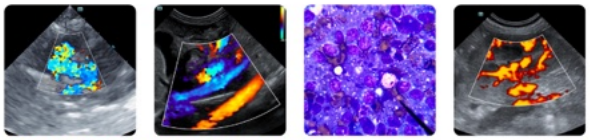


PATIENT

Rex Humphries

SPECIES

Canine

BREED

Field Spaniel

SEX

Neutered male

AGE

6 years

WEIGHT

35.6 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Whitesell

HOSPITAL NAME

Dickson AC

REFERRING VET

Dr. Whitesell

INVOICE

68729

DATE

11/17/25

PRESENTING CLINICAL SIGNS

History: Since September has been vomiting and having diarrhea and has lost 20 lbs. He will eat and wants to eat but has been vomiting. Per the owner, they had rads done at another clinic and they said there was no evidence of a foreign body.
Abnormal PE/Chem/CBC/UA Results: BUN 44, Globs are 3.7, PSL 268

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 normal structure, corticomedullary definition and ratio for this age. Mildly increased cortical echogenicity was noted. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney was normal in size and measured 6.1 cm. The right kidney was mildly subnormal in size and measured 5.2 cm. There was normal blood flow in the kidneys.

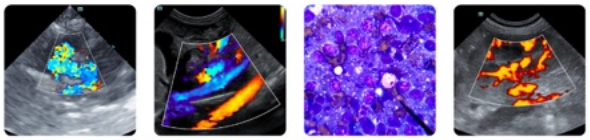
The **prostate** is mildly enlarged, heterogenous and nodular measuring 2.4 cm. If the patient was neutered in a state of prostatitis, this may be normal from regression standpoint, otherwise, there is concern for potential emerging carcinoma. FNA is indicated.

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 0.72 cm at the caudal pole and 0.54 cm at the cranial pole. The left adrenal gland measured 0.88 cm at the cranial pole and 0.58 cm at the caudal 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 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.



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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.

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. The colon appeared to be thickened with undulating submucosal contour. The colonic wall measured 0.63 cm.

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

Prominent prostate.

Minor degenerative right renal changes.

Colitis pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IV fluid support to correct the azotemia is recommended along with parasite management. There was no evidence of foreign bodies. Malassimilation is a strong potential in this patient given the patient's history.

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.

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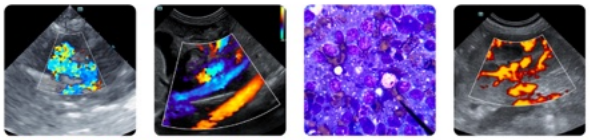

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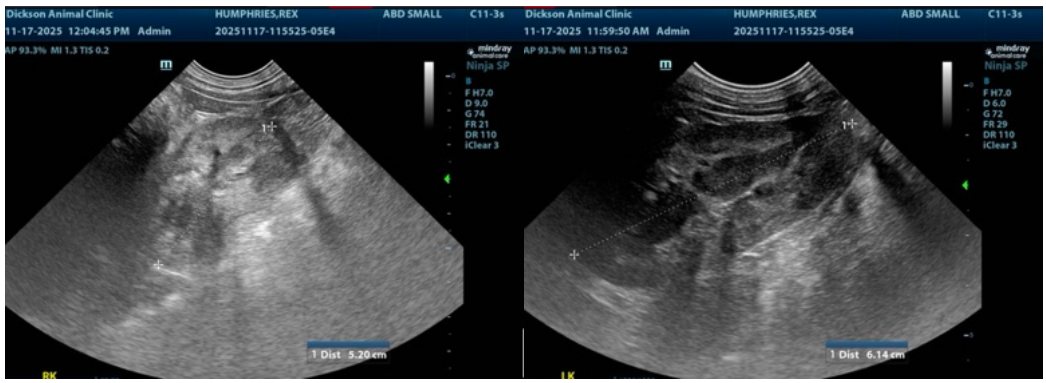

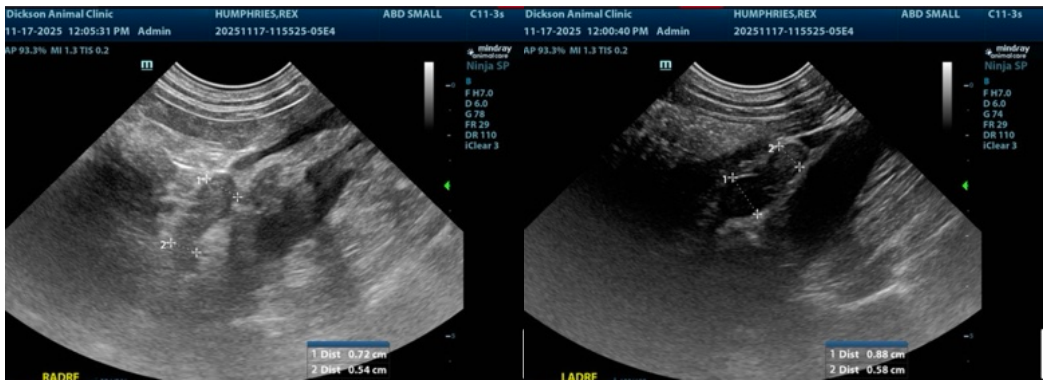

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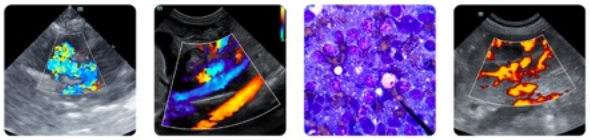

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (CFM), Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com