



PATIENT

Lizzie Donald

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

Spayed Female

AGE

6 Years

WEIGHT

10 Lbs.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Jill Rumachik

HOSPITAL NAME

Mazomani AH

REFERRING VET

CC Sheldon

INVOICE

12836

DATE

12/4/21

PRESENTING CLINICAL SIGNS

History: Recheck post 4 weeks of urinary dissolution diet

Abnormal PE/Chem/CBC/UA Results:

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

A trace amount of **urinary bladder** sand was persistently present in this patient; however, the bladder thickening has resolved. Minor apical bladder wall thickening noted yet likely a permanent degenerative change. No significant acoustic shadowing noted.

The **kidneys** revealed minor degenerative changes and slight mineralization (similar to the prior sonogram). Blood flow to the kidneys appeared to be adequate. The right kidney measured 4.4 cm. The left kidney measured 3.0 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

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** revealed a uniform minor vacuolar hepatopathy pattern. Minor gallbladder debris was noted.

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 non-shadowing bladder concretions/sand, significantly improved from the prior sonogram
- Minor renal mineralization, stable
- Liver, uniform vacuolar hepatopathy pattern

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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I recommended continuing the current dissolution therapy. Recheck in approximately 6-8 weeks after further management.

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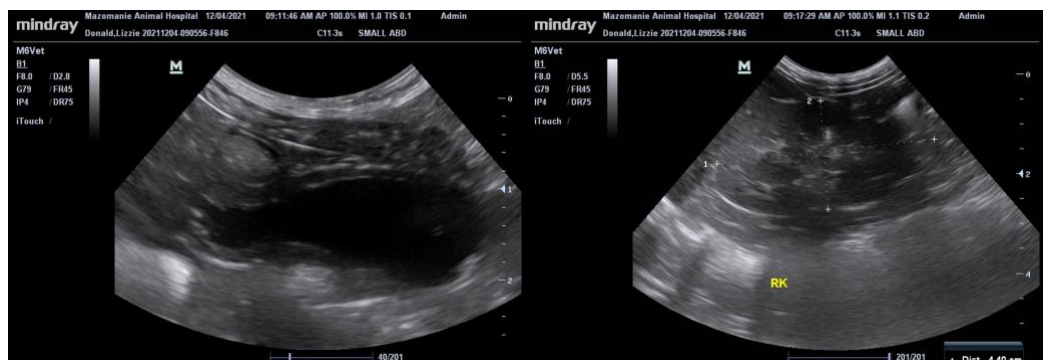
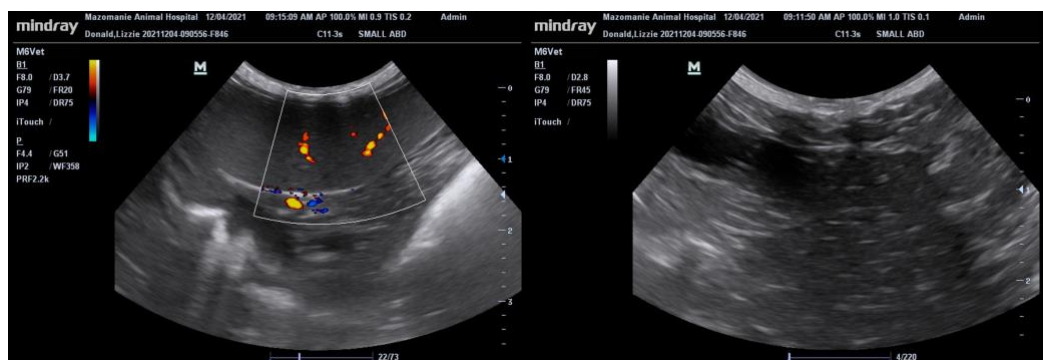
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The information and recommendations provided are based on the images presented by the



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referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com

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