



**PATIENT**

Willma Korbel

**SPECIES**

Canine

**BREED**

Pitbull mix

**SEX**

Spayed female

**AGE**

15 years

**WEIGHT**

22.2 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Dallas Reynolds, LVT

**HOSPITAL NAME**

Lone Mountain AH

**REFERRING VET**

Dr. Munoz

**INVOICE**

40221

**DATE**

10/20/22

**PRESENTING CLINICAL SIGNS**

History: Referral from emergency for bleeding from mouth. Transferred for dental cleaning with extraction. On presentation, p has a grade IV/IV dental disease. P started exhibiting a marked stertor. On sedated oral exam, no masses or foreign materials are seen in mouth. Soft palate found to be elongated.

Abnormal PE/Chem/CBC/UA Results: Abdominal xrays show: incidental peritoneal metallic needle FB likely resulting from previous migration from the GI tract, bilateral nephroliths/calcinosis. cbc - Neu 0.78 (3.62-12.30), Monos 0.02 (0.14-1.97), Lymphs 6.35 (0.83-4.91), Eos 0.01 (0.04-1.62), PLT 277 (117-490) chem - BUN 66.3 (9.0-29.0), Cre 1.3 (0.4-1.4) cPLI test - Abnormal SDMA - 17 (0-14) UA - USG 1.029, pH 8.0, trace prot

**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 was 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. Nephrolithiasis was noted and non-obstructive. The left kidney measured 5.6 cm. The right kidney revealed pyelectasia and occasional cortical cyst.

**Adrenal Glands**

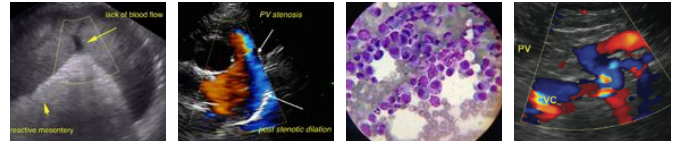
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.7 cm.

**Spleen**

The **spleen** revealed a hypoechoic nodule that measured 0.52 cm. Minor, heterogenous changes were noted elsewhere.

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Occasional, hyperechoic granuloma was noted and measured up to 1.0 cm. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology



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was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

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***Gastrointestinal***

A minor amount of non-shadowing, non-obstructive ingesta was noted in the stomach. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

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***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.

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**ULTRASONOGRAPHIC FINDINGS**

Splenic nodule.

**WEIGHT**

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Age related hepatic changes with subjectively benign nodules.

Non-obstructive nephrolithiasis with minor pyelectasia and mild to moderate degenerative renal changes.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No specific therapy is recommended. The patient may be passing small calculi periodically. Medical management with correction of azotemia is indicated. There was no evidence of significant disease.

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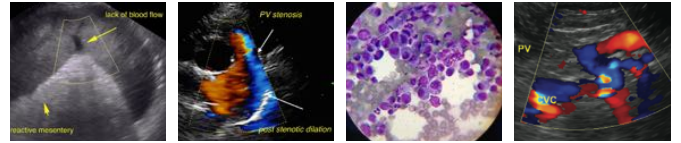
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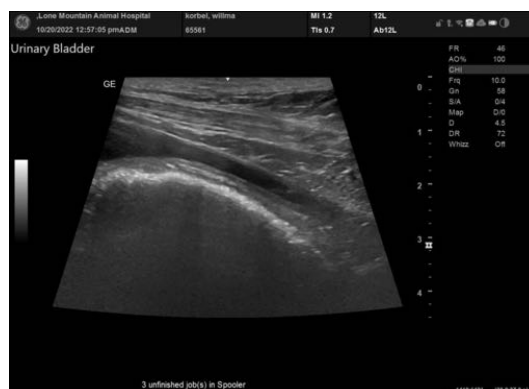
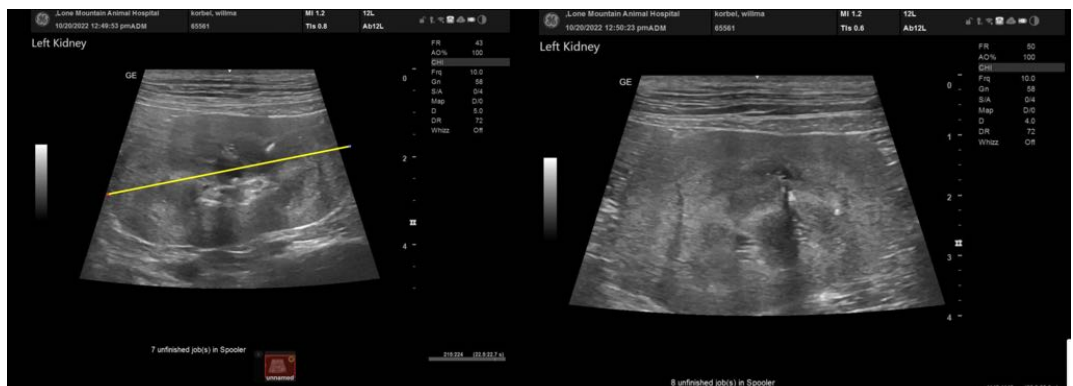
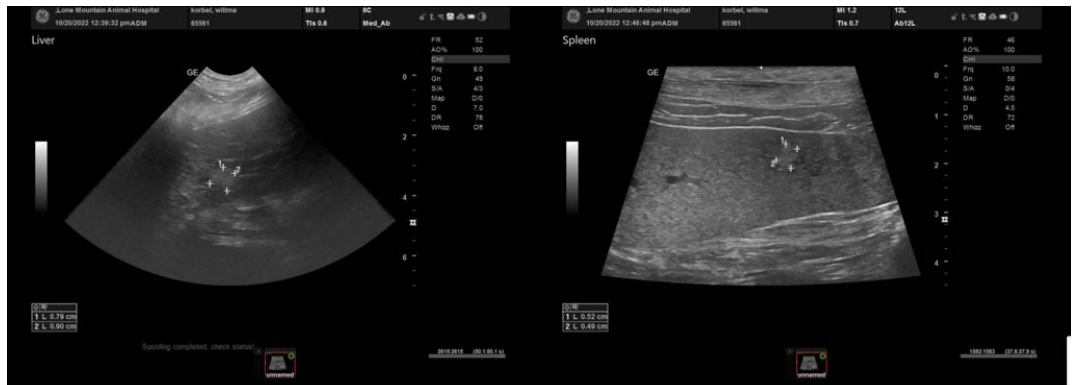
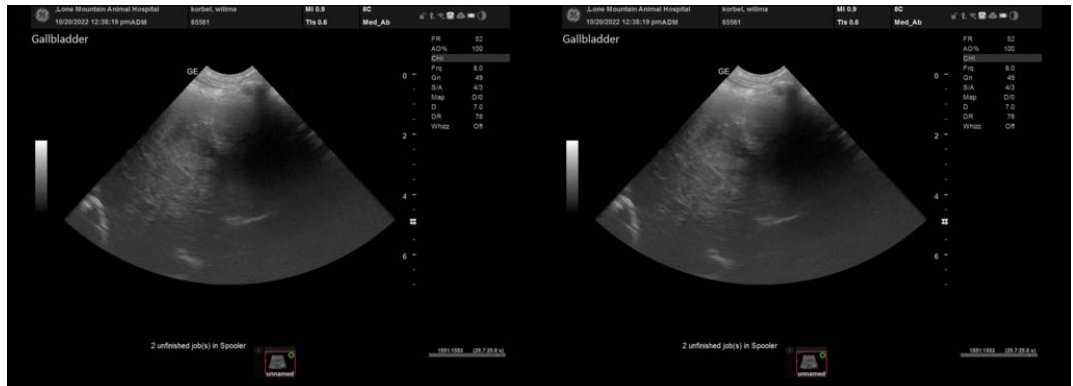
Dr. Munoz

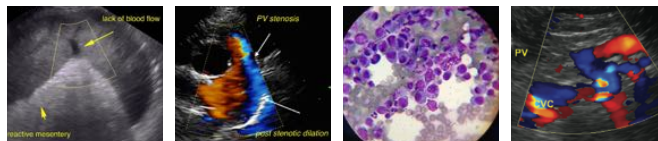
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

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