



PATIENT

Boomer Koning

SPECIES

Canine

BREED

Australian Shepherd

SEX

Neutered male

AGE

13 years

WEIGHT

46 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

Ringwood AH

REFERRING VET

Dr. Endy

INVOICE

92641

DATE

10/26/21

PRESENTING CLINICAL SIGNS

History: Increased ALT/Alk.Phos. despite treatment with Denamarin/Metronidazole, decreased appetite.
Abnormal PE/Chem/CBC/UA Results: ALT 426, ALP 178.

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 5.93 cm. The left kidney measured 5.42 cm.

Adrenal Glands

The right **adrenal gland** was 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 right adrenal gland measured 1.93 x 0.67 cm at the caudal pole and 0.71 cm at the cranial pole. The left adrenal gland was slightly swollen at the cranial pole and measured 1.05 cm, 0.6 cm at the caudal pole and 2.55 cm in length.

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 was noted.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. 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. Minor gallbladder polyps were noted, yet not pathological.



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Gastrointestinal

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The gastric wall appeared slightly thickened without loss of mural detail. The lumen was empty other than anechoic fluid. The small intestinal and colon were unremarkable.

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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

Gastric wall thickening.

Non-specific hepatic remodeling/age related changes.

AGE

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Geriatric abdomen.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the liver can be considered for further definition, likely reactive hepatopathy. Subjectively the liver appears benign. Low-appetite may be owing to low-grade gastritis. Empirical therapy for gastritis can be considered. Other causes of poor appetite such as orthopedic pain, CNS or thoracic disease should be considered.

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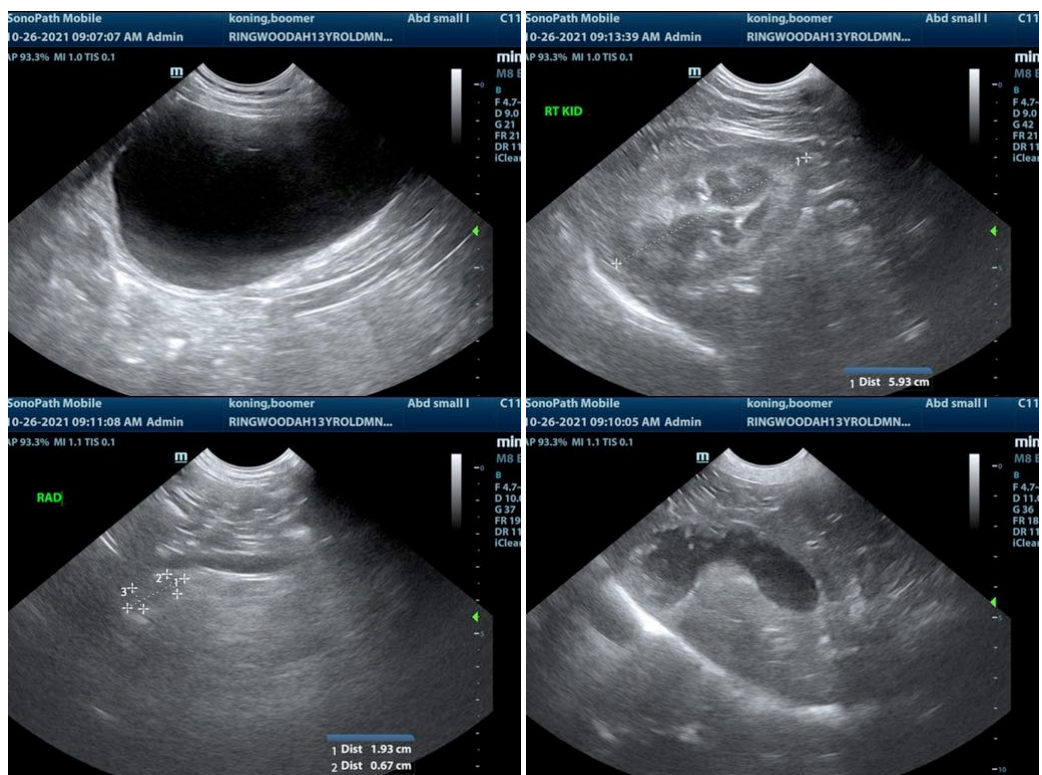
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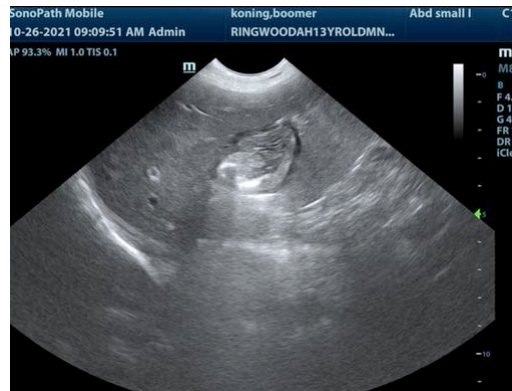
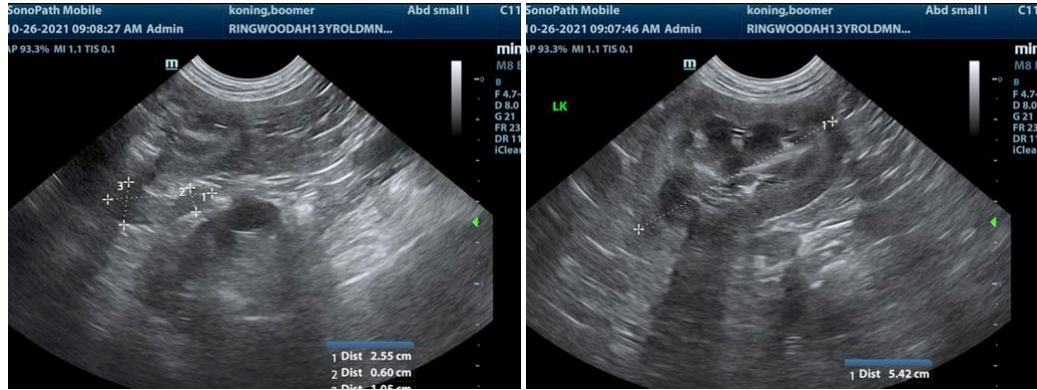
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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