



PATIENT

Luke Silva

SPECIES

Canine

BREED

Shih Tzu

SEX

Neutered Male

AGE

7 Years

WEIGHT

19.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Ridge Road AH

REFERRING VET

Dr. Pathak

INVOICE

12539

DATE

11/15/21

PRESENTING CLINICAL SIGNS

History: Patient presents for history of seizures, tender abdomen cranially, and frequent vomiting. Current meds: Phenobarb and Cerenia.

Abnormal PE/Chem/CBC/UA Results: CBC/Chem: WNL.

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 4.68 cm. The left kidney measured 4.63 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 right adrenal gland measured 1.45 cm x 0.44 cm at the caudal pole and 0.32 cm at the cranial pole. The left adrenal gland measured 1.33 cm x 0.43 cm at the caudal pole and 0.29 cm at the cranial pole.

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. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. A focal splenic nodule, measuring 1.0 cm was noted, non-disruptive- should be monitored for any growth over the next 3-4 weeks.

Liver

The **liver** was uniform with no evident pathology. Minor gallbladder polyp noted.

Gastrointestinal

Some retention of ingesta was noted in the **stomach**. The small intestine and colon were unremarkable.

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.

ULTRASONOGRAPHIC FINDINGS



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- Minor retention of ingesta
- Minor gallbladder polyp
- Subjectively benign splenic nodule. Hyperplasia likely. Round cell neoplasia, emerging hemangiosarcoma possible.
- Unremarkable abdomen

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

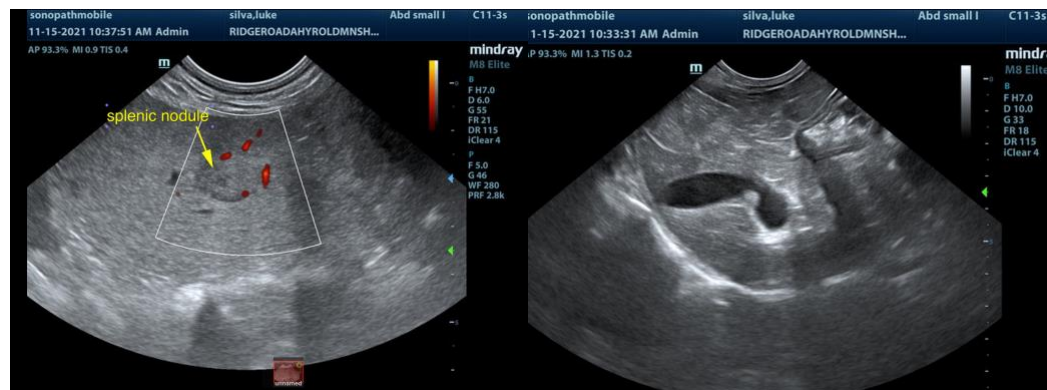
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No evidence of abdominal pathology. CT with contrast of the CNS warranted given the seizure activity. The splenic nodule should be monitored for any growth over the next 3-4 weeks.

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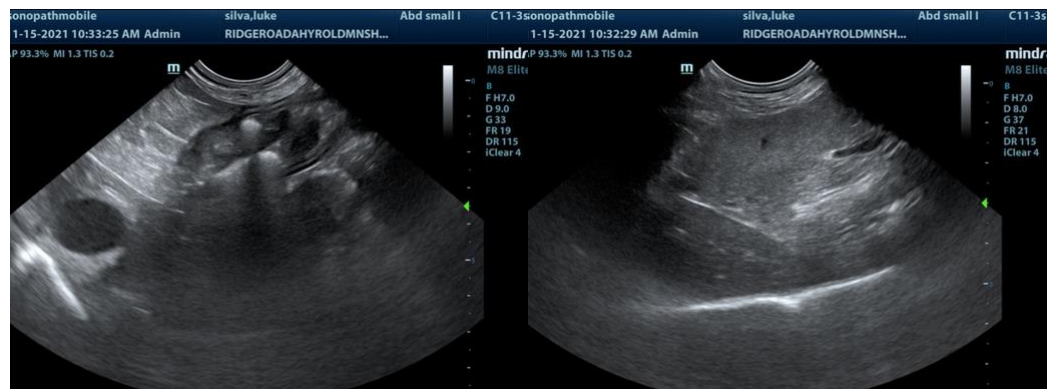
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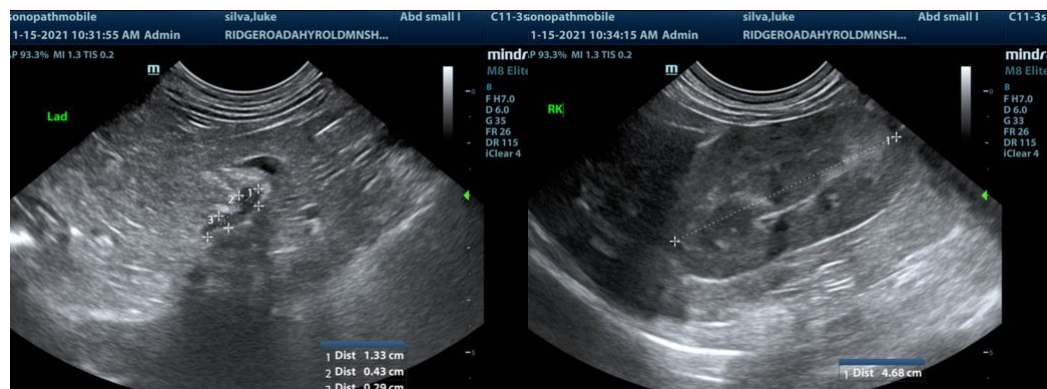


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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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