



PATIENT

Sherman Long

SPECIES

Canine

BREED

Lab X

SEX

Neutered Male

AGE

12 Years

WEIGHT

59.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Hackettstown AH

REFERRING VET

Dr. Long

INVOICE

35577

DATE

2/10/22

PRESENTING CLINICAL SIGNS

Partial anorexia, decreased appetite, malaise, ascites, cardiomegaly (rads provided for supplemental review). No murmur auscultated, straw colored ascites (cyto pending). No current meds.

Abnormal PE/Chem/CBC/UA Results: monocyotosis, 1.31, SDMA 16, bun/creat wnl, ALT 214, GGT 17, Na/cl 25, Na 139, Cl 107, U/A pending

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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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 5.3 cm. The right kidney measured 6.07 cm. A large amount of echogenic ascites noted.

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.

Spleen

The **spleen** presented slight irregular contour and fairly uniform parenchyma. Subtle focal swelling noted measuring approximately 5.0 mm. A moderate amount of ascites was present.

Liver

The **liver** was uniform. A moderate amount of ascites noted with passive congestion hepatic pattern, owing to right-sided hear failure.

Gastrointestinal

The **gastrointestinal tract** was unremarkable, enveloped by the echogenic omentum.

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

Large amount of echogenic ascites noted throughout the abdomen. Enhanced mesentery noted throughout the abdomen.



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ULTRASONOGRAPHIC FINDINGS

- Echogenic abdominal ascites with passive congestion liver pattern
- Slight irregular spleen

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend focusing on the cardiac presentation.

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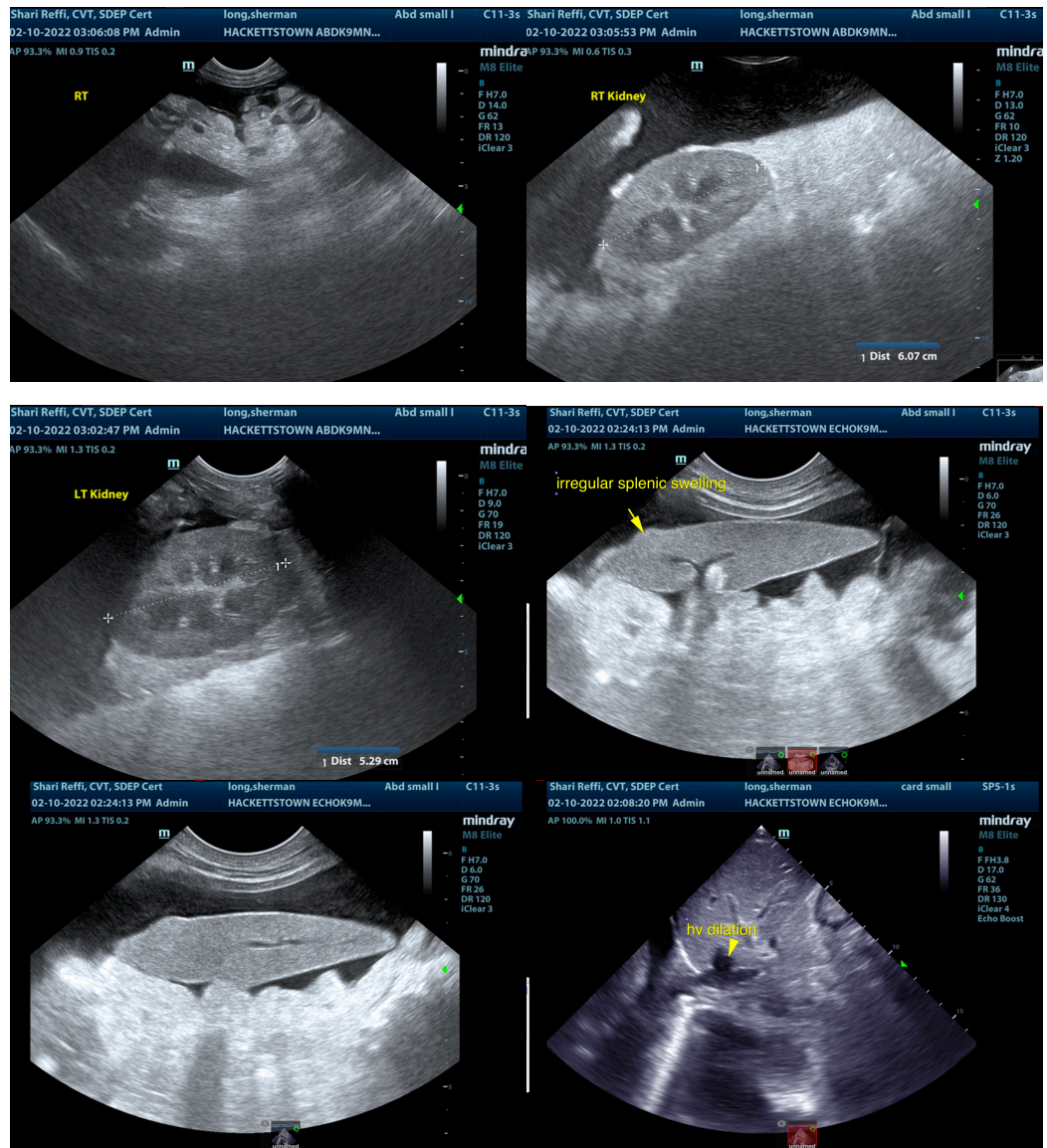
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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

info@SonoPath.com

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