



**PATIENT PRESENTING CLINICAL SIGNS**

Brody Dowd History: increased seizures

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED** 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.

Yorkie

**SEX**

Neutered male

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralization and occasional cortical cyst was noted in the kidneys. The left kidney measured 4.12 cm. The right kidney measured 3.94 cm.

**AGE**

12 years

**WEIGHT**

8.7 lbs

**Adrenal Glands**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

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 right adrenal gland measured 1.88 x 0.83 cm at the cranial pole and 0.55 cm at the caudal pole. The left adrenal gland measured 1.58 x 0.66 cm at the caudal pole and 0.33 cm at the cranial pole.

**IMAGING PERFORMED BY**

Jenn

**Spleen**

**HOSPITAL NAME**

Rockaway AH

The **spleen** revealed a hypoechoic nodule that measured 1.0 x 0.5 cm. Other, minor heterogenous changes were noted.

**REFERRING VET**

Dr. Maniar

**Liver**

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The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Uniform swelling was noted particularly at the left liver lobe and super imposed upon the spleen. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

**DATE**

12/14/21



**PATIENT**

**Gastrointestinal**

Brody Dowd

Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. The small intestine and colon were unremarkable.

**SPECIES**

Canine

**Pancreas**

**BREED**

Yorkie

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.

**SEX**

Neutered male

**ULTRASONOGRAPHIC FINDINGS**

Geriatric abdomen.

**AGE**

12 years

Minor renal mineralization.

Slight splenic nodule.

**WEIGHT**

8.7 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a possibility of round cell neoplasia. Hemangiosarcoma or hyperplasia is suspected. Given the seizure activity CT with contrast of the CNS is strongly encouraged.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**ABOUT SONOPATH CT SERVICES:**

**SonoPath CT Services** are offered at the [Blairstown Animal Hospital](#). Blairstown, New Jersey. More information can be found at

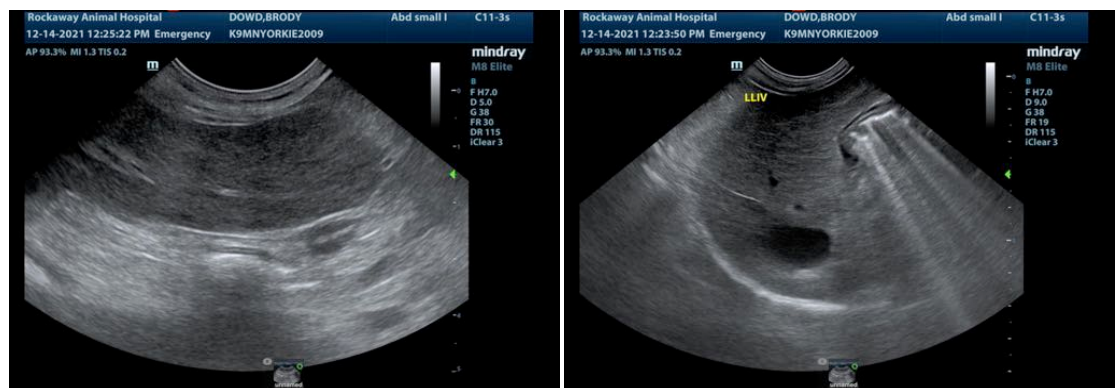
<https://sonopath.com/resources/sonopaths-teleconsultation-services-and-sdep-certification/sonopath-ct-services>

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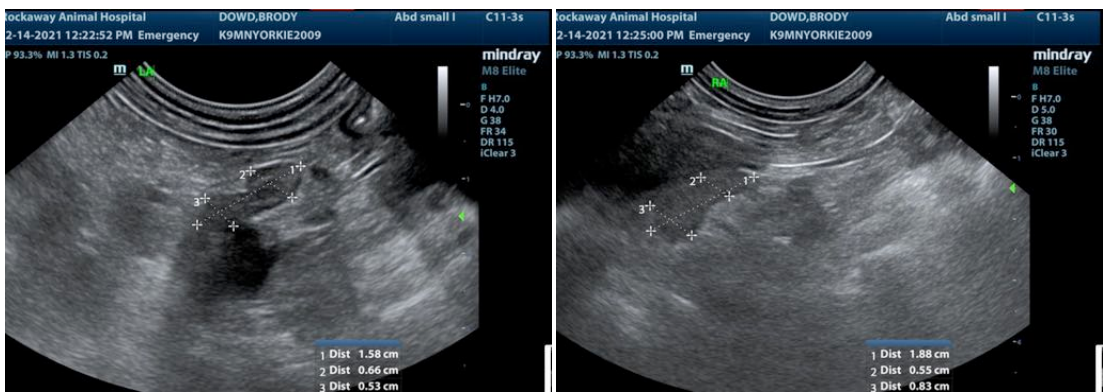
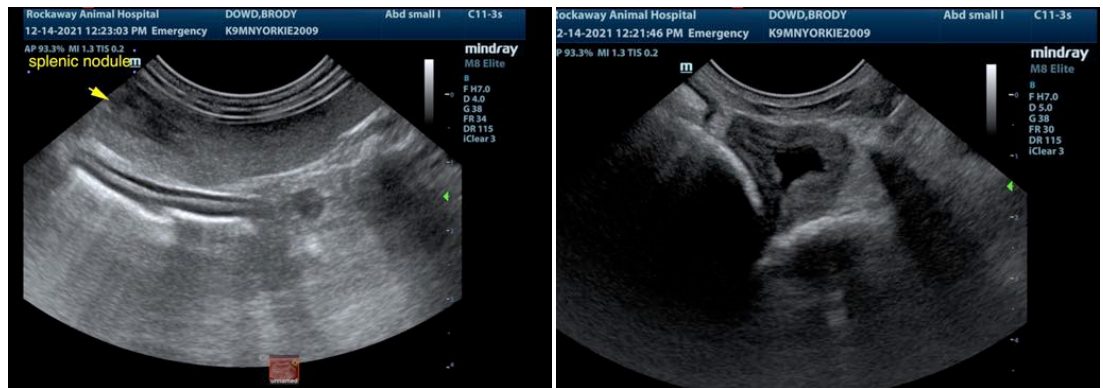
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



**PATIENT**

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
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Canine

**BREED**

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