



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT**  
Raisin DeMeo  
History: Weight loss, poor appetite. Current meds: Zofran 8mg, Galliprant, Gabapentin  
Normal CBC/chem. UPC 1.7, USG 1.023

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED**  
Labrador  
The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. 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.

**SEX**

Spayed Female  
The **kidneys** revealed similar age related changes compared to the prior sonogram. The left kidney measured 5.23 cm. The right kidney measured 5.54 cm.

**AGE**

12 years

**Adrenal Glands**

**WEIGHT**

52 lbs

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 1.88 x 1.21 cm at the cranial pole and 0.82 cm at the caudal pole. The left adrenal gland measured 2.42 x 0.68 cm at the cranial pole and 0.6 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Spleen**

The **spleen** was uniform similar to the prior sonogram with minor enlargement, yet there was no evidence of significant pathology.

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**Liver**

**HOSPITAL NAME**

Shohola VH

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. 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 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.

**REFERRING VET**

Dr. DeMeo

**INVOICE**

92230

**Gastrointestinal**

**DATE**

10/7/21

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was retention of ingesta noted in the stomach; however, transit of chyme appeared to be normal in the GI tract. Small and large



**PATIENT**

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

Raisin DeMeo

**SPECIES**

**Pancreas**

Canine

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.

**BREED**

Labrador

**Free Abdomen**

**SEX**

A large amount of abdominal fat was noted in this patient.

Spayed Female

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

Unremarkable stable age related abdominal changes.

12 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

There was no evidence of pathology.

52 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Shohola VH

**REFERRING VET**

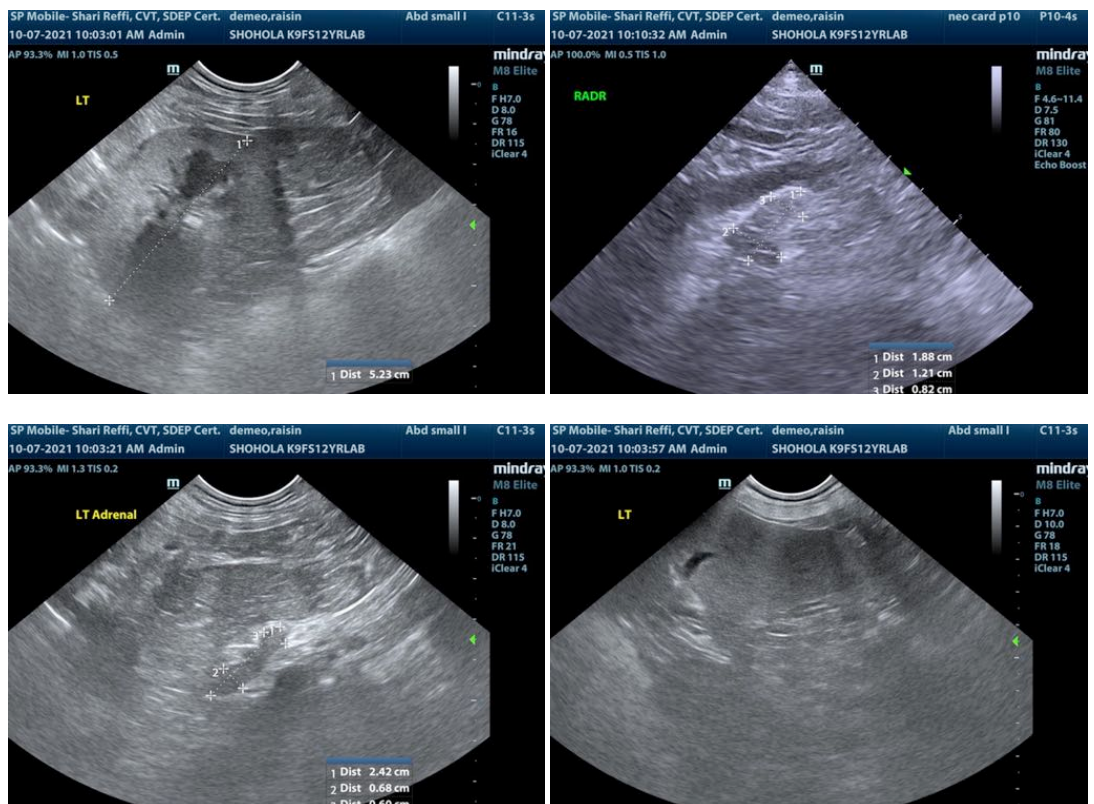
Dr. DeMeo

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**PATIENT**

Raisin DeMeo

**SPECIES**

Canine

**BREED**

Labrador

**SEX**

Spayed Female

**AGE**

12 years

**WEIGHT**

52 lbs

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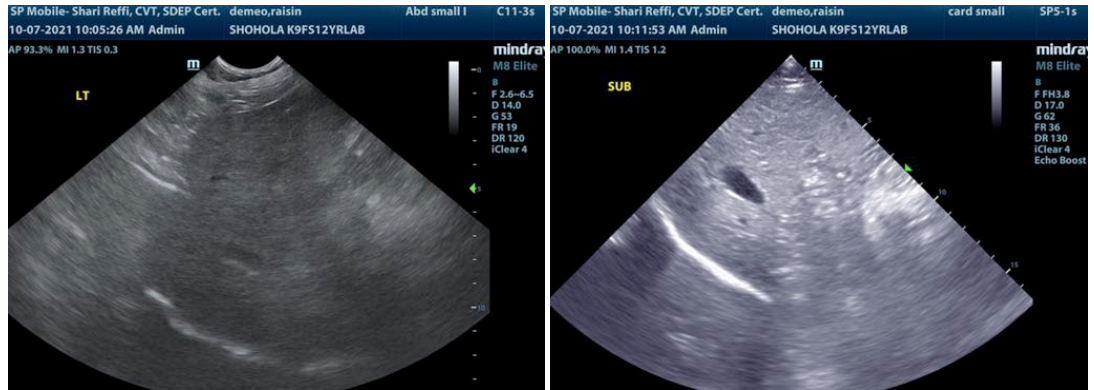
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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