



PATIENT

Chulo Calcaterra

PRESENTING CLINICAL SIGNS

History: recheck

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Pug

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.

SEX

Neutered male

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 left kidney measured 5.08 cm. The right kidney measured 3.06 cm.

AGE

9 years

WEIGHT

31 lbs

Adrenal Glands

The left **adrenal gland** was slightly enlarged and mildly irregular. The left adrenal gland measured 0.7 cm at the cranial pole and 0.4 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

IMAGING PERFORMED BY

Jenn

Liver

Exam of the cranial abdomen demonstrated excessive **liver** size and swollen contour. Mild, coarse architecture was noted with increased portal markings and minor parenchymal remodeling is suggestive of an inflammatory component. Minor excessive GB debris was noted with the presence gall bladder dilation and precipitate without the overt formation of mucocele but this may be an issue in the future. This type of liver presentation typically is associated with slow and gradual SAP elevations with low-grade ALT rise. USG-FNA sampling is encouraged if more aggressive LE profiles are present such as ALT > 200 or rapid rise in SAP. These presentations are usually reactive hepatopathies owing to other disease processes either endocrine (Diabetes, Hypothyroidism, Cushing's disease), "antigen surveillance" from the gut/pancreas, or idiopathic breed predisposed progressions.

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

INVOICE

94112

Gastrointestinal

DATE

11/25/21

The **stomach** was filled with ingesta. This is consistent with post prandial presentation. Upper duodenal thickening and spasming are noted, yet improved compared to the prior sonogram.



PATIENT

Pancreas

Chulo Calcatera

Reactive mesentery was noted around the pyloric outflow and right pancreatic limb. The pancreas revealed extensive, mixed echogenic pathology similar to the prior sonogram. The pancreatic pathology appeared to be largely localized to the right limb.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Pug

Persistent pancreatitis necrosis pattern in the right limb.

Retention of ingesta and geriatric abdomen.

SEX

Neutered male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend continuation of the current protocol is recommended. There is a significant amount of pancreatitis pattern is still present.

AGE

9 years

WEIGHT

31 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

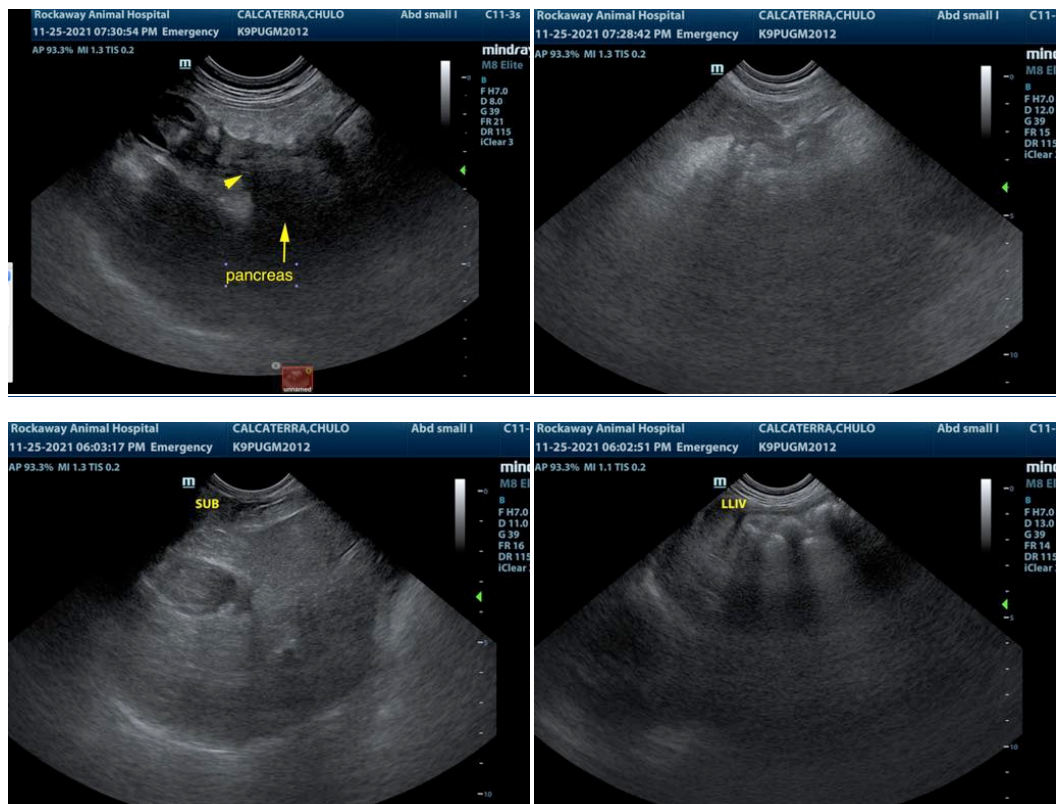
Dr. Maniar

INVOICE

94112

DATE

11/25/21





PATIENT

Chulo Calcatterra

SPECIES

Canine

BREED

Pug

SEX

Neutered male

AGE

9 years

WEIGHT

31 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

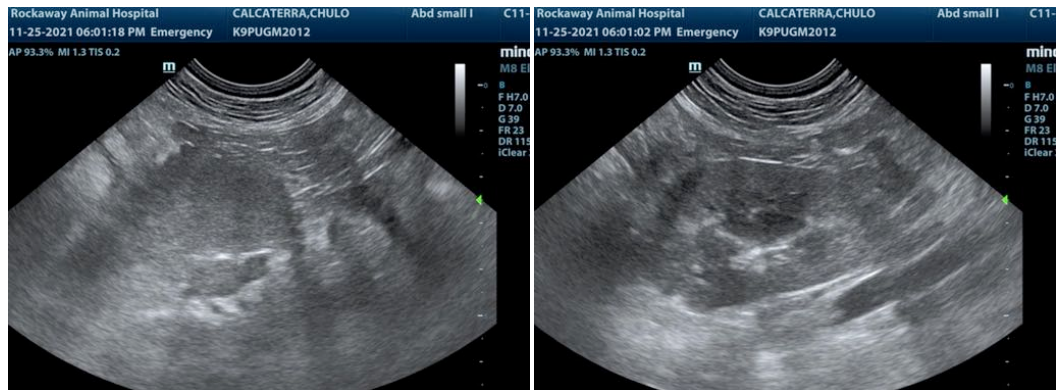
Dr. Maniar

INVOICE

94112

DATE

11/25/21



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