



PATIENT PRESENTING CLINICAL SIGNS

Ruger Briggs

History: Stranguria for >1 month. Squats to urinate, accidents and straining despite normal UA ("works at urinating", six + attempts with thin stream). No change in symptoms with Clavamox and Prazosin.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: PE: BAR, active and happy. RADS (attached): no stones visible, distended bladder. UA: SG 1.030, pH 6.5, quiet sediment.

BREED

Wirehaired Pointing
Griffon

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Neutered male

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 was noted. Ureteral papillae were normal.

AGE

4 years

The residual prostate measured 1.0 cm.

WEIGHT

80 lbs

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.74 cm. The right kidney measured 6.21 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

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 0.67 cm at the caudal pole and 0.58 cm at the cranial pole. The right adrenal gland measured 0.6 cm at the cranial pole and 0.4 cm at the caudal pole.

IMAGING PERFORMED BY

Dr. Ebersole

Spleen

HOSPITAL NAME

Scanvet

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 was noted.

REFERRING VET

Dr. Bennett

Liver

INVOICE

40171

The **liver** revealed slight coarse architecture with mildly increased portal markings. The gallbladder and common bile duct were unremarkable.

DATE

10/19/22



PATIENT

Ruger Briggs

Gastrointestinal

SPECIES

Canine

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.

BREED

Wirehaired Pointing
Griffon

Pancreas

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.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

AGE

4 years

Mild hepatic remodeling.
Structurally unremarkable urinary tract.

WEIGHT

80 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Lumbosacral neuropathy may be playing a role in this patient. Lumbosacral CT may be appropriate.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

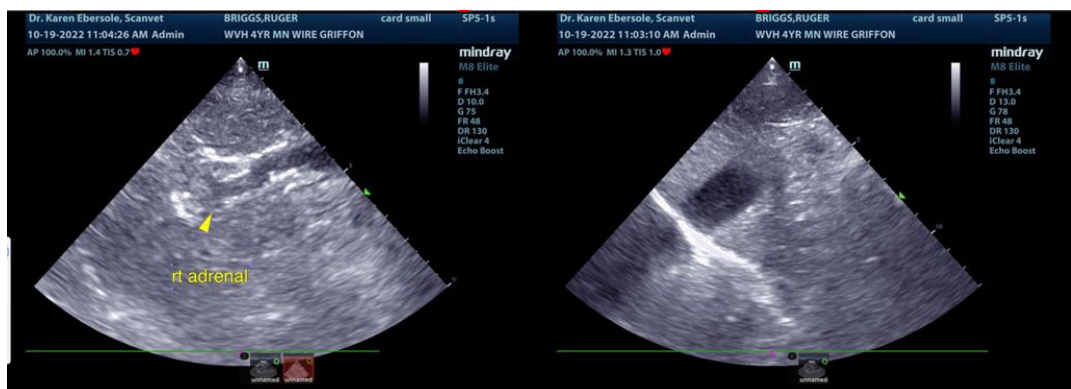
Dr. Bennett

INVOICE

40171

DATE

10/19/22





PATIENT

Ruger Briggs

SPECIES

Canine

BREED

Wirehaired Pointing
Griffon

SEX

Neutered male

AGE

4 years

WEIGHT

80 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

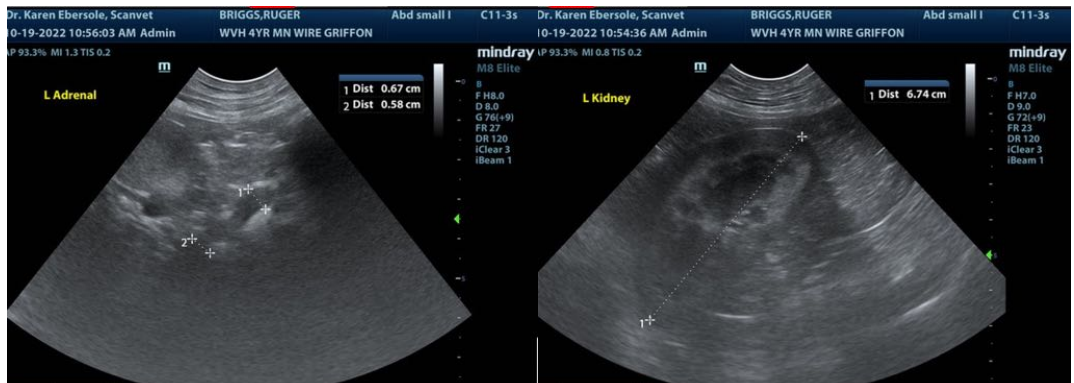
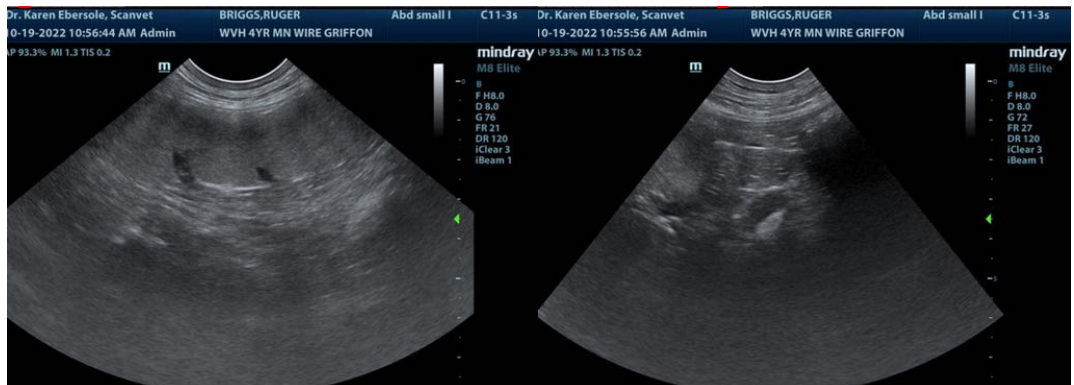
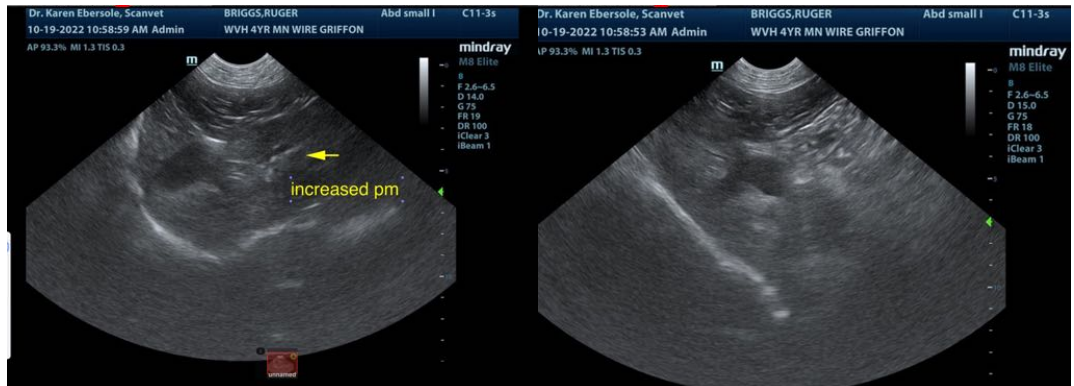
Dr. Bennett

INVOICE

40171

DATE

10/19/22



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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