



PATIENT

Jake Morton

SPECIES

Canine

BREED

Lhasapoo

SEX

Neutered male

AGE

10 years

WEIGHT

21 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Lane

INVOICE

42544

DATE

11/15/22

PRESENTING CLINICAL SIGNS

History: Elevated LE, mild anemia, and thrombocytosis. Weight gain.
Abnormal PE/Chem/CBC/UA Results: ALT 667, AST 103, ALP 852, GGT 27. Chol 446. Hct 37%
Previous LE (9/27/22): ALT 268, ALP 1,129, GGT 16.

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 5.02 cm. The left kidney measured 5.42 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 2.0 x 1.85 cm at the cranial pole and 0.84 cm at the caudal pole. The left adrenal gland measured 2.08 x 0.67 cm at the caudal pole and 0.78 cm at the cranial pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. Hyperechoic, lipogranulomatous change was noted in the splenic hilus. This is not clinically significant. 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. 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.



PATIENT

Gastrointestinal

Jake Morton

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

BREED

Lhasapoo

SEX

Neutered male

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

AGE

10 years

ULTRASONOGRAPHIC FINDINGS

Largely geriatric abdomen. Benign hepatopathy.

Structurally the adrenal glands appear normal for this age patient.

WEIGHT

21 lbs

Non-specific inflammatory hepatopathy/vacuolar hepatopathy pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

However, emerging PDH cannot be completely ruled out. If the urine specific gravity is less than 1.020 then work-up for PDH is indicated. There was no evidence of significant disease. FNA of the liver can be considered for further definition, yet subjectively appears benign. The elevated ALT should be evaluated. The cause of anemia is unclear. GI blood loss and bone marrow disease are both potential. CBC path review is indicated. Leptospirosis should be ruled out.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

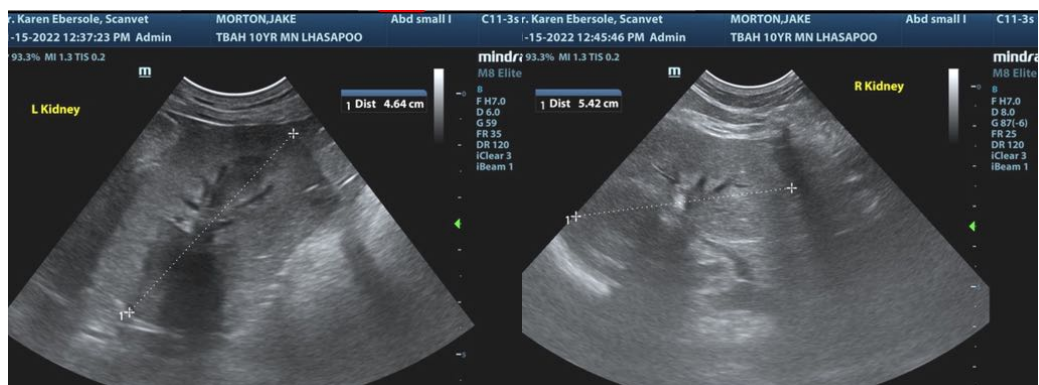
Dr. Lane

INVOICE

42544

DATE

11/15/22





PATIENT

Jake Morton

SPECIES

Canine

BREED

Lhasapoo

SEX

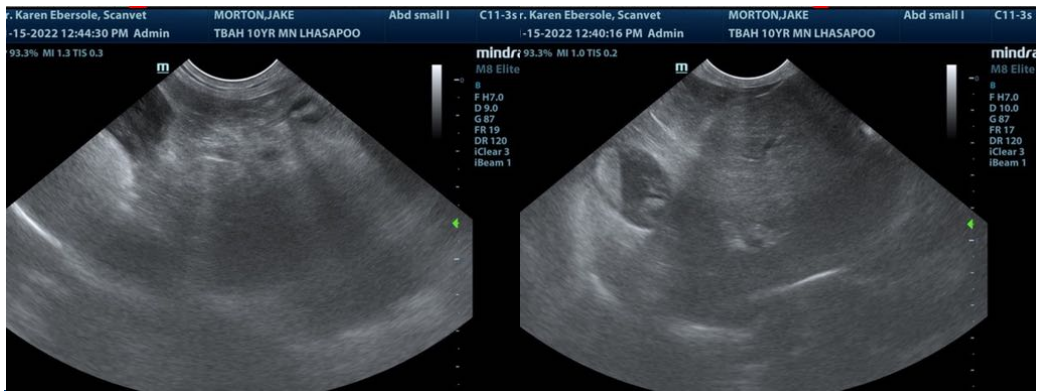
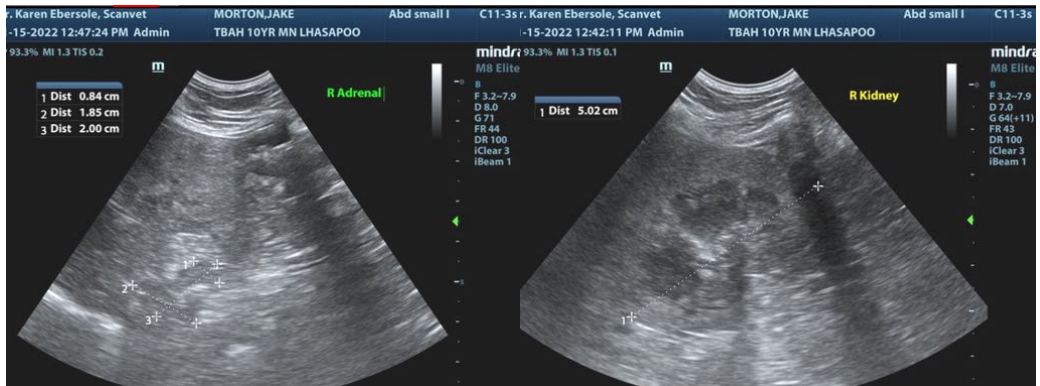
Neutered male

AGE

10 years

WEIGHT

21 lbs



INTERPRETED BY

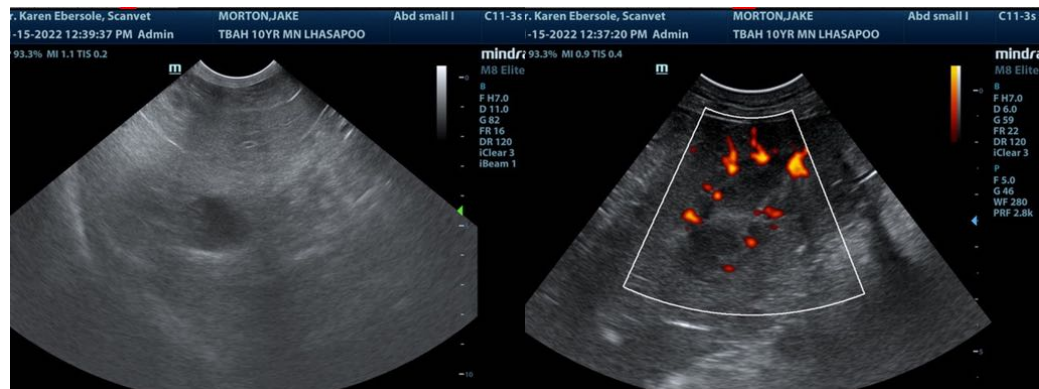
Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

Scanvet



REFERRING VET

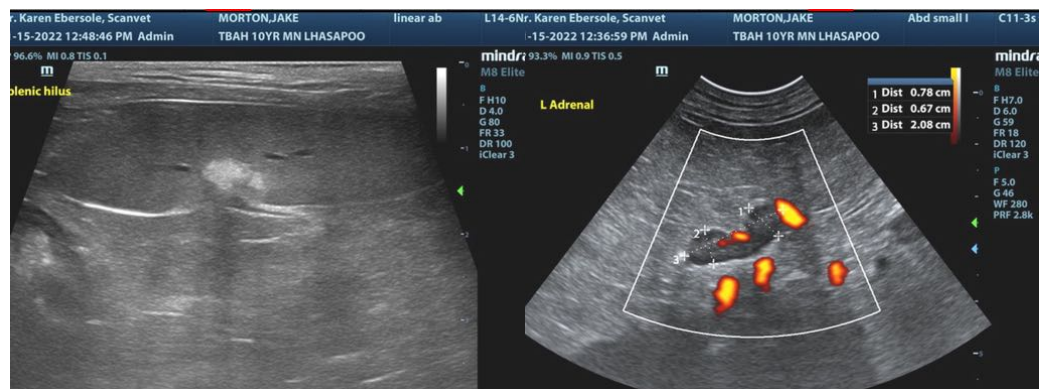
Dr. Lane

INVOICE

42544

DATE

11/15/22





PATIENT

Jake Morton

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

SPECIES

Canine

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.

BREED

Lhasapoo

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

SEX

Neutered male

AGE

10 years

WEIGHT

21 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Lane

INVOICE

42544

DATE

11/15/22