



PATIENT

Leo Merino

SPECIES

Canine

BREED

Pitbull

SEX

Neutered Male

AGE

8 Years

WEIGHT

65 Lbs.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Rachel Wiley

HOSPITAL NAME

Petvacx AH

REFERRING VET

Dr. Rachel Wiley

INVOICE

12988

DATE

12/9/21

PRESENTING CLINICAL SIGNS

History: Survey ultrasound. Prostatitis 2 months ago, treated with enrofloxacin and neuter.

Abnormal PE/Chem/CBC/UA Results: Within Normal Limits

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 were noted. Ureteral papillae were normal.

The **prostate** was mildly hypoechoic and slightly swollen, measuring 2.5 cm. No significant edema lines or peripheral inflammation noted. Slight areas of mineralization were present.

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 left kidney measured 4.0 cm. The right kidney measured 5.0 cm.

Adrenal Glands

The **left adrenal gland** was not visualized.

The region of the **right adrenal gland** was imaged. There is no evidence of pathology.

Spleen

The **spleen** revealed a hypoechoic nodule in the mid cranial body, measuring 5.0 mm, appears to be an isolated lesion. FNA indicated.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. 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.

Gastrointestinal

The **stomach** was filled with partially shadowing material, measuring up to 2.0 cm. Other shadowing structures measured up to 1.5 cm present. The small intestine and colon were unremarkable.

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



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- Full stomach with some shadowing material- suspect foreign matter
- Mildly hypoechoic prostate
- Splenic nodule

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A combination of the clinical signs with the eating history warranted in this patient for evaluation. If the patient was not NPO, I recommend rescanning NPO status to assess for persistence of foreign matter. FNA of the splenic nodule and reassessment of the gastrointestinal presentation warranted. Ideally, FNA of the prostate could also be considered, likely resolved prostatitis, depending on whether the patient is painful upon rectal exam or not.

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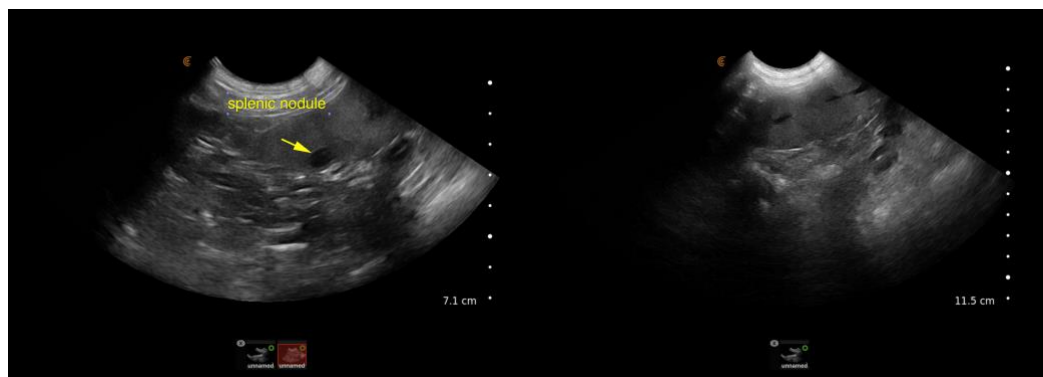
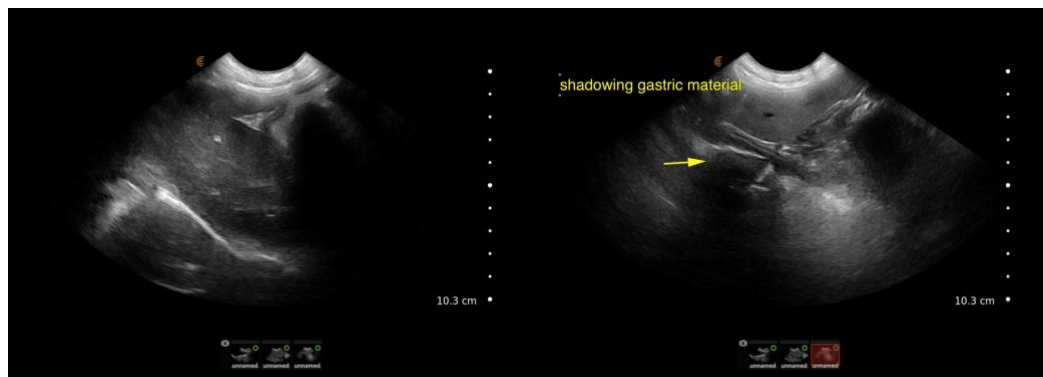
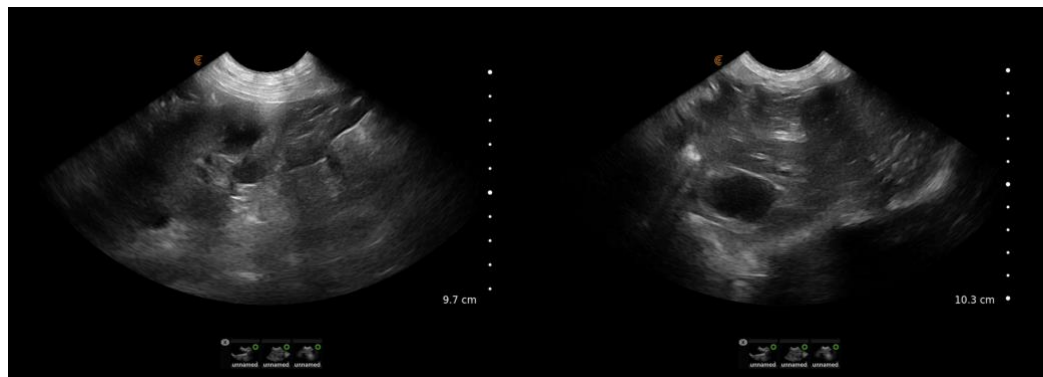
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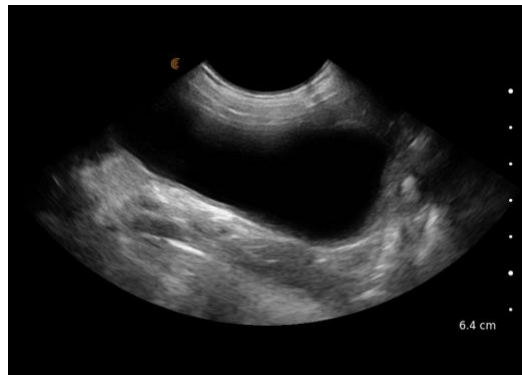
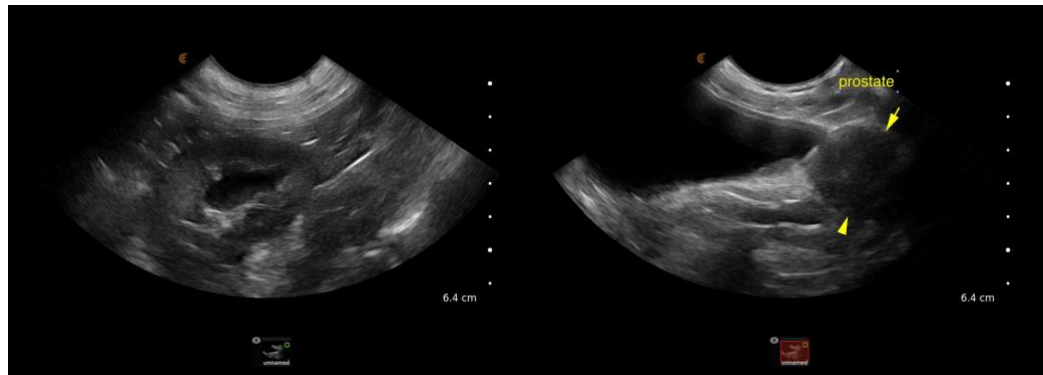
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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