



**PATIENT**

Ted Harker

**PRESENTING CLINICAL SIGNS**

History: Owner suspects FB as dog at a hot wheels car tire and maybe some Lego. Attending saw mass on AFAST scan . Vomiting and diarrhea  
Dehydrated with mild leukocytosis. Elevated Total Bilirubin and protein

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Poodle Cross

**Urinary System**

The **urinary bladder** and trigone presented normal thicknesses and normal tone. Right ureteral dilation was noted and measured 0.54 cm. This appears to be strictured just distal to the right kidney.

**SEX**

The residual prostate was uniform and measured 0.96 cm.

Neutered male

The **left kidney** 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 5.31 cm. The **right kidney** was hydronephrotic with echogenic debris owing to strictured right ureter. The right kidney measured 5.82 cm. The right kidney impinged upon the liver.

**AGE**

9 years

**WEIGHT**

8 kg

**Adrenal Glands**

The **left adrenal gland** was 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 0.34 cm. The right adrenal gland was not visualized owing to obscured view from the right kidney pathology.,

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hour AH

**Spleen**

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself caudally. This is a positional variant and is not pathological. There was no evidence of significant disease.

**REFERRING VET**

Dr. Gruffydd

**Liver**

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.

**INVOICE**

93103

**DATE**

11/16/21



**PATIENT**

**Gastrointestinal**

Ted Harker

Examination of the **gastrointestinal tract** revealed shadowing structure in the pylorus. However, no stasis was noted in the stomach. The intestines were 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**

**Pancreas**

Poodle Cross

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.

**SEX**

Neutered male

**AGE**

9 years

**ULTRASONOGRAPHIC FINDINGS**

Hydronephrotic right kidney.

**WEIGHT**

8 kg

Slight shadowing structure in the pylorus that was non-obstructive.

Folded spleen.

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The structure in the stomach appears to be non-obstructive. The patient may be passing oral medications or similar. However, this does not appear to be the primary issue. Right nephrectomy can be considered with palpation +/- exploratory of the stomach. IVP to assess for any residual renal function is warranted. Otherwise, ureteral stent placement can be considered to save any remaining right renal function. However, the left kidney appears to be adequate in structure to maintain metabolic need.

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hour AH

**REFERRING VET**

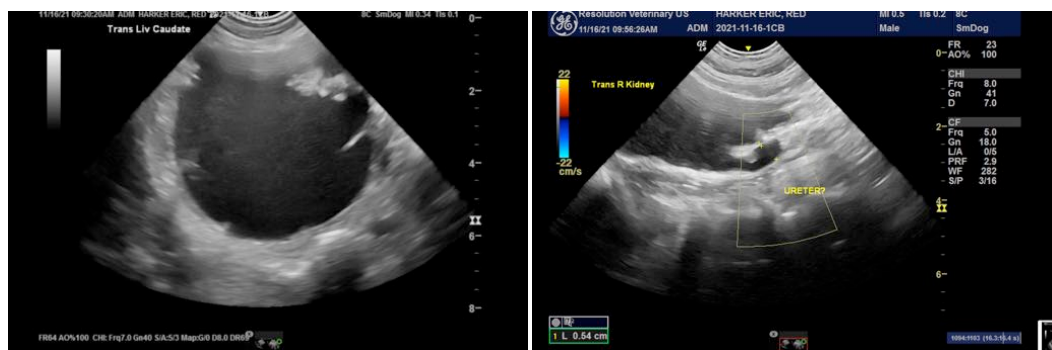
Dr. Gruffydd

**INVOICE**

93103

**DATE**

11/16/21





**PATIENT**

Ted Harker

**SPECIES**

Canine

**BREED**

Poodle Cross

**SEX**

Neutered male

**AGE**

9 years

**WEIGHT**

8 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hour AH

**REFERRING VET**

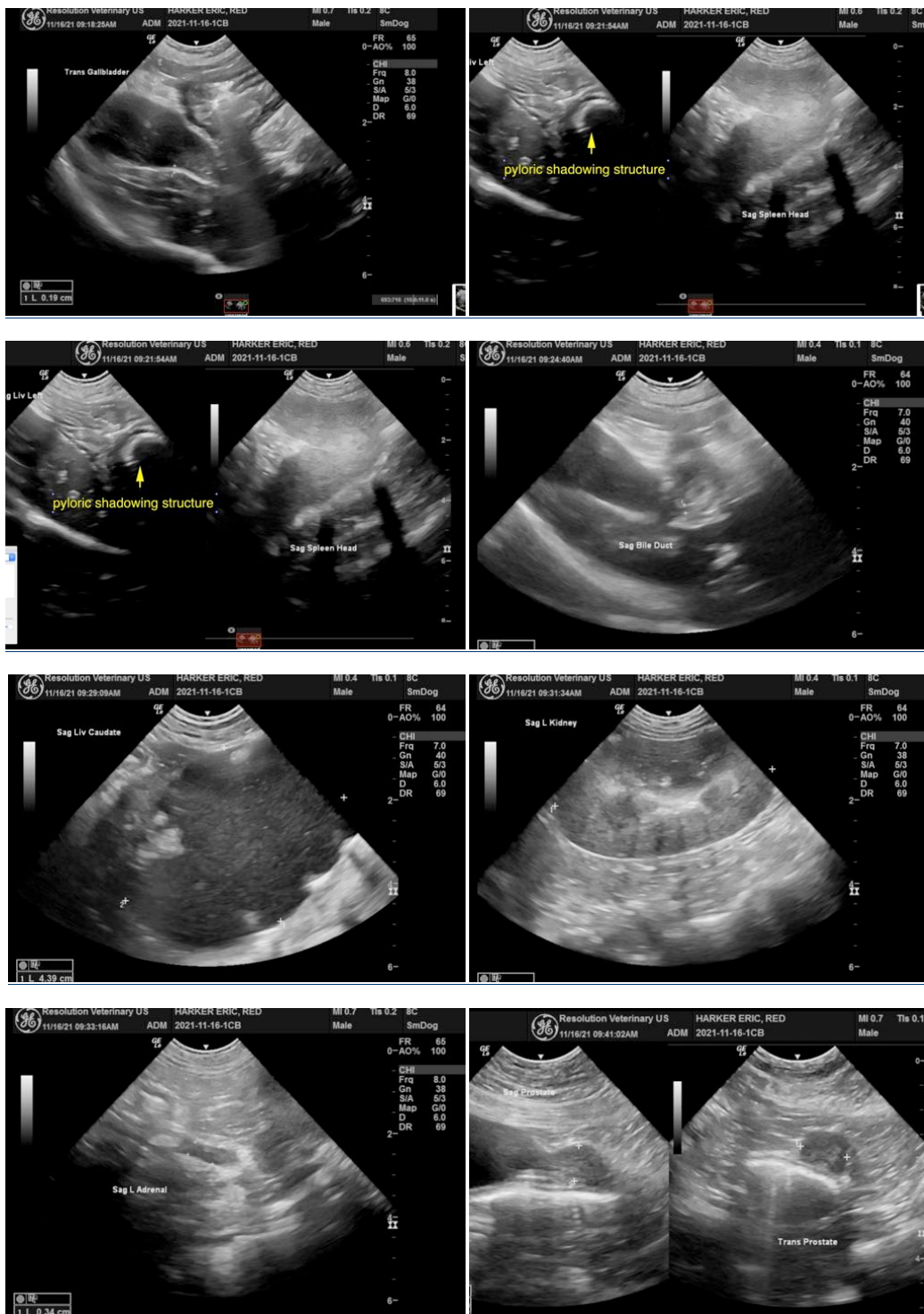
Dr. Gruffydd

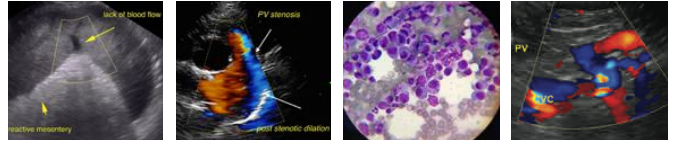
**INVOICE**

93103

**DATE**

11/16/21





**PATIENT**

Ted Harker

**SPECIES**

Canine

**BREED**

Poodle Cross

**SEX**

Neutered male

**AGE**

9 years

**WEIGHT**

8 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

McKnight 24 Hour AH

**REFERRING VET**

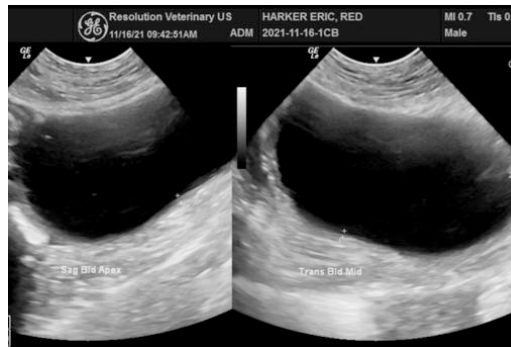
Dr. Gruffydd

**INVOICE**

93103

**DATE**

11/16/21



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  
info@SonoPath.com