



PATIENT

Albus Woodford

SPECIES

Canine

BREED

Maltese

SEX

Neutered male

AGE

9 ½ years

WEIGHT

2.95 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Trudeau

HOSPITAL NAME

Petworks VH

REFERRING VET

Dr. Trudeau

INVOICE

42842

DATE

12/5/22

PRESENTING CLINICAL SIGNS

History: Presented on Nov. 22/22 in Addisonian Crisis -Responded very well to hospitalization, IV fluids, Dexamethasone -Discharged on Nov. 24 on Florinef and Prednisone -some clinical signs returned Nov. 27 (decreased appetite, diarrhea) -Rechecked Nov. 29- electrolytes and Na/K ratio WNL -CBC newly abnormal: new regenerative anemia and leukocytosis (Hct 25%, down from 46% on Nov. 22) - discharged with sulcrate in case of GI bleed, reduction in prednisone from 0.5mg BID to 0.25mg SID and plan to

Abnormal PE/Chem/CBC/UA Results: Nov 22 - CBC - NSF Chem - low normal glucose; elevated urea, phos; Ca, K, low chloride Nov 29 CBC - HCT 25% (regenerative anemia); elevated neutrophils, lymphocytes, mono (after steroids were started) Chem - normal except for slight decrease Chloride; slightly elevated ALT CBC this morning - regenerative anemia with PCV 32% Electrolytes this morning WNL

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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 left kidney measured 3.2 cm. The right kidney measured 3.06 cm.

Adrenal Glands

The right **adrenal gland** was flattened and isoechoic measuring 0.25 cm at the caudal pole and 0.22 cm at the cranial pole. The left adrenal gland was subnormal in size and measured 0.26 cm at the cranial pole and 0.23 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 was 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



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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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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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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.

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ULTRASONOGRAPHIC FINDINGS

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Structurally unremarkable abdomen with subnormal adrenal size. Consistent with Addison's. Otherwise, age related abdominal changes.

INTERPRETED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no other evidence of significant pathology. Management for Addisonian crisis is indicated.

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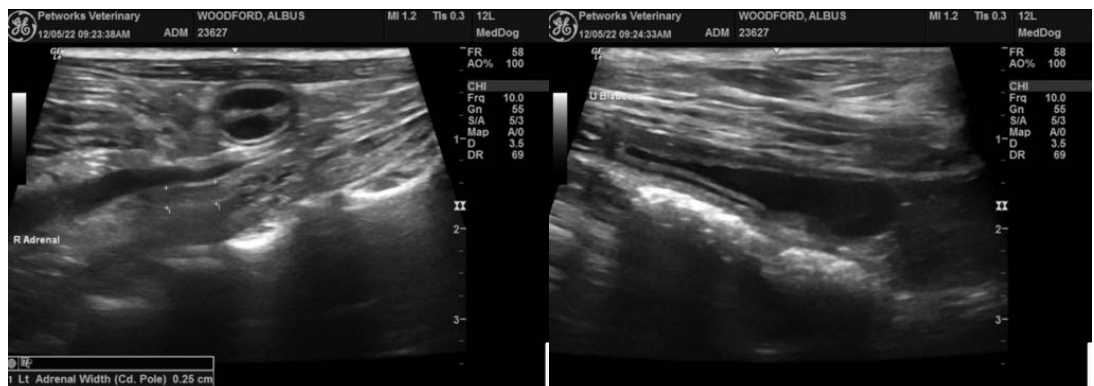
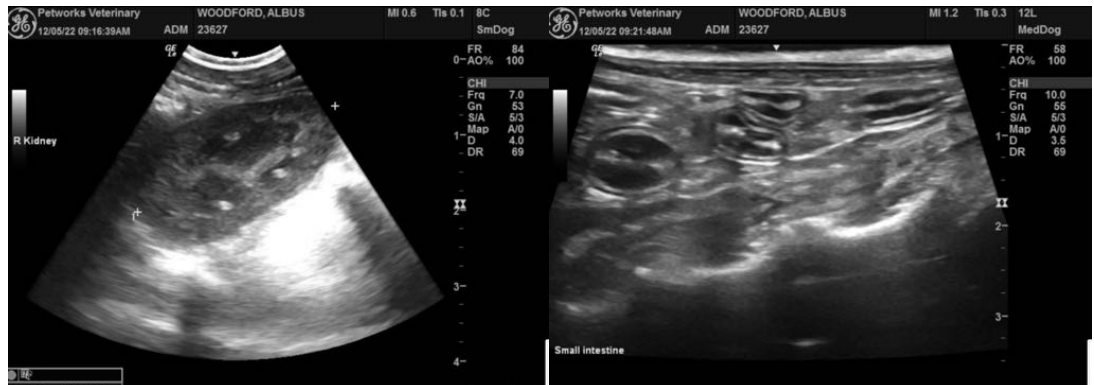
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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