



PATIENT

Turtle Johnson

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

Female

AGE

5 years

WEIGHT

3.8 lbs

PRESENTING CLINICAL SIGNS

History: Presented for Pre-Sx exam for OVH/mammary mass removal. Pt doing well overall, thinks mammary mass on caudal right chain has increased in size- no bleeding/oozing noted. E/D/U/D WNLs, no C/S/V/D. Thinks last heat occurred several months ago, but unsure when.
Abnormal PE/Chem/CBC/UA Results: Thoracic radiograph consult non remarkable

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 uterus was empty, but mildly thickened and measured approximately 1.0 cm in thickness at the base of the uterine body. The ovaries were not visualized. The uterine horns were not visualized.

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. Slight mineralization was noted in the kidneys that was non-obstructive. The left kidney measured 2.67 cm. The right kidney measured 3.02 cm.

INTERPRETED BY

Eric Lindquist, DMV
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IMAGING PERFORMED BY

Melissa DaSilva

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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 right adrenal gland measured 1.17 x 0.32 cm at the caudal pole and 0.28 cm at the cranial pole. The left adrenal gland measured 0.8 x 0.29 cm.

Spleen

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

Liver

The **liver** was slightly subnormal in size, yet there was no evidence of portosystemic shunting. The portal vein to vena cava ratio was 1:1 with no obvious evidence of portosystemic shunting. 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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Gastrointestinal

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

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Pancreas

Yorkshire Terrier

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

Female

ULTRASONOGRAPHIC FINDINGS

AGE

5 years

Structurally unremarkable abdomen with slight microhepatica.

Mildly thickened uterus.

WEIGHT

3.8 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bile acid profile would be indicated. There was no evidence of abdominal pathology related to the clinical history. Given the microhepatica portal hypoplasia/microvascular dysplasia could be an issue.

INTERPRETED BY

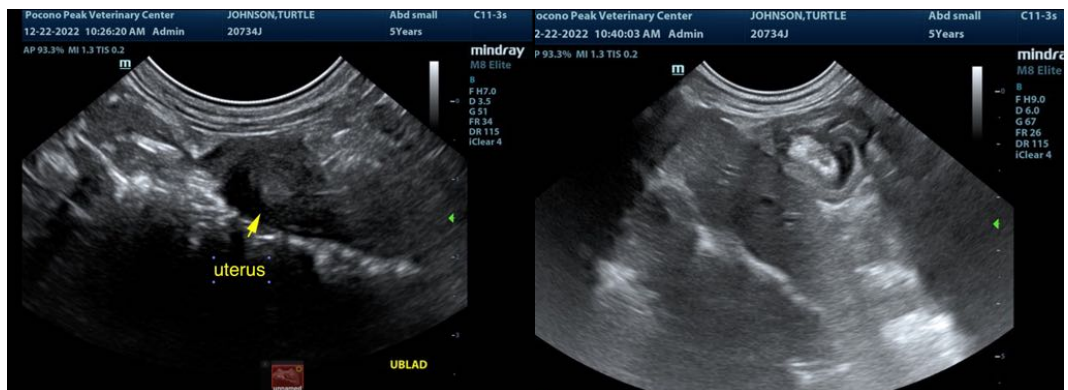
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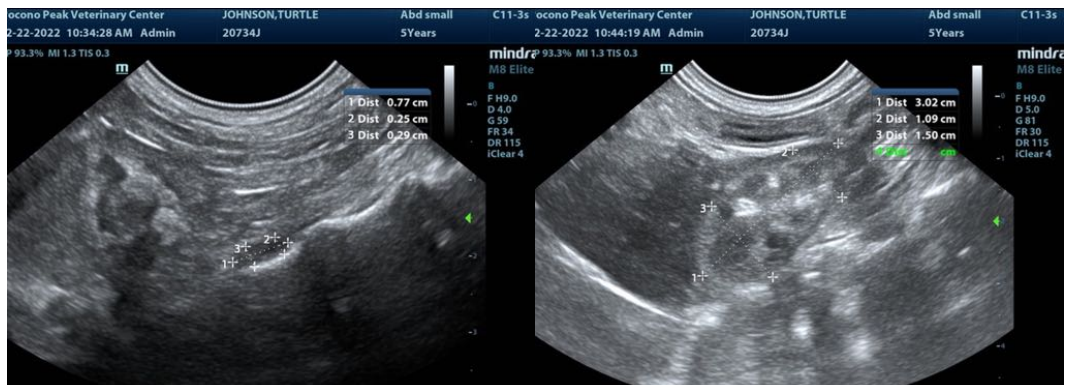
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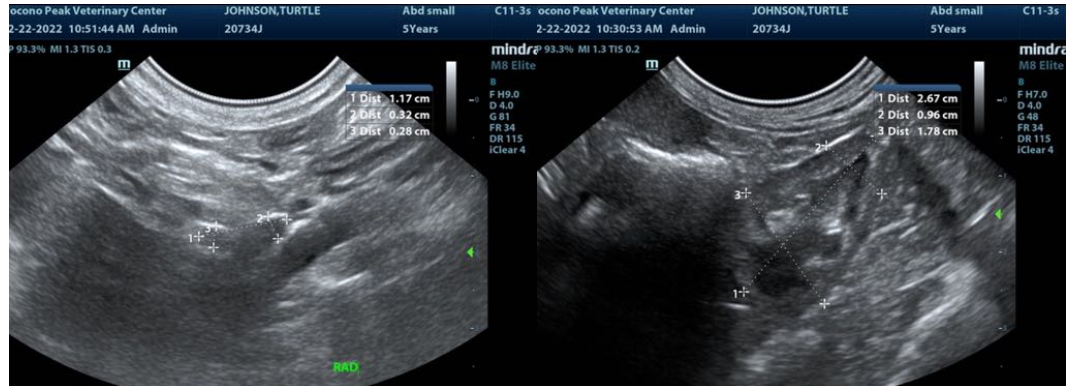
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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