



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Sophie Angotti	History: weight loss, poor appetite, history of elimination issues (constipation, urine incontinence), arthritis, CP deficiencies, now not eating, no v/d Abnormal PE/Chem/CBC/UA Results: sig wasting, stiff hips, cps slow, urine incontinence, gingival hyperplasia, mid abd organomegaly labs pending, rads suggest chronic constipation, bladder enlarged vs mid abd mass
<b>SPECIES</b>	
Canine	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Boxer	<b>Urinary System</b>
<b>SEX</b>	The <b>urinary bladder</b> was over distended with a minor amount of debris.
Spayed female	The <b>kidneys</b> are normal in size and contour with minor pyelectasia and some loss of corticomedullary definition. The right kidney pyelectasia with a 2.0 cm anechoic cyst.
<b>AGE</b>	<b>Adrenal Glands</b>
11 years	Both <b>adrenal glands</b> 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.
<b>WEIGHT</b>	
71 lbs	
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>spleen</b> revealed multi-focal, hypoechoic nodular changes with irregular contour.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Dr. Grau	The <b>liver</b> 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. Minor gallbladder polyps were present. The gallbladder was over distended with fluid, dependent and suspended debris.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Fredon AH	The <b>stomach</b> was over distended with fluid. The small intestine and colon were unremarkable.
<b>REFERRING VET</b>	<b>Pancreas</b>
Dr. Grau	The base and limbs of the <b>pancreas</b> 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.
<b>INVOICE</b>	
42631	
<b>DATE</b>	
11/21/22	



**PATIENT**

Sophie Angotti

**ULTRASONOGRAPHIC FINDINGS**

Pyelectasia.

Over distended bladder with debris.

**SPECIES**

Canine

Gallbladder polyps with fluid and suspended debris

**BREED**

Boxer

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The pyelectasia may be owing to pelvic scarring or UTI/pyelonephritis. I cannot rule out deep pelvic urethra pathology in this patient. Further imaging of the urethra is indicated if obstructive disease is suspected. Urine culture and sensitivity is warranted along with treatment for gastritis. Recheck sonogram is recommended in 48-72 hours if clinical signs are not resolving. There was no overt evidence of neoplasia.

**AGE**

11 years

**WEIGHT**

71 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Grau

**HOSPITAL NAME**

Fredon AH

**REFERRING VET**

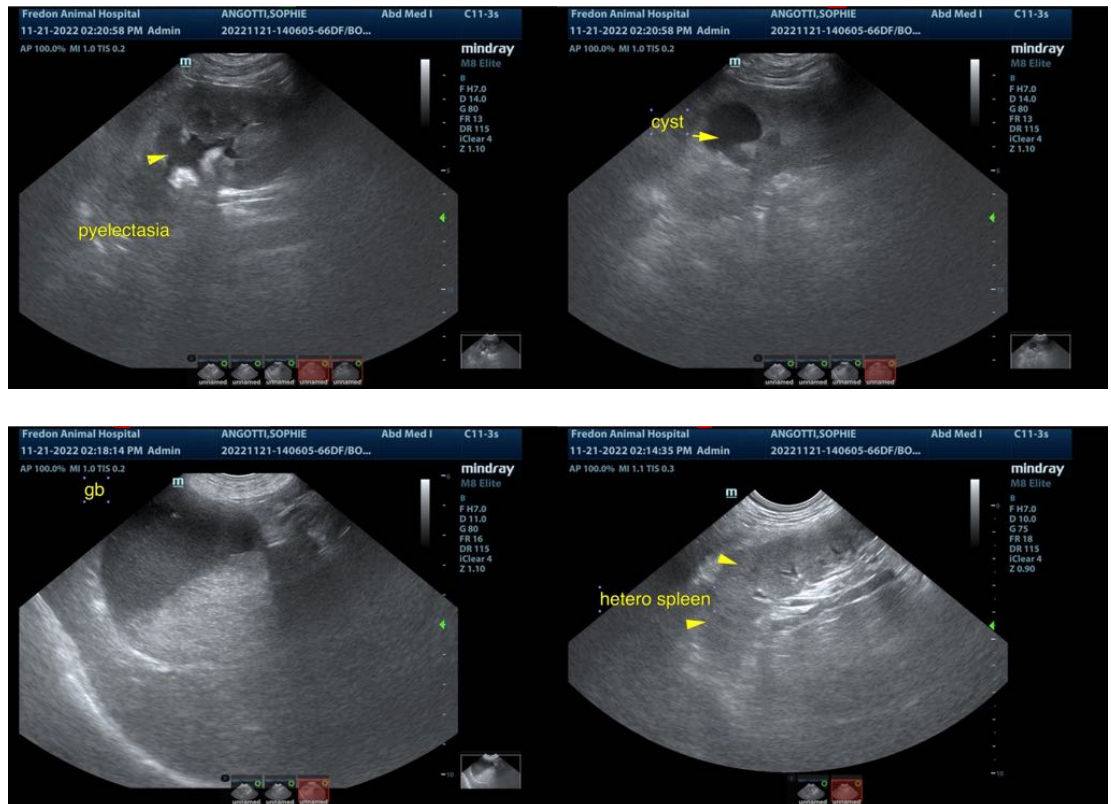
Dr. Grau

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**PATIENT**

Sophie Angotti

**SPECIES**

Canine

**BREED**

Boxer

**SEX**

Spayed female

**AGE**

11 years

**WEIGHT**

71 lbs



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, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Grau

**HOSPITAL NAME**

Fredon AH

**REFERRING VET**

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