

**DATE**

11/1/22

PATIENT

Persephone Holmes

SPECIES

Canine

BREED

Pomeranian

SEX

Spayed female

AGE

12/22/11

WEIGHT

12.22

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**

Hickory VH

REFERRING VET

Dr. McNesby

INVOICE

42273

PRESENTING CLINICAL SIGNS

History of elevated liver enzymes. Previous ultrasound demonstrated possible gall bladder mucocele. Liver enzymes improved after ursodiol. ALKP has increased again.

Current Medications: Ursodiol 100 mg Q24 hours (since 9/2021), Denamarin Advanced (began 10/22)

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: 9/17/21. See attached.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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. A trace amount of sand was noted in the bladder. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** were normal in size and contour with mild degenerative changes. The kidneys revealed corticomedullary calculi which is similar to the prior sonogram and non-obstructive. The largest calculus in the right kidney measured 0.33 cm and in the left kidney measured 0.26 cm. The right kidney measured 4.57 cm. The left kidney measured 4.1 cm.

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 1.73 x 0.53 cm at the cranial pole and 0.7 cm at the caudal pole.

Spleen

The **spleen** revealed a newly developed swelling at the cranial pole with heterogenous, hyperechoic nodular changes. This creating an isoechoic mass effect which measured 3.75 x 0.4 cm.

Liver

The **liver** was uniformly enlarged with minor remodeling. The gallbladder revealed striating bile and was over distended, yet stable. This is consistent with persistent mucocele formation. The striating bile and kiwi type appearance are both present. The common bile duct was unremarkable.

Gastrointestinal

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.

Pancreas

The **pancreas** was remodeled.

Heart

Rapid view of the heart revealed no evidence of pathology.

ULTRASONOGRAPHIC FINDINGS

Minor uniform hepatic enlargement and remodeling.

Persistent mucocele formation. Subjectively worsened compared to the prior sonogram and may be creating low grade clinical signs such as suboptimal energy and possible hyporexia.

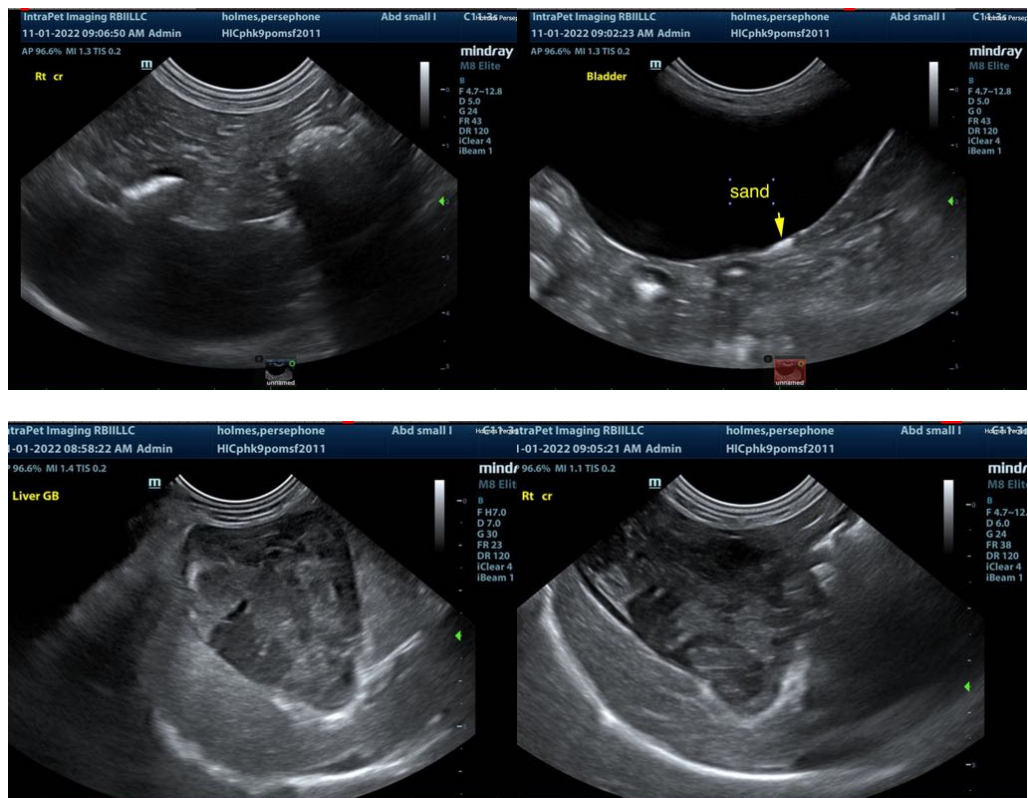
Pancreatic remodeling.

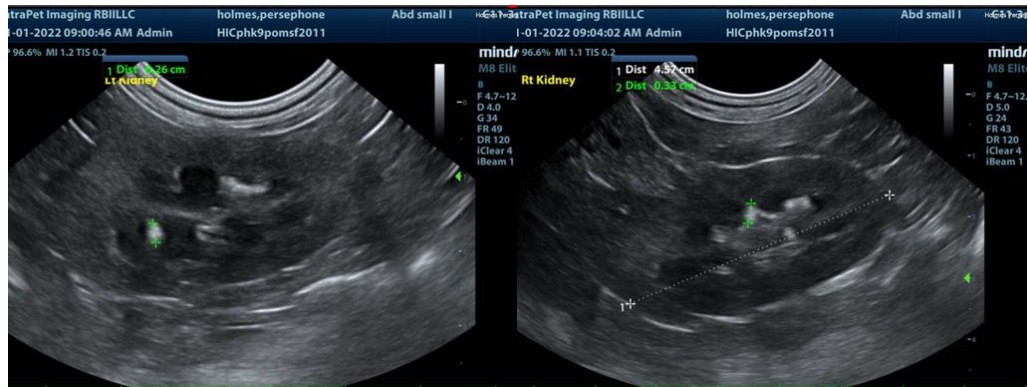
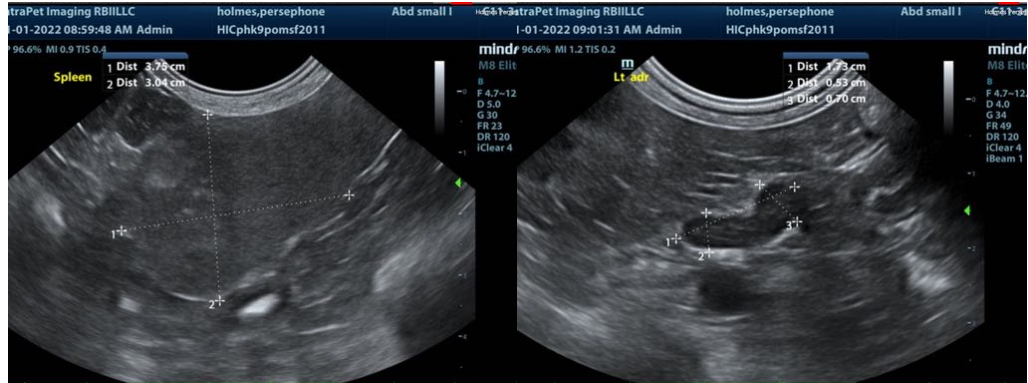
Cranial splenic mass/swelling. Subjectively benign, yet pedunculated. Differentials include benign hyperplasia, emerging stromal tumor or less likely hemangiosarcoma.

Bladder sand, should pass without difficulty.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Gallbladder motility study could be considered to confirm suspicion of gallbladder dysfunction. Proactive splenectomy is recommended along with cholecystectomy. Chest radiographs are warranted to assess for comorbidities.





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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