



PATIENT

Kaya Andreson

SPECIES

Canine

BREED

Golden Doodle

SEX

Spayed Female

AGE

12 Years

WEIGHT

27.9 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Lupole

INVOICE

33237

DATE

12/3/21

PRESENTING CLINICAL SIGNS

Presented at our hospital for acute onset of seizures. O's daughter got home and saw p laying on the floor unresponsive. P has also urinated and defecated on herself. P has another seizure on the way here that lasted about 30 seconds. No history of toxin ingestion. Previous Health Concerns: urinary incontinence Current Medications: Proin 25 mg BID, galliprant SID and ostobenefit SID Appetite/When did they eat last: normal, last ate today

Abnormal PE/Chem/CBC/UA Results: Abdominal: caudal abdominal mass, non-reactive but dull/post-ictal Musculoskeletal: non-ambulatory, seizing upon arrival Radiographs: lateral thorax and abdomen: unremarkable chest, ST opacity caudal abdominal mass dorsal to urinary bladder, severe lumbar spondylosis, fat at sternum Chemistry: Glucose 129, ALT 216 Hm ALP 181 H CBC: PMN 15.05 H, Lymph 0.65 L, stress leukogram EPOC: pH 7.335 L, Sodium 157 H, Chloride 134 H, lactate 3.87 H T4: 0.69 L

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. Suspended debris noted, no evidence of masses or calculi. No evidence of inflammatory or neoplastic changes were 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 7.0 cm. The left kidney measured 6.28 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 0.5 cm. The right adrenal gland measured 0.8 cm at the cranial pole and 0.5 cm at the caudal pole.

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 were noted.

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.



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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.

Free Abdomen

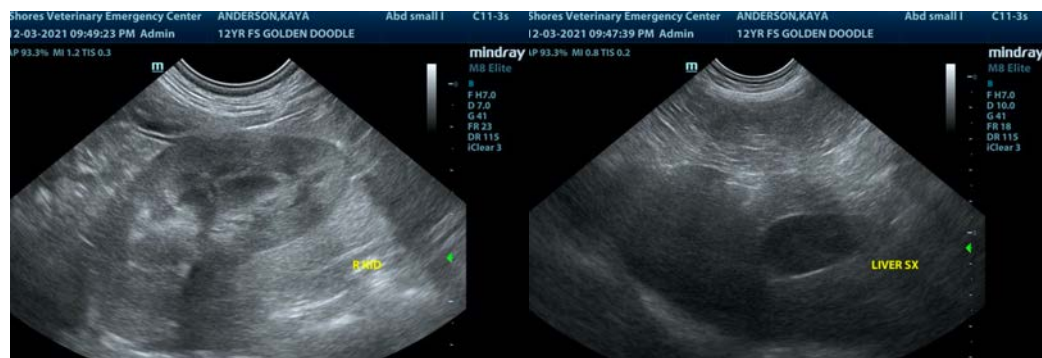
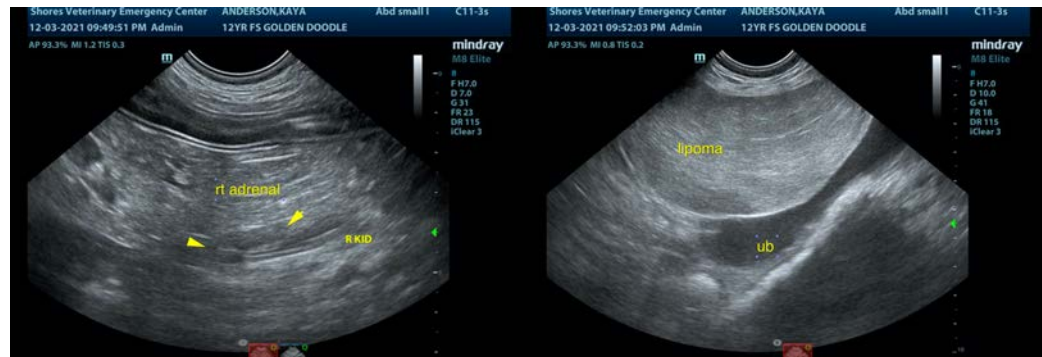
A caudal abdominal lipoma was noted, impinging upon the urinary bladder.

ULTRASONOGRAPHIC FINDINGS

- Caudal abdominal lipoma – appears to be extraabdominal
- Minor bladder debris

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant pathology.





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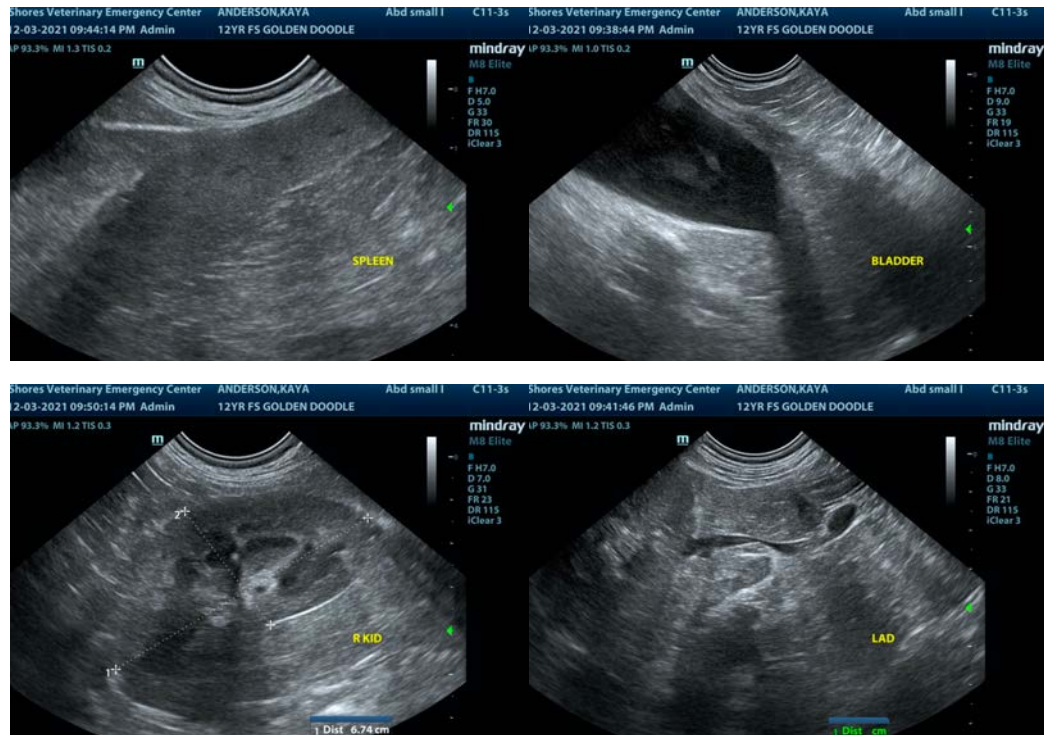
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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