



**PATIENT**

Penny Wade

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

Spayed Female

**AGE**

13 Years

**WEIGHT**

54 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kevin Moon, DVM

**HOSPITAL NAME**

Shiloh VH

**REFERRING VET**

Kevin Moon, DVM

**INVOICE**

00000

**DATE**

11/28/22

**PRESENTING CLINICAL SIGNS**

History: BCS 6/9 Acute, depressed mentation, anorexia, dehydration. P has had pancreatitis before, but usually presents with acute vomiting and improves rapidly with outpatient care. Known bladder polyp

Abnormal PE/Chem/CBC/UA Results: HCT 34% (37-61) ALP 228 (10-125) ALT 485 (23-212) Amylase 1698 (500-1500) Lipase 3556 (200-1800) cPL Abnormal

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

A **urinary bladder** polyp was noted in the apical dorsal wall, measuring 1.44 cm. A moderate amount of debris was noted in the bladder. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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. Slight pyelectasia was present with echogenic debris in the left kidney. The right kidney was similar to the left with slight pyelectasia and pinpoint mineralizations. Assessment for UTI is indicated if not already performed. Both kidneys measured approximately 6.5 cm.

**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 was visualized obliquely, measuring 6.0 mm maximum width.

**Spleen**

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are mild and consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes were noted. Occasional hyperechoic lipogranulomas were noted in the mid caudal body.

**Liver**

The **liver** was mildly swollen and slightly irregular in contour with increased portal markings. The gallbladder revealed minor polyps and dependent debris.

**Gastrointestinal**

The **gastrointestinal tract** was slightly thickened with areas of reactive mesentery. The descending colon was slightly thickened with no loss of mural detail.

**Pancreas**



## PATIENT

Penny Wade

The **pancreas** revealed hyperechoic mixed echogenic changes consistent with remodeling. Possible minor inflammation present.

## SPECIES

Canine

## ULTRASONOGRAPHIC FINDINGS

- Enteritis pattern with reactive mesentery
- Swollen irregular liver- FNA is indicated.
- Possible low-grade pancreatitis
- Age-related renal changes and pinpoint mineralization, potential pyelonephritis
- Bladder polyp, resectable, likely hyperplasia possible tcc
- Age-related splenic changes with occasional hyperechoic lipogranulomas

## BREED

Mixed

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## SEX

Spayed Female

No overt evidence of neoplasia, however, could not be completely ruled out. FNA of the spleen and liver is warranted to ensure these are benign changes. Plasma expanders, GI protectants, and broad-spectrum antibiotics are all indicated. Recheck sonogram in 48 hours if not responding.

## AGE

13 Years

## WEIGHT

54 Pounds

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Kevin Moon, DVM

## HOSPITAL NAME

Shiloh VH

## REFERRING VET

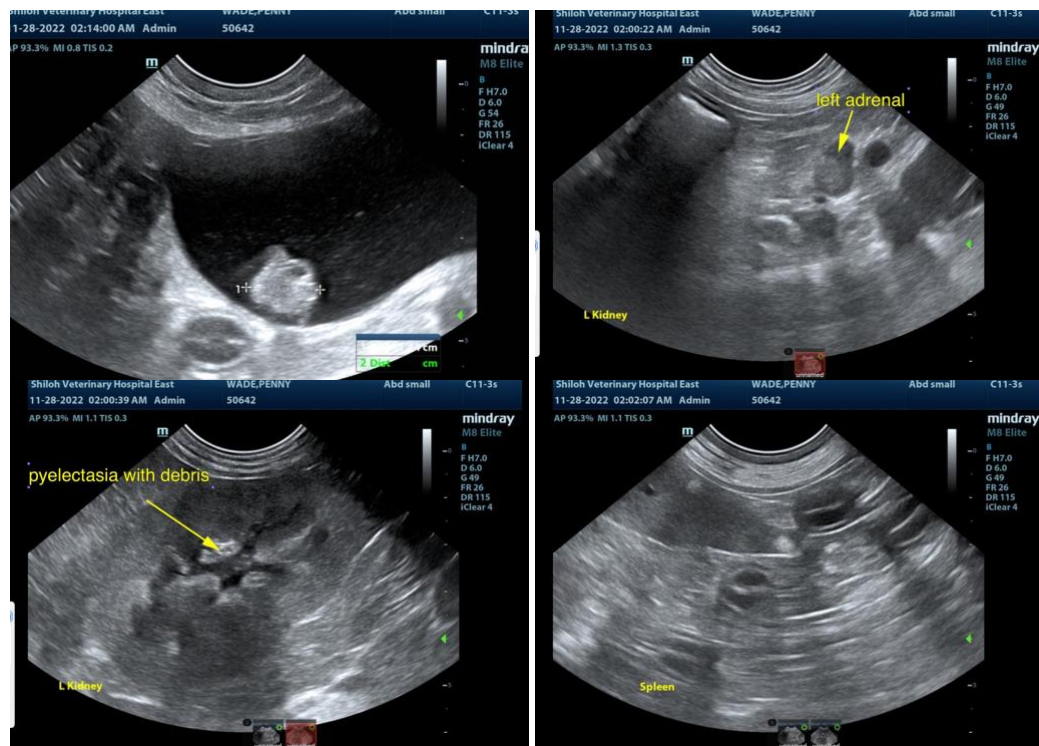
Kevin Moon, DVM

## INVOICE

00000

## DATE

11/28/22





**PATIENT**

Penny Wade

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

Spayed Female

**AGE**

13 Years

**WEIGHT**

54 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kevin Moon, DVM

**HOSPITAL NAME**

Shiloh VH

**REFERRING VET**

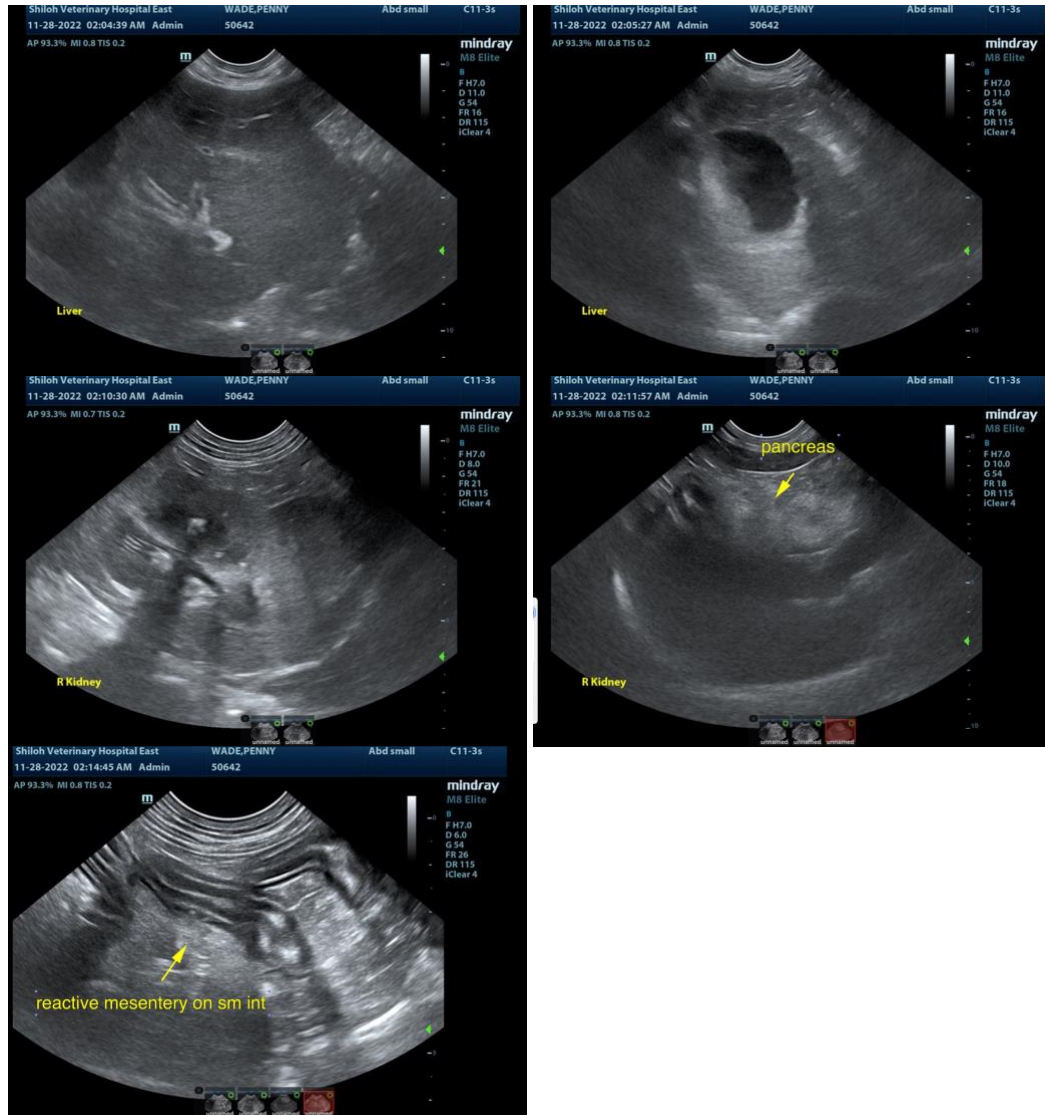
Kevin Moon, DVM

**INVOICE**

00000

**DATE**

11/28/22



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