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Clinical Sonography & Telecytology
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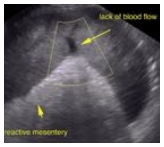
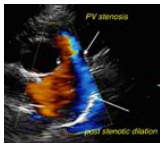
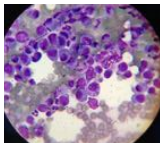
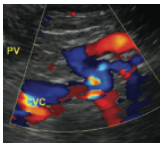

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Mr. Moopers Eaton

SPECIES
Canine

BREED
Yorkshire Terrier

SEX
Netuered male

AGE
10 ½ years

WEIGHT
16.8 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Dr. Moon

HOSPITAL NAME
Shiloh VH

REFERRING VET
Dr. Herr

INVOICE
42710

DATE
11/25/22

PRESENTING CLINICAL SIGNS

History: BCS 6/9 Seen at ER 11/16 for D+ V+. Dx with pancreatitis. Highly elevated Liver enzymes. Concern for Cushing's disease, currently being treated with Denamarin, Metronidazole, and Denamarin for pain
Abnormal PE/Chem/CBC/UA Results: 11/16- ALP >993 (0-140) ALT 692 (0-120) AST 65 (0-65) GGT 17 (0-14) tbili 0.4 (0-0.5)

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. Slight mineralization was noted.

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 left adrenal gland measured 0.44 cm at the cranial pole and 0.63 cm at the caudal pole.

Spleen

The **spleen** was folded upon itself with slight, heterogenous parenchymal changes. There was no evidence of overt pathology.

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. Minor gallbladder polyps were present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

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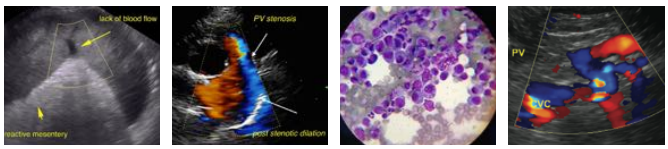

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Gastrointestinal

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.

Pancreas

The **pancreas** revealed heterogenous, mixed hypoechoic parenchymal changes. This is consistent with history of pancreatitis.

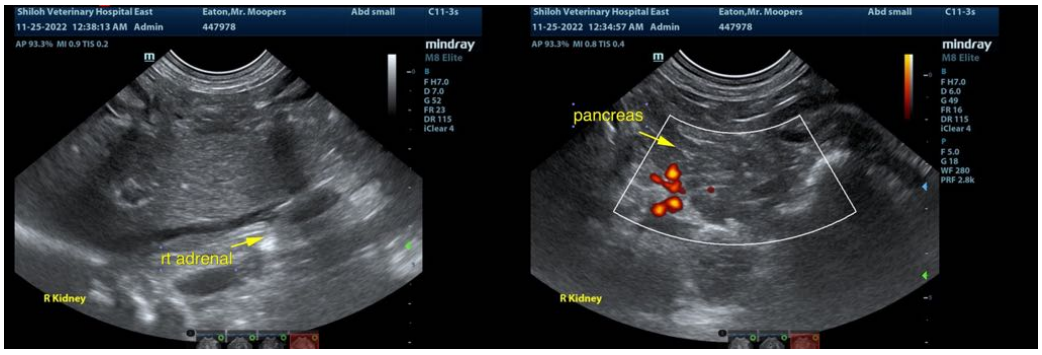
ULTRASONOGRAPHIC FINDINGS

Resolving pancreatitis, changes were fairly minor.

Age related renal and hepatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Outpatient therapy may be adequate. There was no evidence of neoplasia.



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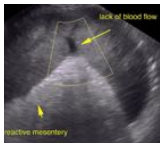
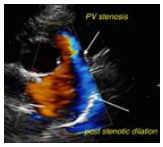
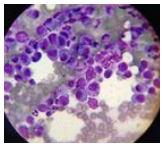
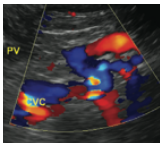

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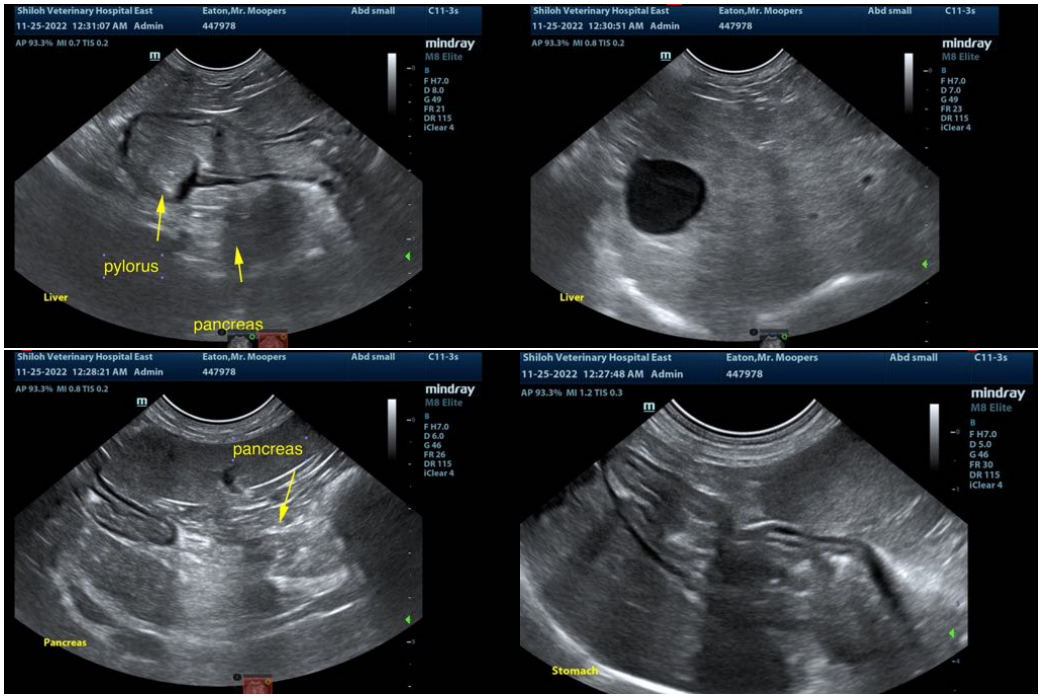

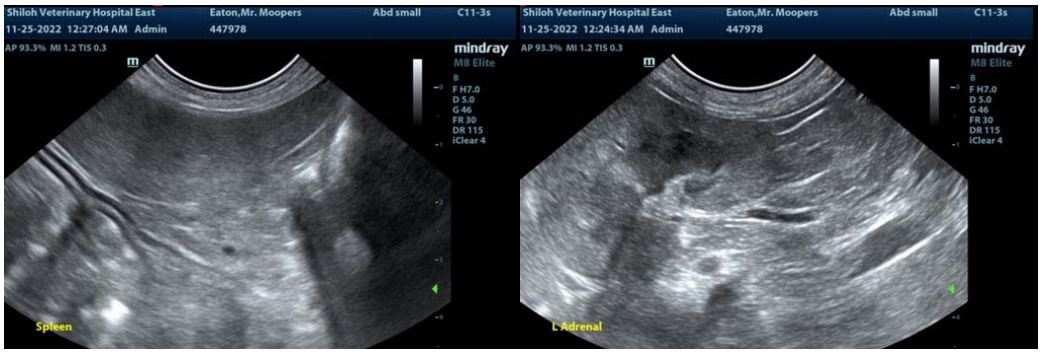

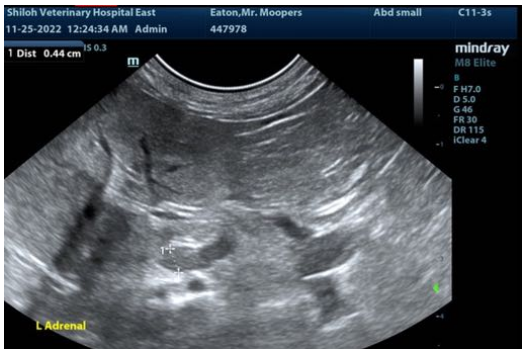

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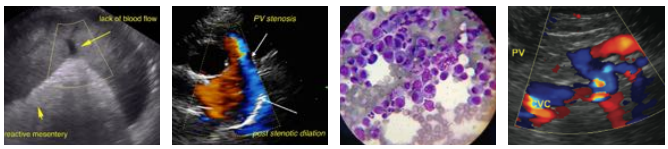

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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