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Clinical Sonography & Telecytology
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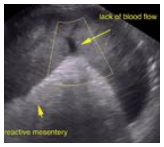

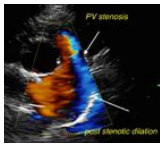

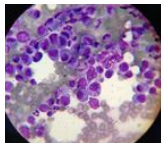
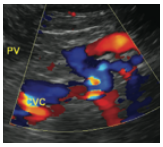

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Sevi Peck

SPECIES
Canine

BREED
German Shepherd

SEX
Spayed female

AGE
3 years

WEIGHT
72 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Dr. Ebersole

HOSPITAL NAME
Scanvet

REFERRING VET
Dr. Bailey

INVOICE
42281

DATE
12/21/22

PRESENTING CLINICAL SIGNS

History: Suspect IMHA. Initially was not anemia, but PCV today 23% and serum icteric. Lethargy and inappetence.
Abnormal PE/Chem/CBC/UA Results: PE: mm pale, T 103.8. Mild lameness LH. Cranial abdominal organomegaly. RADS: diffuse splenomegaly. Thorax rads WNL.. BW (12/19) PCV 48%, Retics 142 H. BW (today) PCV 23%, T Bili 1.1. TP normal. Serum icteric. Anaplasma +

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 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 6.9 cm. The left kidney measured 7.97 cm.

Adrenal Glands

The left **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 left adrenal gland measured 2.5 x 0.49 cm at the caudal and 0.5 cm at the cranial pole. The region of the right adrenal gland was imaged with no evidence of pathology.

Spleen

The **spleen** was mildly enlarged and slightly heterogenous. This is consistent with reactive spleen and swollen contour. If platelet count is over 70000 and hematocrit is over 20 screening FNA is indicated to ensure that underlying round cell neoplasia is not playing a role in this patient.

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.

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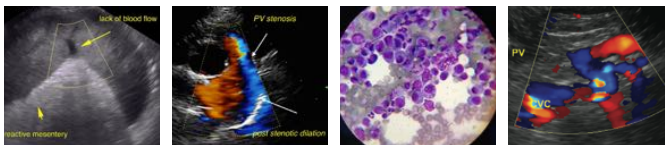

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Gastrointestinal

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

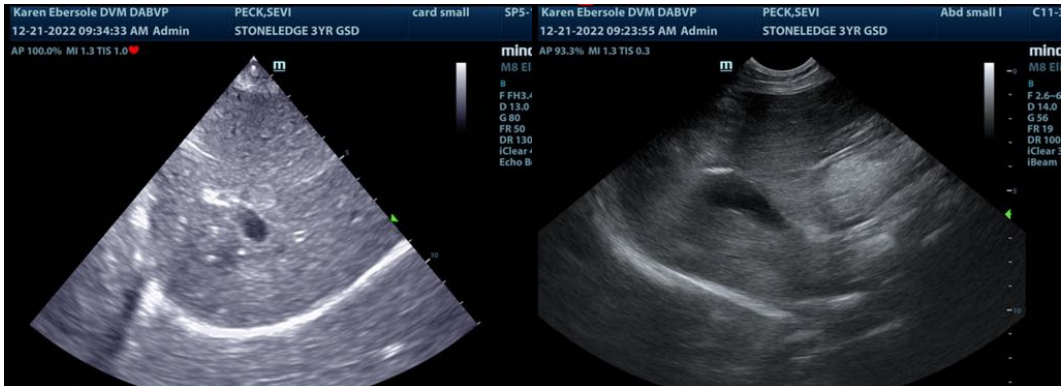
ULTRASONOGRAPHIC FINDINGS

Minor hypersplenism pattern.

Minor potential for round cell neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening FNA of the spleen is indicated. However, there was no evidence of hemorrhage or significant disease. This is a fairly common finding with German Shepherds to have an enlarged spleen; however, this appears to be somewhat more prominent than normal for this breed. This is likely regenerative. CBC path review +/- bone marrow aspirate and splenic FNA is all indicated.



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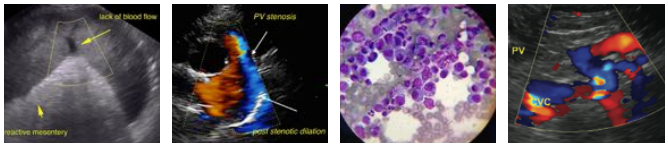

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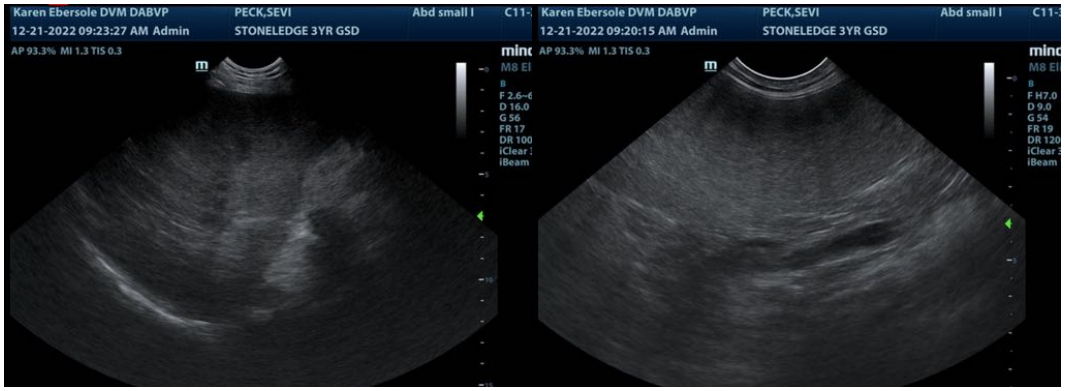

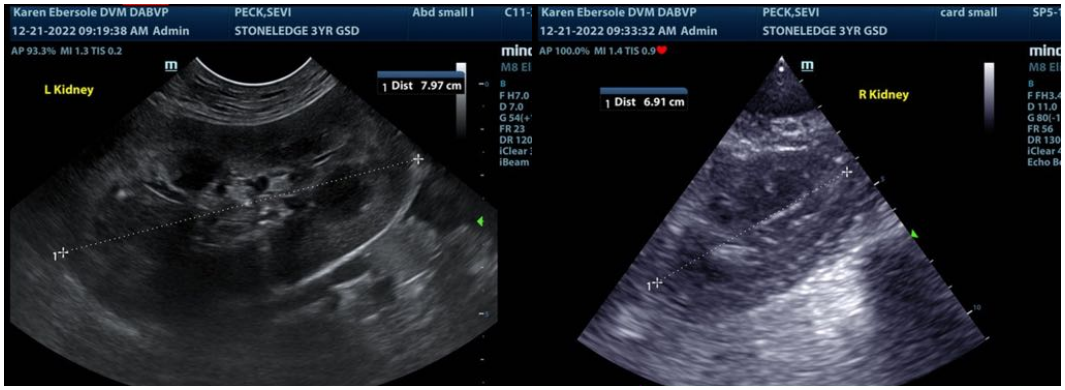

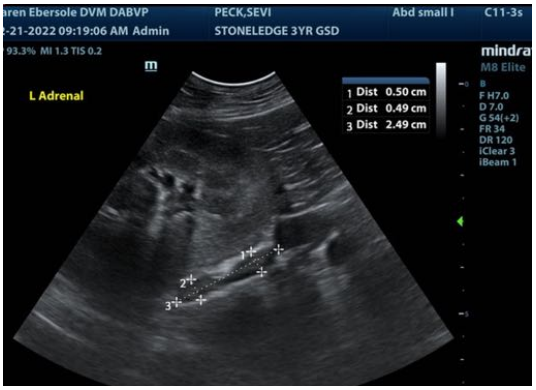

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com