



**PATIENT PRESENTING CLINICAL SIGNS**

Cookie Mariani D/c from hospital Sat Having Black tarry stools , gastritis, lethargic prev u/s on 10/28 showed L adrenal adeoma, aggressive chronic hepatic changes

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED**

Pom

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

**SEX**

Spayed Female

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. Mineralization noted in both kidneys. The right kidney measured 3.9 cm.

**AGE**

8 Years

**Adrenal Glands**

**WEIGHT**

15 Pounds

The **right adrenal gland** was 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 right adrenal gland measured 1.88 cm x 0.70 cm at the caudal pole and 0.65 cm at the cranial pole.

**INTERPRETED BY**

Eric Lindquist, DMV

The **left adrenal gland** presented a swollen cranial pole, consistent with adenoma, measuring 1.0 cm. The caudal pole measured 0.31 cm. 2.06 cm in length.

DABVP, Cert. IVUSS

**Spleen**

**IMAGING PERFORMED BY**

Jenn

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 were noted.

**HOSPITAL NAME**

Rockaway AH

**Liver**

**REFERRING VET**

Dr. Maniar

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

**INVOICE**

42515

**Gastrointestinal**

**DATE**

11/3/22

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.



**PATIENT**

Cookie Mariani

**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.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

- Persistent left adrenal adenoma
- Minor non-obstructive nephrolithiasis
- Structurally normal GI tract

**BREED**

Pom

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

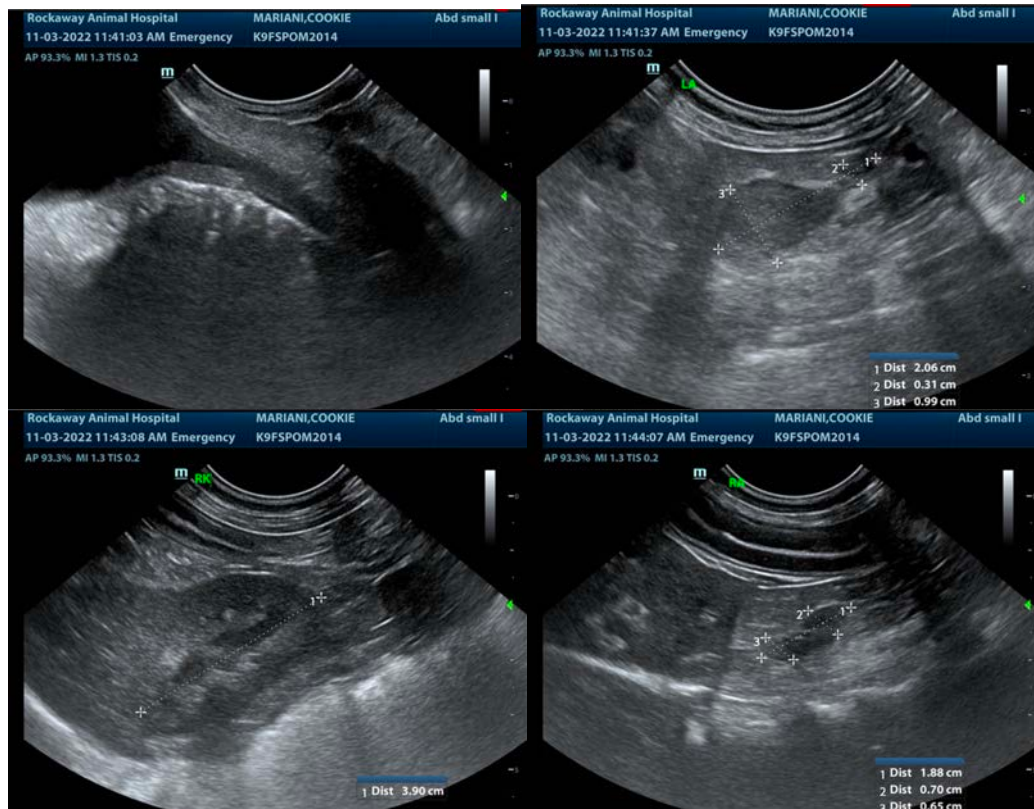
**SEX**

Spayed Female

If the patient appears Cushingoid, workup for adrenal dependent Cushing's would be indicated. Blood pressure measurements warranted. If hypertension is present, then urine catecholamine indicated. Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.

**AGE**

8 Years



**WEIGHT**

15 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

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**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

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**DATE**

11/3/22



**PATIENT**

Cookie Mariani

**SPECIES**

Canine

**BREED**

Pom

**SEX**

Spayed Female

**AGE**

8 Years

**WEIGHT**

15 Pounds

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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

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