



PATIENT

Jack Rodriguez

SPECIES

Canine

BREED

Beagle

SEX

Netuered male

AGE

8 years

WEIGHT

35 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Petrone

HOSPITAL NAME

Long Branch AH

REFERRING VET

Dr. Petrone

INVOICE

42829

DATE

2/15/23

PRESENTING CLINICAL SIGNS

History: 8yo MN Beagle icteric on presentation. Lethargic, dehydrated, anorexic. Up to date with vaccines including lepto. No history of toxin exposure. Total bilirubin 25, ALP: 1485

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 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. The capsules were acceptably uniform without significant irregularities. The right kidney measured 5.4 cm. The left kidney measured 5.48 cm with trace pyelectasia.

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. The left adrenal gland measured 0.58 cm.

Spleen

The **spleen** was mildly enlarged with subtle, granular appearance and scalloping contour.

Liver

The **liver** revealed mild uniform enlargement with mildly increased portal markings. The gallbladder revealed a minor amount of debris and echogenic wall, yet not overtly pathological.

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.



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Pancreas

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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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Non-specific cholangitis liver pattern.

Acute on chronic insult is suspected.

Enlarged spleen with scalloping contour.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis or similar should be considered. Hepatic and splenic FNA to assess for emerging round cell neoplasia versus splenitis and cholangitis. Leptospirosis titers are also warranted if endemic in your region. Prognosis is good to guarded depending on cytology results.

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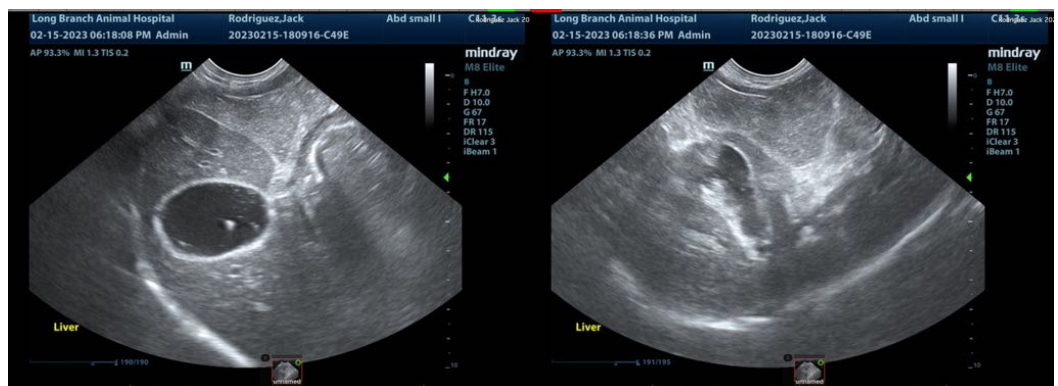
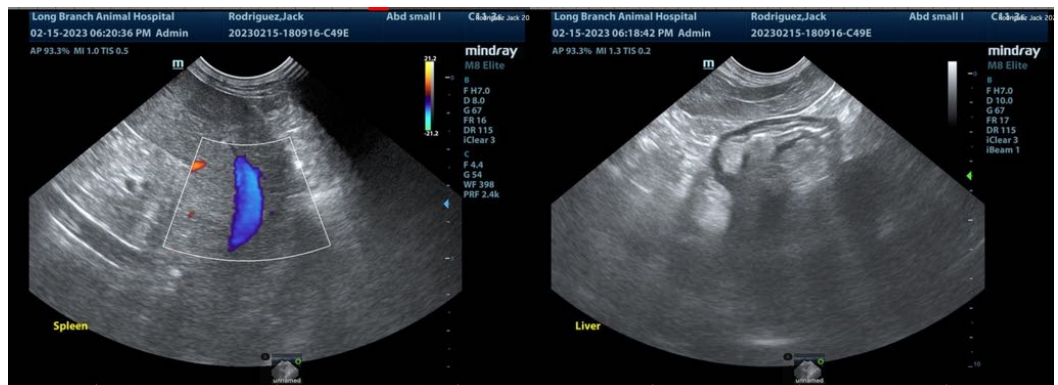
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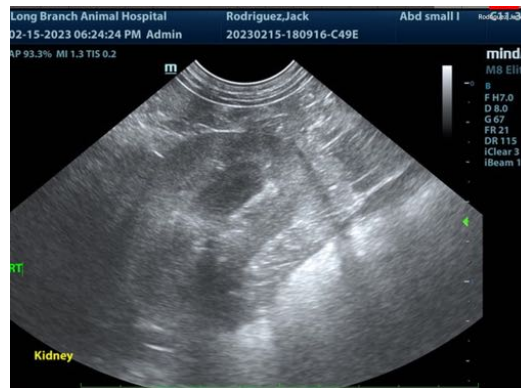
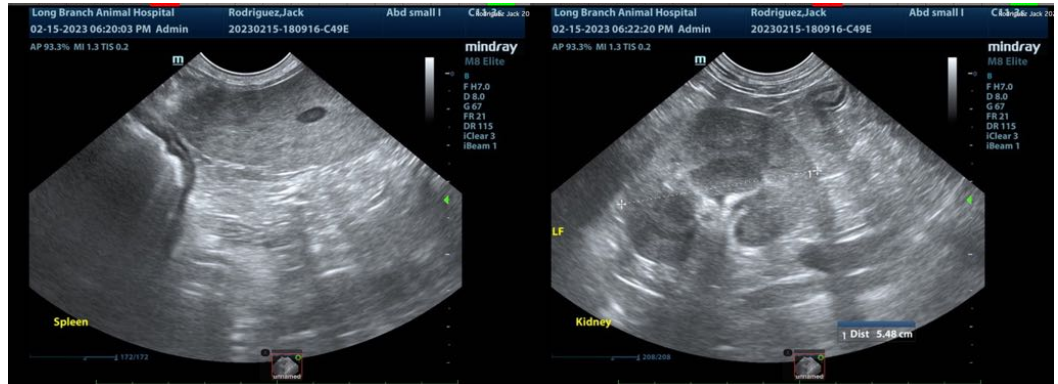
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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