

**DATE**

12/20/21

PRESENTING CLINICAL SIGNS

History: Presented on 12/13/2021 for an enlarged right submandibular l.n. Cytology to lab = reactive lymph node. P has a heart murmur and dental disease. Unsure if reactive l.n. is due to dental disease, so recommended dental cleaning with echo prior. O also mentioned that p has intermittent diarrhea and inappetence and wants to ensure there is nothing else going on. Recommended an abdominal US as well to assess.

PATIENT

Sugar Boyer

Current Medications: Long-term: 0.5mg Vetmedin BID, 12.5mg Theophylline BID Started on 12/13/21: 25mg Metronidazole BID, Provable.

SPECIES

Canine

Lab Results: Overall labs unremarkable other than mild neutrophilic leukocytosis (WBC 17.6, neut 13376), HCT 61 K 6.0, Na/K ratio 26 (likely due to dehydration).

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Torbugesic IV.

Stat Report: Not requested.

BREED

Yorkshire Terrier

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SEX**

Intact female

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.

AGE

8/30/13

The uterus was uniform and measured 1.0 cm. The uterus had an empty lumen. Slight areas of uterine thickening were noted with trace luminal fluid in the body. This may be owing to heat or possible early metritis. The left ovary was uniform and measured 1.05 cm. The right ovary was uniform and measured 1.0 cm.

WEIGHT

3.9 lbs

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 2.97 cm and the left kidney 2.89 cm.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**Stephanie Pearce
RDCS, RVT**Adrenal Glands**

The right adrenal gland was slightly swollen at the caudal pole and measured 1.46 x 0.65 cm at the caudal pole and 0.49 cm at the cranial pole. The left adrenal gland measured 1.52 x 0.46 cm at the caudal pole and 0.42 cm at the cranial pole.

HOSPITAL NAME

Everhart VC

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.

REFERRING VET**INVOICE**

94741

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 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.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. The gastric lumen was fluid filled. 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.

Pancreas

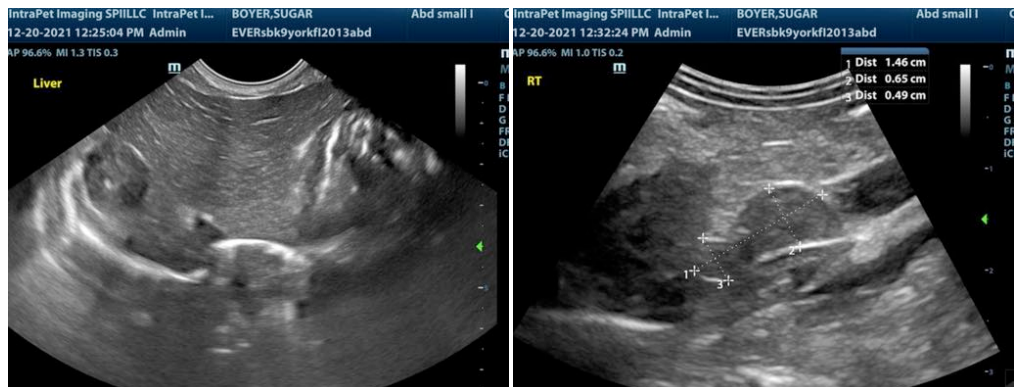
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

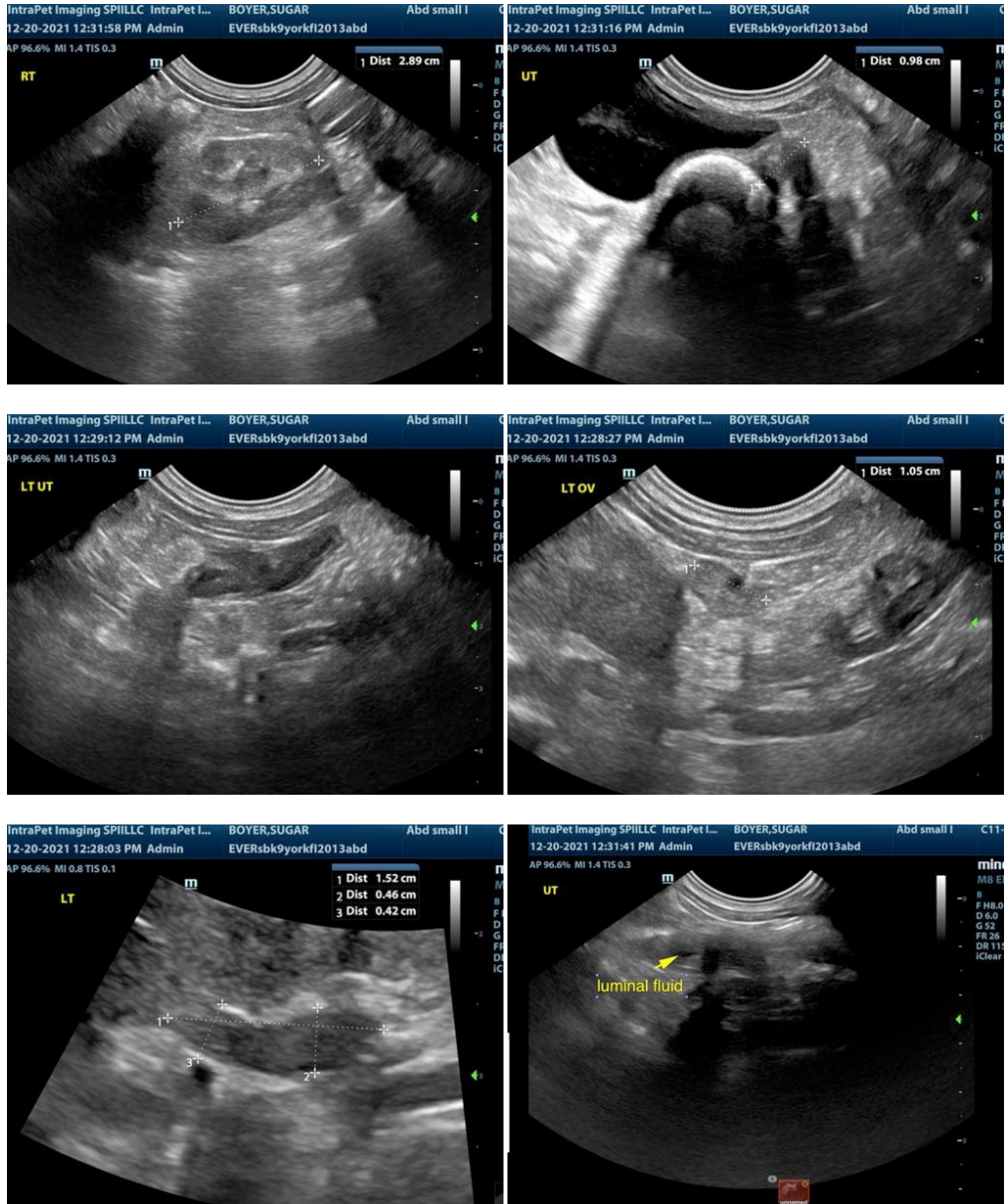
ULTRASONOGRAPHIC FINDINGS

Mildly thickened uterus with slight luminal fluid.
Slightly irregular right adrenal gland.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If any vaginal discharge is present I recommend ovariohysterectomy. If reproductive activity is not necessary in this patient then preventative ovariohysterectomy is recommended. No other evidence of significant disease.





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
 Eric.Lindquist@SonoPath.com