

PATIENT

Dallas Staggs

SPECIES

Canine

BREED

Border Collie

SEX

Intact Female

AGE

15 Years

WEIGHT

48.1 Lbs.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

HOSPITAL NAME

Pleasant Hill AH

REFERRING VET

Dr. Seyler

INVOICE NUMBER

13264

DATE

12/31/21

PRESENTING CLINICAL SIGNS

History: right sided heart murmur abdomen that may have fluid accumulation weight gain, but owner feels spine is more prominent abdomen very broad with very soft, slight cranial distension. No palpable mass found grade 5/6 heart murmur, PMI on the right

Abnormal PE/Chem/CBC/UA Results: Globulins a bit low, not clinically concerning. Rest of the BW was equally not concerning. Protein and Bilirubin in urine that is Not active - Recommend we check for Microalbuminuria microalbuminuria test was normal

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolyloid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 6.54 cm.

Adrenal Glands

The **right 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 right adrenal gland measured 2.3 cm x 1.27 cm at the cranial pole and 0.65 cm at the caudal pole.

The **left adrenal gland** was swollen at the cranial pole, measuring 1.24 cm at the cranial pole and 0.53 cm at the caudal pole and 2.77 cm in length. A hyperechoic nodule was noted.

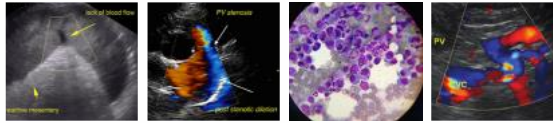
Spleen

The **spleen** was volume contracted, mildly heterogeneous and slightly irregular.

Liver

The **liver** was swollen and revealed passive congestion pattern with dilated hepatic veins. The vena cava measured 1.3 cm compared to 1.0 cm aorta. The gallbladder wall was mildly edematous.

Gastrointestinal



PATIENT 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.

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SPECIES *Pancreas*
 Canine The **pancreas** was unremarkable and uniform. No evident pathology.

BREED *Free Abdomen*
 Border Collie A large amount of free fluid was noted in the **abdomen** with echogenic debris. Enhanced omentum was noted throughout the mid abdomen.

SEX *Heart*
 Intact Female The **cardiac** presentation in this patient revealed mild pericardial effusion with volume overload of all 4 chambers. Hypocontractility noted. Severe left atrial enlargement noted. LA MAX measured 6.8 cm. A rapid view of the right auricle and pericardium did not reveal any neoplasia There is no tamponade effect either. The pericardial effusion was minor.

- AGE** 15 Years
- WEIGHT** 48.1 Lbs.
- ULTRASONOGRAPHIC FINDINGS**
- Passive congestion abdomen with ascites
 - Mild pericardial effusion and suspect left and right sided congestive heart failure
 - Swollen left adrenal gland
 - Age-related urinary bladder and renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY Eric Lindquist, DMV, DABVP, Cert. IVUSS

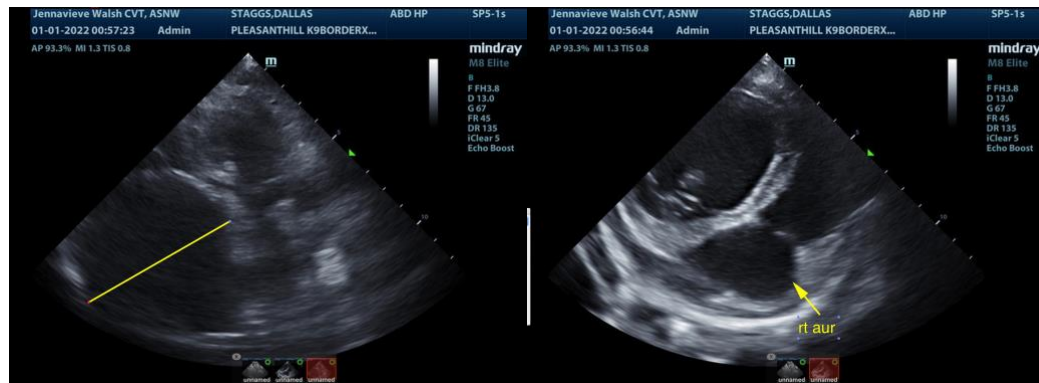
Full echocardiogram recommended. Lasix and Pimobendan may be utilized palliatively until full echocardiogram could be performed. Pericardial effusion may be owing to long standing heart failure, however, left atrial rupture is a possibility. The passive congestion is likely owing to right sided heart failure secondary to left sided failure, yet full echocardiogram recommended for definition.

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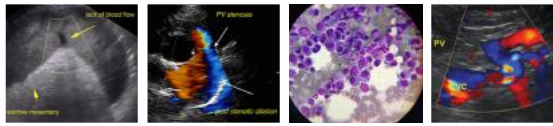


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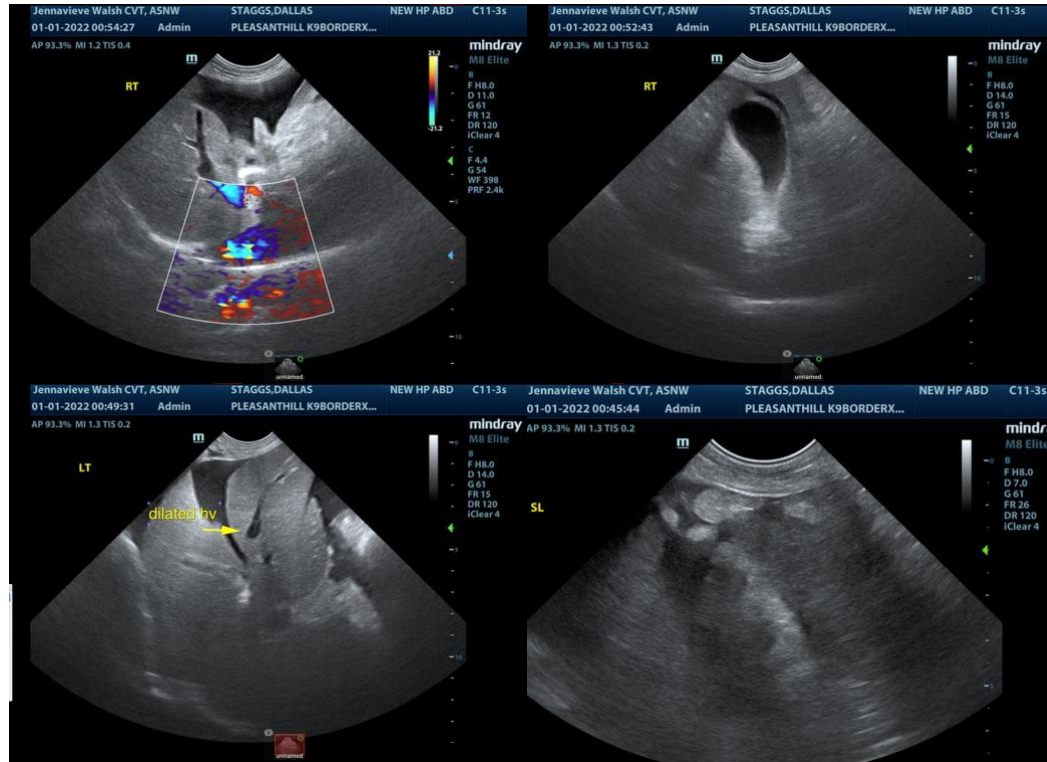
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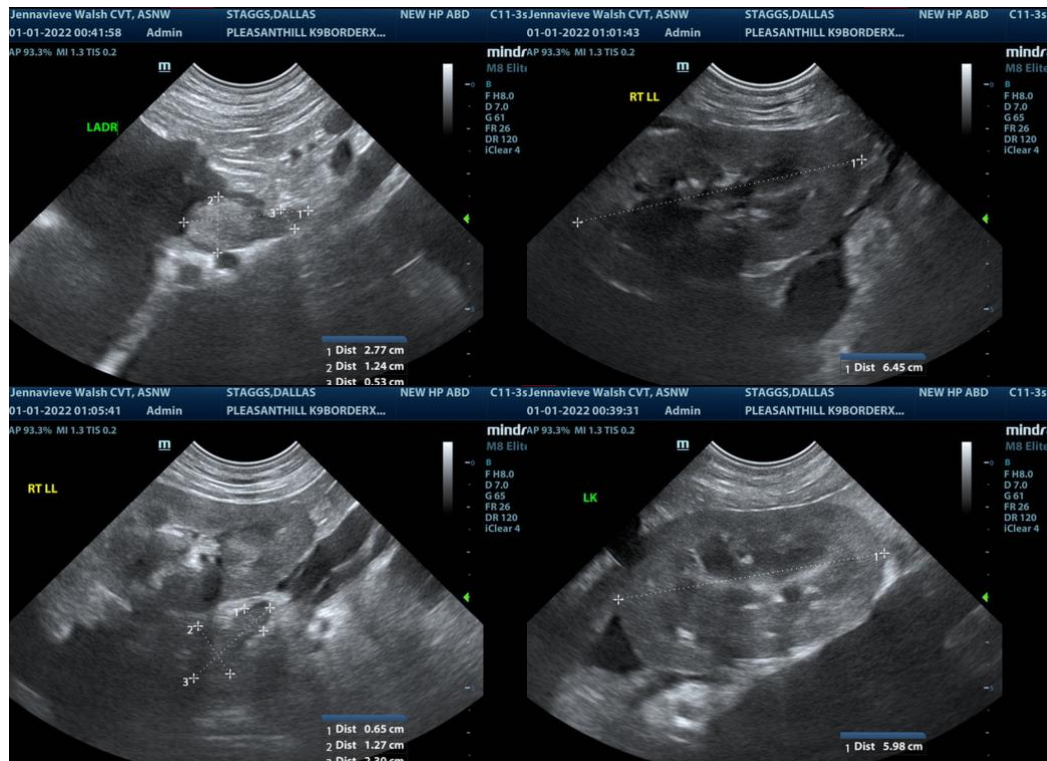
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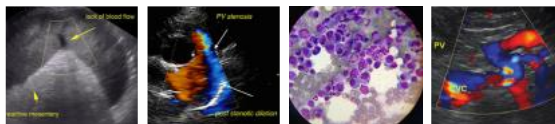
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Canine

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.

BREED

Border Collie

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

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