



**PATIENT PRESENTING CLINICAL SIGNS**

**Krieg Arndt**  
History: Krieg has had issues with elevation in ALT. He has been acting normal with no abnormal clinical signs. Elevated ALT was detected on wellness blood tests. Had elev. ALT 8-9-21 and was placed on amoxicillin, metronidazole, and Denamarin and blood tests rechecked 10-16-21 and ALT more elevated.  
8-9-21 Chem/CBC-ALT-159; Rest normal limits. 10-16-21 Chem/CBC-ALT-236; Rest normal limits. 10-26-21 Pre Bile Acids- 2.6 (<13) Post Bile Acids-29.6 (<25)

**SPECIES**

Canine

**BREED**

Corgi

**SEX**

Intact male

**AGE**

2 years

**WEIGHT**

25.7 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Boley

**HOSPITAL NAME**

Animal Hospital of  
Colorado Springs

**REFERRING VET**

Dr. Boley

**INVOICE**

92923

**DATE**

11/5/21

**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 **prostate** was uniformly enlarged with lobar swelling appeared to impinge upon the urethra and mildly deviate the descending colon. The prostatic tissue was hyperechoic containing focal areas of decreased echogenicity. These changes are suggestive of either chronic inflammatory episodes, benign cystic pathology or both. Underlying neoplasia cannot be completely ruled-out but is lower on the differential list. This presentation is most consistent with benign prostatic hyperplasia with possible active prostatitis. Neutering or off-label Finasteride (Propecia) (0.1-0.5 mg/kg Sid) treatment is indicated +/- FNA or prostatic wash cytology and culture. The prostate measured 2.26 cm.

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 right kidney measured 6.45 cm. The left kidney measured 6.39 cm.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**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** 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



**PATIENT** 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.

Krieg Arndt

**SPECIES** *Gastrointestinal*

Canine

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.

**BREED** Corgi

**SEX** *Pancreas*

Intact male

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.

**AGE** 2 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT** Minor BPH prostate and mild bladder thickening.

25.7 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

Urinary work-up is warranted. Ultrasound-guided FNA of the liver is warranted for further definition; however, structurally it appears unremarkable. There was no evidence of intrahepatic or extrahepatic shunting. Bile acid elevation may be spurious, FNA is indicated to assess for inflammatory cell type likely reactive hepatopathy.

**IMAGING PERFORMED BY**

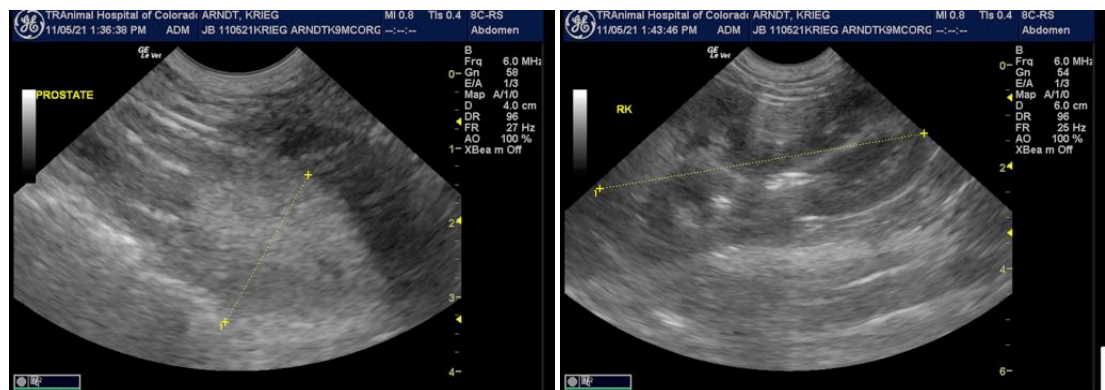
Dr. Boley

**HOSPITAL NAME**

Animal Hospital of  
Colorado Springs

**REFERRING VET**

Dr. Boley



**INVOICE**

92923

**DATE**

11/5/21



**PATIENT**

Krieg Arndt

**SPECIES**

Canine

**BREED**

Corgi

**SEX**

Intact male

**AGE**

2 years

**WEIGHT**

25.7 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Boley

**HOSPITAL NAME**

Animal Hospital of  
Colorado Springs

**REFERRING VET**

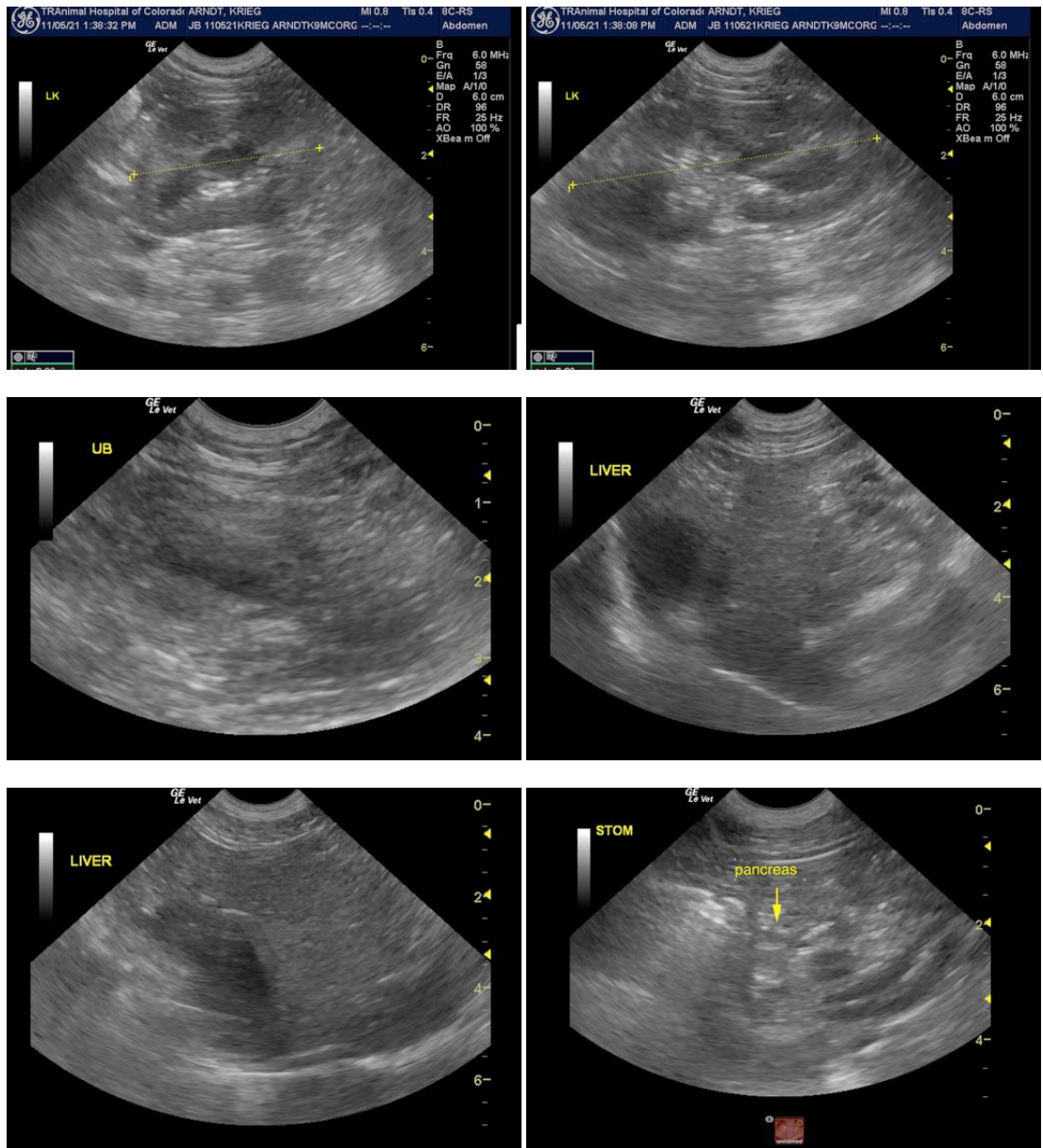
Dr. Boley

**INVOICE**

92923

**DATE**

11/5/21



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