



PATIENT

Bella Roberts

SPECIES

Canine

BREED

Pug Mix

SEX

Spayed Female

AGE

13 Years

WEIGHT

26.4 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Butler VH

REFERRING VET

Dr. Garro

INVOICE

17802

DATE

10/18/22

PRESENTING CLINICAL SIGNS

History: Intermittent vomiting

Current Meds: Pred, Doxy, Melatonin

Abnormal CBC/Chem findings: No platelets a/o September since starting Pred/Doxy

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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. Iliac trifurcation was unremarkable.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 left kidney measured 5.1 cm. The right kidney measured 4.79 cm.

Adrenal Glands

The **left adrenal gland** was flattened, may be owing to underlying Prednisone therapy. The left adrenal gland measured 1.8 cm x 0.5 cm

The **right adrenal gland** was flattened, measuring 1.56 cm x 0.69 cm at the cranial pole and 0.4 cm at the caudal pole.

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. Cranial folding of the spleen was noted. Hyperechoic lipogranulomas were noted.

Liver

Mild irregular swelling was noted in the **liver**. Multifocal nondisruptive nodular changes were noted throughout the liver, the largest of which measured 2.15 cm. This change is most consistent with benign hepatopathy or nodular hyperplasia with minor potential for metastatic disease. This is not a typical site for metastasis for this type of primary lesion. The gallbladder and common bile duct were unremarkable.

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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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

SEX

Spayed Female

- Nodular hyperplasia liver pattern
- Subjectively flattened adrenal glands
- Splenic fold and lipogranulomas on the spleen
- Geriatric abdomen

AGE

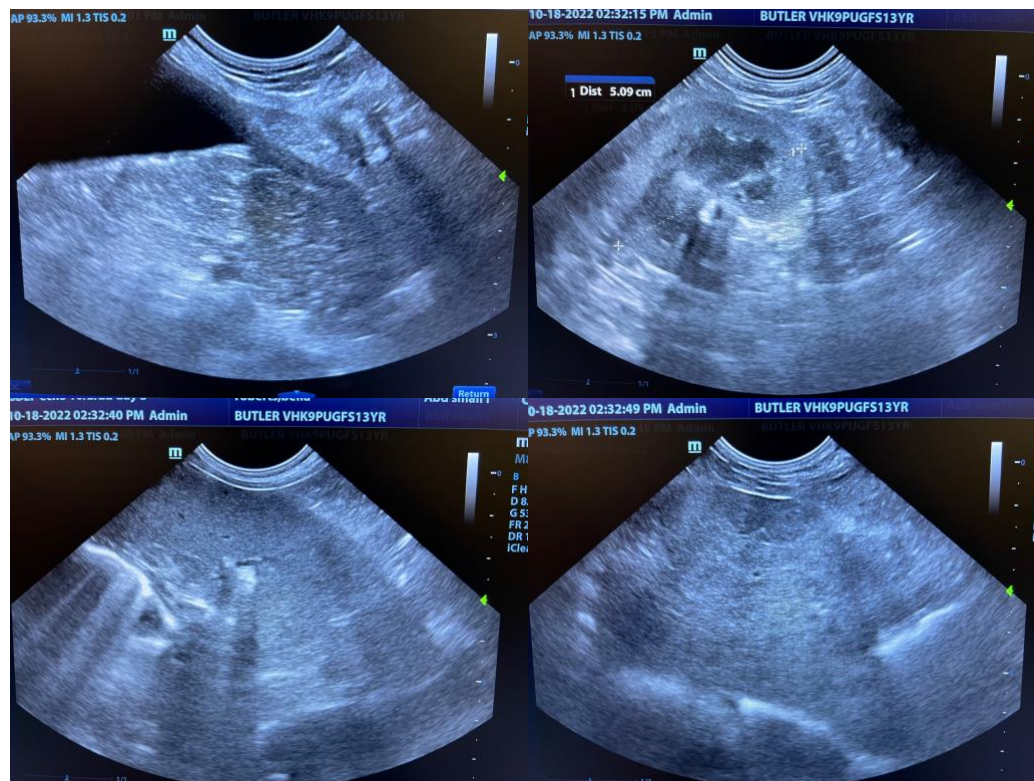
13 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of metastatic disease. FNA of the liver nodules under sedation could be considered for completeness, however, these are subjectively benign.

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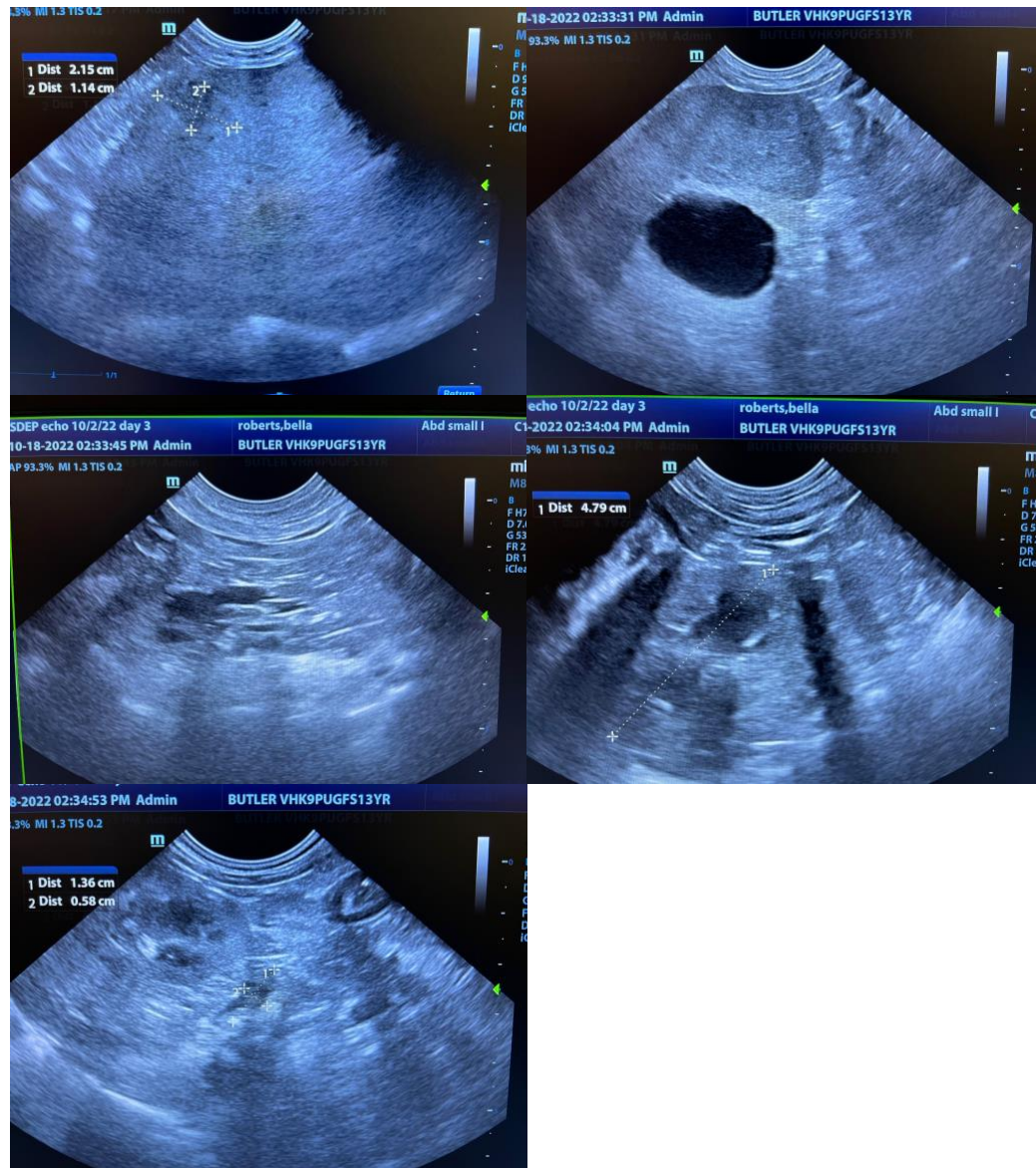
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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