

## PATIENT

Molly Liebert

## SPECIES

Canine

## BREED

Yorkshire Terrier

## SEX

Spayed female

## AGE

7 years

## WEIGHT

6 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Denise Bruno, LVT,  
RDMS

## HOSPITAL NAME

Kenilworth AH

## REFERRING VET

Dr. Mansour

## INVOICE

42797

## DATE

11/29/22

## PRESENTING CLINICAL SIGNS

History: Vomiting + diarrhea. Ate last 7 PM Blood work shows high liver enzymes. Evaluate for neoplasia. Labs and Radiotelegraphs attached.

## 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. The left kidney measured 3.27 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 measured 1.51 x 0.53 cm at the caudal pole and 0.45 cm at the cranial pole.

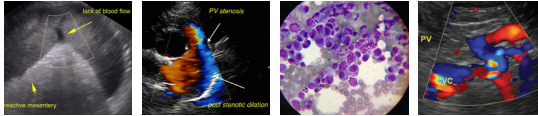
### Spleen

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.

### 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. 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.

### Gastrointestinal



**PATIENT**

Molly Liebert

**SPECIES**

Canine

**BREED**

Yorkshire Terrier

**SEX**

Spayed female

**AGE**

7 years

**WEIGHT**

6 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Denise Bruno, LVT,  
RDMS

**HOSPITAL NAME**

Kenilworth AH

**REFERRING VET**

Dr. Mansour

**INVOICE**

42797

**DATE**

11/29/22

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. There were minor areas of luminal fluid noted. Moderate amount of chyme was noted in the stomach. There was no evidence of obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable.

**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.

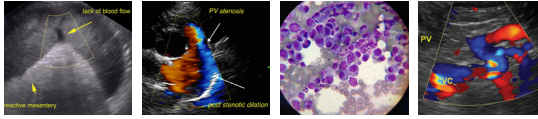
**ULTRASONOGRAPHIC FINDINGS**

Non-specific gastrointestinal upset. Chyme noted in the stomach.

Benign hepatopathy.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Delayed outflow may be an issue in this patient. FNA of the liver is indicated for further definition given the patient's history. I recommend Leptospirosis titers in this patient as well as hepatic FNA and supportive care. Ampicillin, Metronidazole and GI support is all indicated. There was no evidence of foreign body or neoplasia.



**PATIENT**

Molly Liebert

**SPECIES**

Canine

**BREED**

Yorkshire Terrier

**SEX**

Spayed female

**AGE**

7 years

**WEIGHT**

6 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Denise Bruno, LVT,  
RDMS

**HOSPITAL NAME**

Kenilworth AH

**REFERRING VET**

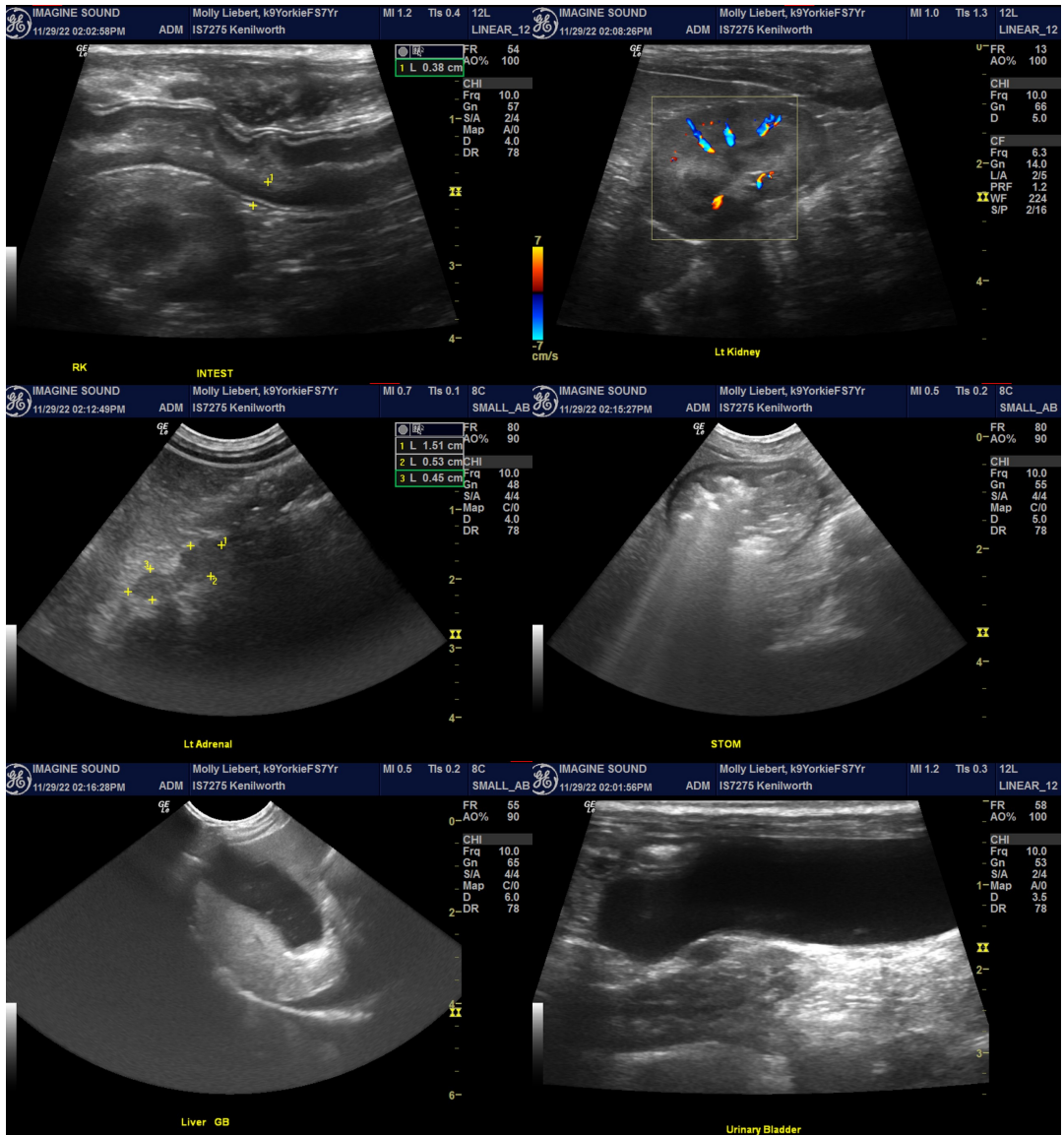
Dr. Mansour

**INVOICE**

42797

**DATE**

11/29/22



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**  
Eric.Lindquist@SonoPath.com