, AlkPhos). Sudden sloughing of paw pads.
PATIENT	
Hudson Languirand	Current Medications: Vetsulin 11 units BID. Denamarin 425 mg QD. Cefpoderm 100 mg 1 1/2 tabs QD. Recently dispensed Galliprant for foot discomfort 60 mg QD. Lab Results: Elevation in Liver enzymes
SPECIES	Date of Previous IntraPet Ultrasound: No previous
Canine	Sedation: not needed Stat Report: not requested
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Shepherd Mix	Urinary System
SEX	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.
Neutered Male	
AGE	Hyperechoic diabetic nephropathy type renal presentation noted. The left kidney measured 6.77 cm. The right kidney measured 6.2 cm. Slight mineralization noted in portions of the kidneys.
2013	
WEIGHT	Adrenal Glands
62 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 3.35 cm x 0.67 cm at the caudal pole and 0.74 cm at the cranial pole. The right adrenal gland measured 3.47 cm x 1.04 cm at the cranial pole and 0.73 cm at the caudal pole.
INTERPRETED BY	Spleen
Eric Lindquist, DMV DABVP, Cert. IVUSS	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.
HOSPITAL NAME	Liver
Chadwell AH	The liver revealed coarse architecture, increased portal markings and heterogeneous parenchymal changes. Coalescing hypoechoic nodular changes were noted. If the sloughing of the paws are consistent with hepatocutaneous syndrome then core liver biopsy would be indicated. Bilde acid profile indicated.
REFERRING VET	
Dr. Schaupp	
INVOICE	Gastrointestinal
13803	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

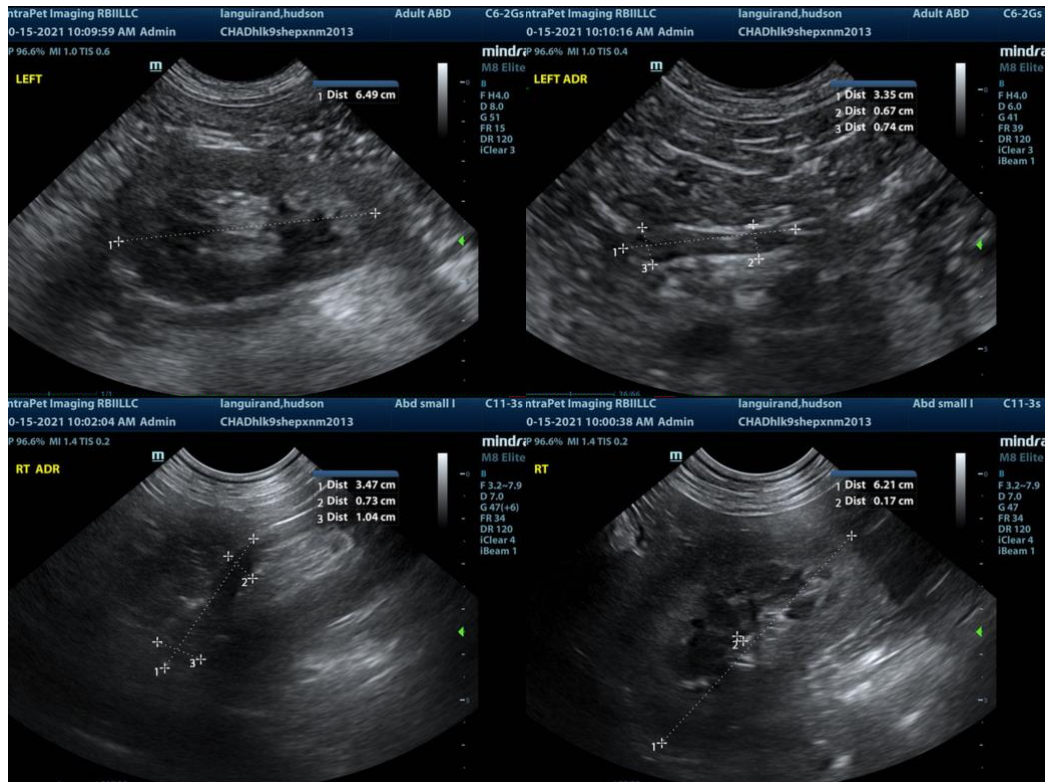
The **pancreas** was enlarged, irregular and heterogeneous with undulating contour. A history of pancreatitis likely with suspicion for low grade inflammation.

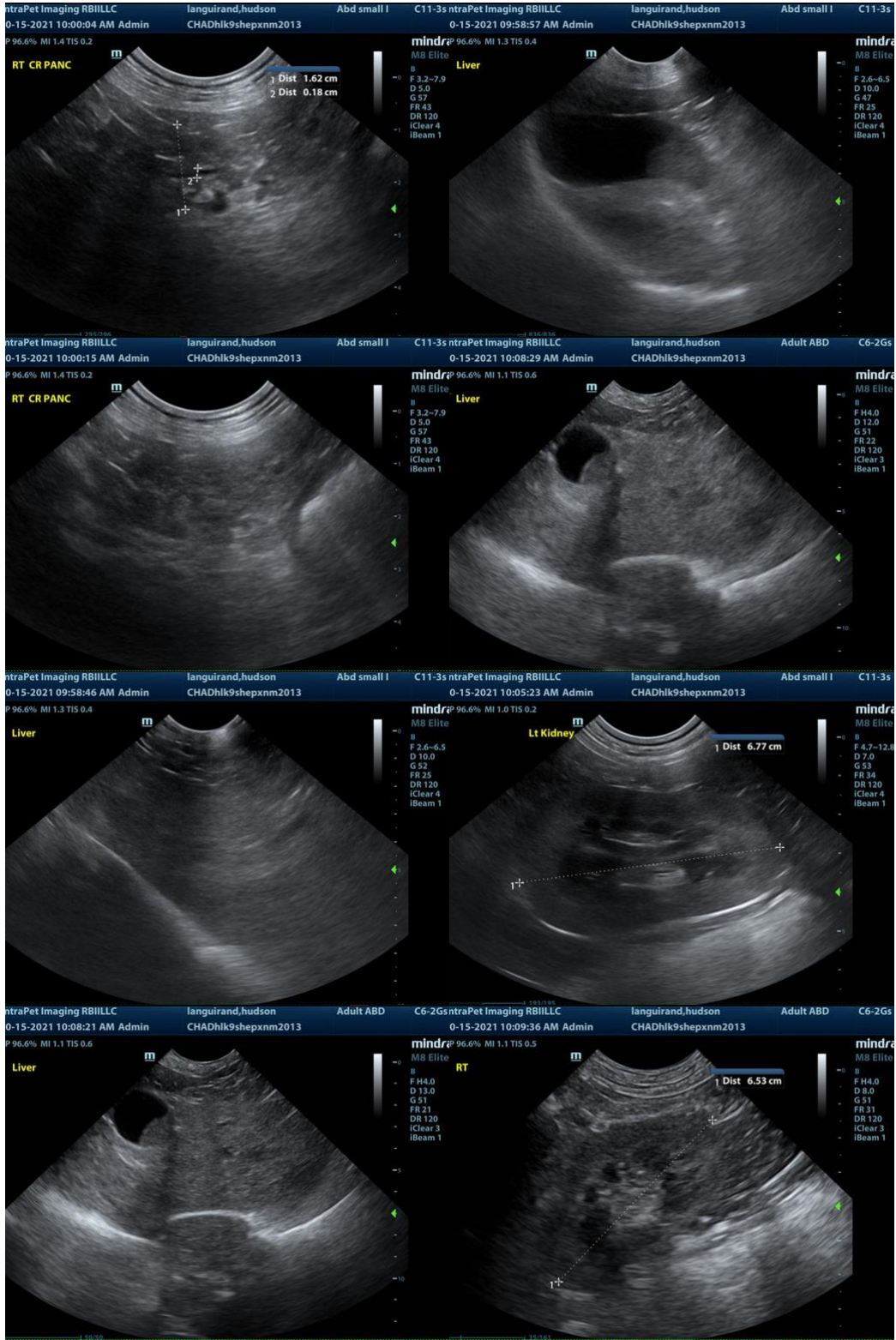
ULTRASONOGRAPHIC FINDINGS

- Hepatic remodeling
- Pancreatic remodeling
- Diabetic nephropathy with moderate degenerative renal changes with minor mineralization

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potential emerging hepatocutaneous syndrome. Dermal and hepatic biopsies indicated with a bile acid profile.





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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