



PATIENT

Sophie Cohen

SPECIES

Canine

BREED

Golden Retriever

SEX

Spayed Female

AGE

9 years

WEIGHT

68.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Kelly Vazquez, CVT

HOSPITAL NAME

Millburn VH

REFERRING VET

Dr. Turowsky

INVOICE

94571

DATE

12/14/21

PRESENTING CLINICAL SIGNS

History: Possible collapsing episode reported by owner approx. 1 week ago. Mild anemia with significant regenerative response. No current meds.
RBC 7.27, HCT 33.9%, retics 269, HGB 9.5, MCV 47, MCH 13.1, albumin. 2.5.

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 5.65 cm. The right kidney measured 5.23 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 2.71 x 0.52 cm at the caudal pole and 0.63 cm at the cranial pole. The right adrenal gland measured 2.21 x 1.05 cm at the cranial pole and 0.8 cm at the caudal pole.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. 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.



PATIENT *Gastrointestinal*

Sophie Cohen Retention of ingesta was noted in the stomach. The small intestine and colon were unremarkable.

SPECIES *Pancreas*

Canine 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.

BREED

Golden Retriever

Free Abdomen

SEX

The iliac trifurcation was unremarkable.

Spayed Female

AGE

ULTRASONOGRAPHIC FINDINGS

9 years

Unremarkable abdomen with largely age related changes.

Minor retention of ingesta in the stomach.

WEIGHT

68.2 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
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There was no obvious evidence of cause of anemia. CBC path review +/- bone marrow aspirates are warranted. If any anorexia is an issue then GI blood loss could be an issue even though structurally the gastrointestinal tract was unremarkable. An echocardiogram is warranted to assess for any pericardial effusion or right auricular masses given the patient's history.

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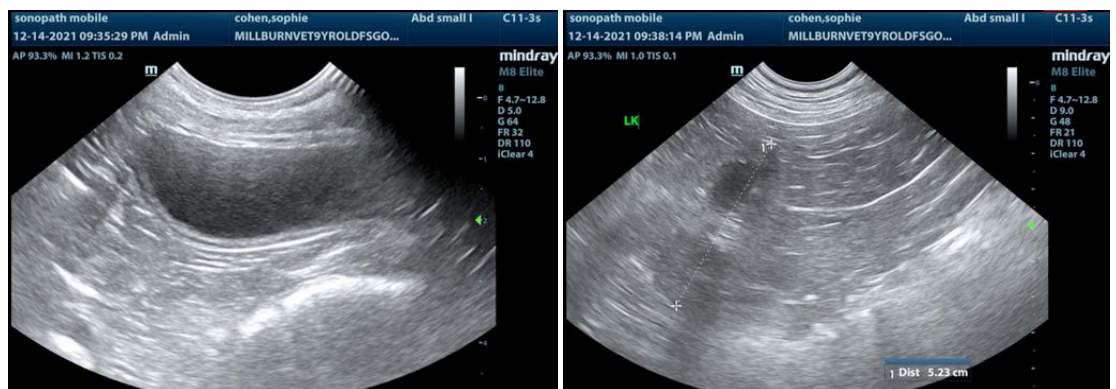
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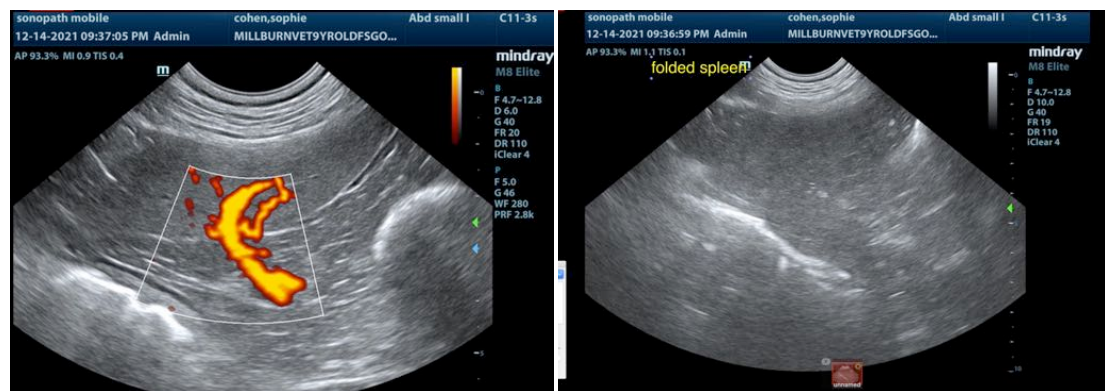
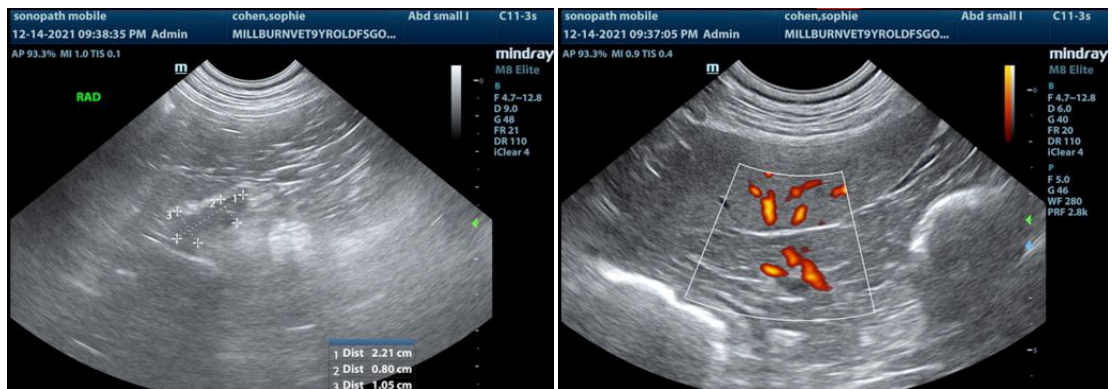
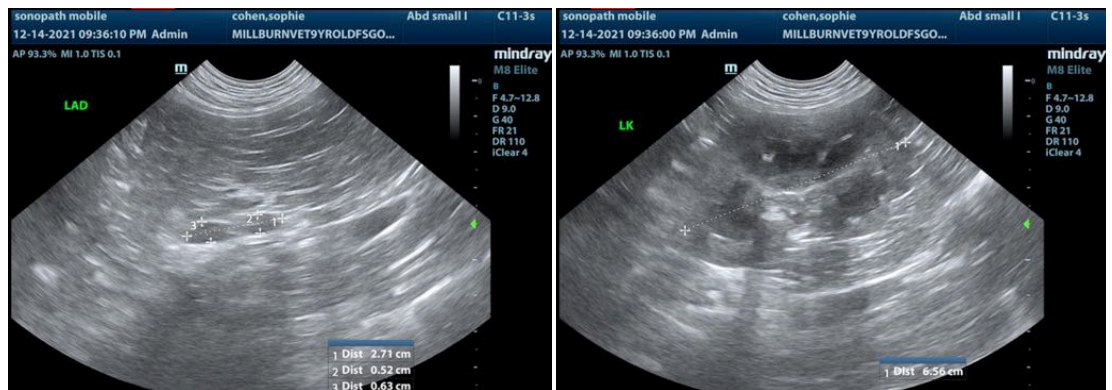
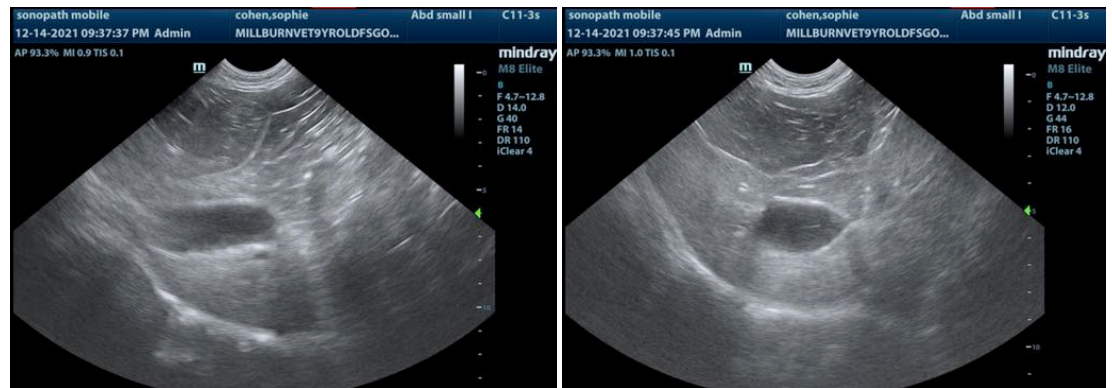
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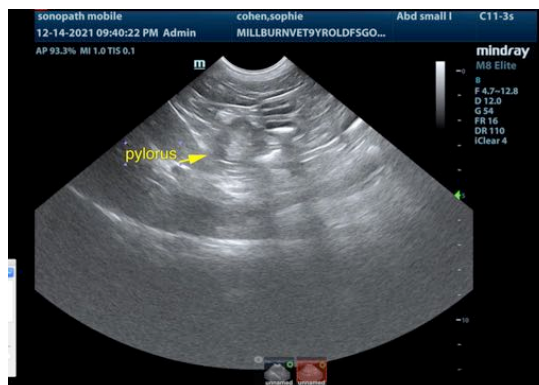
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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