



PATIENT	PRESENTING CLINICAL SIGNS
Honey Grace Stagner	History: Owner is concerned with patient not eating and excessively drooling.
SPECIES	Abnormal PE/Chem/CBC/UA Results: PE: Enlarged left tonsil. Mass vs Enlarged Lymph Node - dorsal to the laryngeal area. Tonsil was removed and sent for biopsy. Mass vs LN was aspirated and sent for cytology. XRAY: Thickened stomach and small intestines. CBC/CHEM/SDMA/TT4: GLOB 4.6 , otherwise WNL.
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Basset Hound	<i>Urinary System</i>
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.
Female	
AGE	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. The capsules were acceptably uniform without significant irregularities. The right kidney revealed slight pyelectasia.
4 Years 6 Months	
WEIGHT	<i>Adrenal Glands</i>
43 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 right adrenal gland measured 0.8 cm at the cranial pole and 0.5 cm at the caudal pole. The left adrenal gland measured 0.5 cm.
INTERPRETED BY	<i>Spleen</i>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The spleen in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.
IMAGING PERFORMED BY	<i>Liver</i>
Mack	The liver images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.
HOSPITAL NAME	
Northside VC	
REFERRING VET	
Mack	
INVOICE	
DATE	<i>Gastrointestinal</i>
10/4/21	



PATIENT
Honey Grace Stagner

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.

SPECIES

Canine

Pancreas

BREED

Basset Hound

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

Female

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable abdomen.
- No evidence of pathology other than minor right renal pyelectasia that may be owing to scarring, congenital defect or possible urinary tract infection.

AGE

4 Years 6 Months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If any evidence of urinary tract infection is present then urinalysis is recommended.

WEIGHT

43 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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PATIENT

Honey Grace Stagner

SPECIES

Canine

BREED

Basset Hound

SEX

Female

AGE

4 Years 6 Months

WEIGHT

43 Pounds

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HOSPITAL NAME

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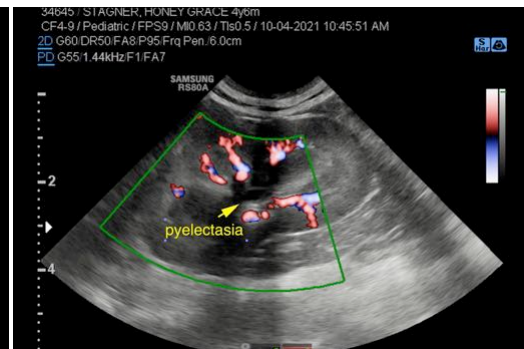
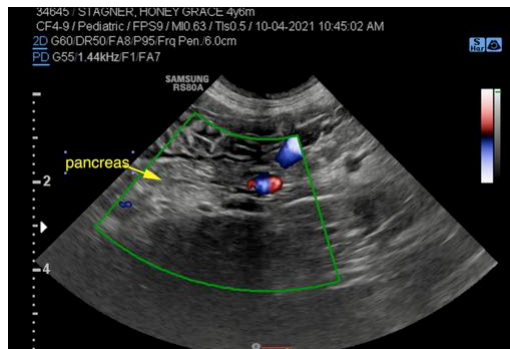
REFERRING VET

Mack

INVOICE

DATE

10/4/21



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.

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