

PATIENT

Marley Mendez

PRESENTING CLINICAL SIGNS

History: Patient presents icterus, low platelets, vomiting, and Lyme (+). Current meds: Doxycycline and Rimadyl.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: SGOT 503, SAP 1627, T. Bili 2.7, BUN 43, SDMA 24.5, PSL 275, CPK 1637, Alb. 2.2, T.P. 5.6, WBC 22,700, platelets 53, HCT 44%.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Great Dane Mix

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 2.0 cm beyond the cystourethral junction.

SEX

Spayed Female

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.

AGE

6 Years

Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 8.08 cm. The left kidney measured 8.84 cm.

Adrenal Glands

WEIGHT

93 Pounds

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins were noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 2.69 cm x 0.92 cm at the caudal pole and 1.29 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

IMAGING PERFORMED BY

Kelly Vazquez

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. Caudal folding was noted, owing to the gastric material.

HOSPITAL NAME

North Haledon VC

Liver

REFERRING VET

Dr. Mansfield

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.

INVOICE

21131

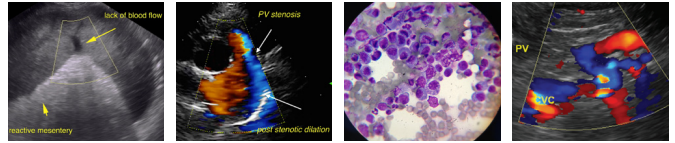
Gastrointestinal

DATE

2/16/23

The **stomach** was overdistended with fluid and echogenic linear material in the pyloric outflow, plastic or similar material is suspected. Reactive mesentery was noted around the stomach extending into the pancreas. Variable intestinal thickening was noted with loss of mural detail.

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.

SPECIES

Canine

Free Abdomen

The iliac **lymph nodes** were mildly enlarged (reactive), measuring 2.38 cm x 1.23 cm. The cranial abdominal lymph nodes were enlarged as well, associated with the small intestine.

BREED

Great Dane Mix

ULTRASONOGRAPHIC FINDINGS

- Gastric foreign matter with variable intestinal thickening
- Variable lymphadenopathy
- Reactive mesentery
- Bilateral adrenal hypertrophy

SEX

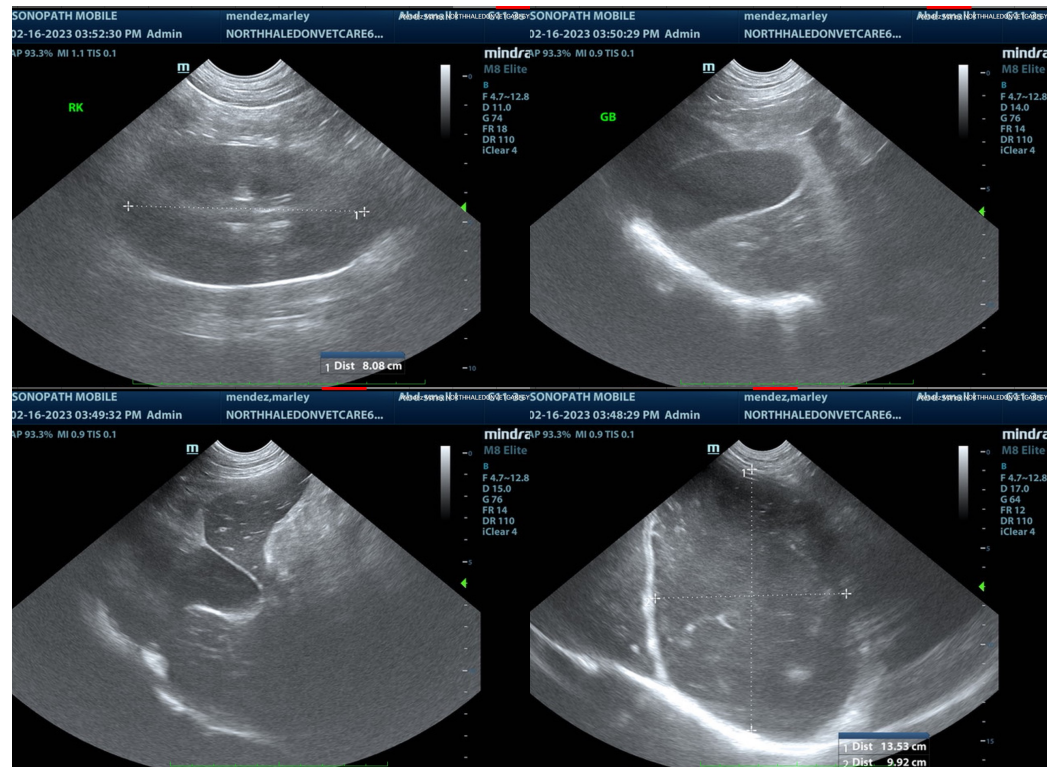
Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is foreign matter in the pyloric outflow, however, I'm concerned about intestinal and lymph node pathology as a potential underlying round cell neoplasia/lymphoma. Prognosis is extremely guarded. Exploratory surgery with lymph node and intestinal inspection and biopsies and evacuation of the stomach, as well as liver biopsy are all indicated. Given the liver value elevations, underlying occult lymphoma is a potential, even though structurally the liver is fairly normal.

WEIGHT

93 Pounds



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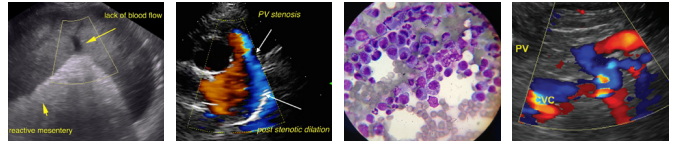
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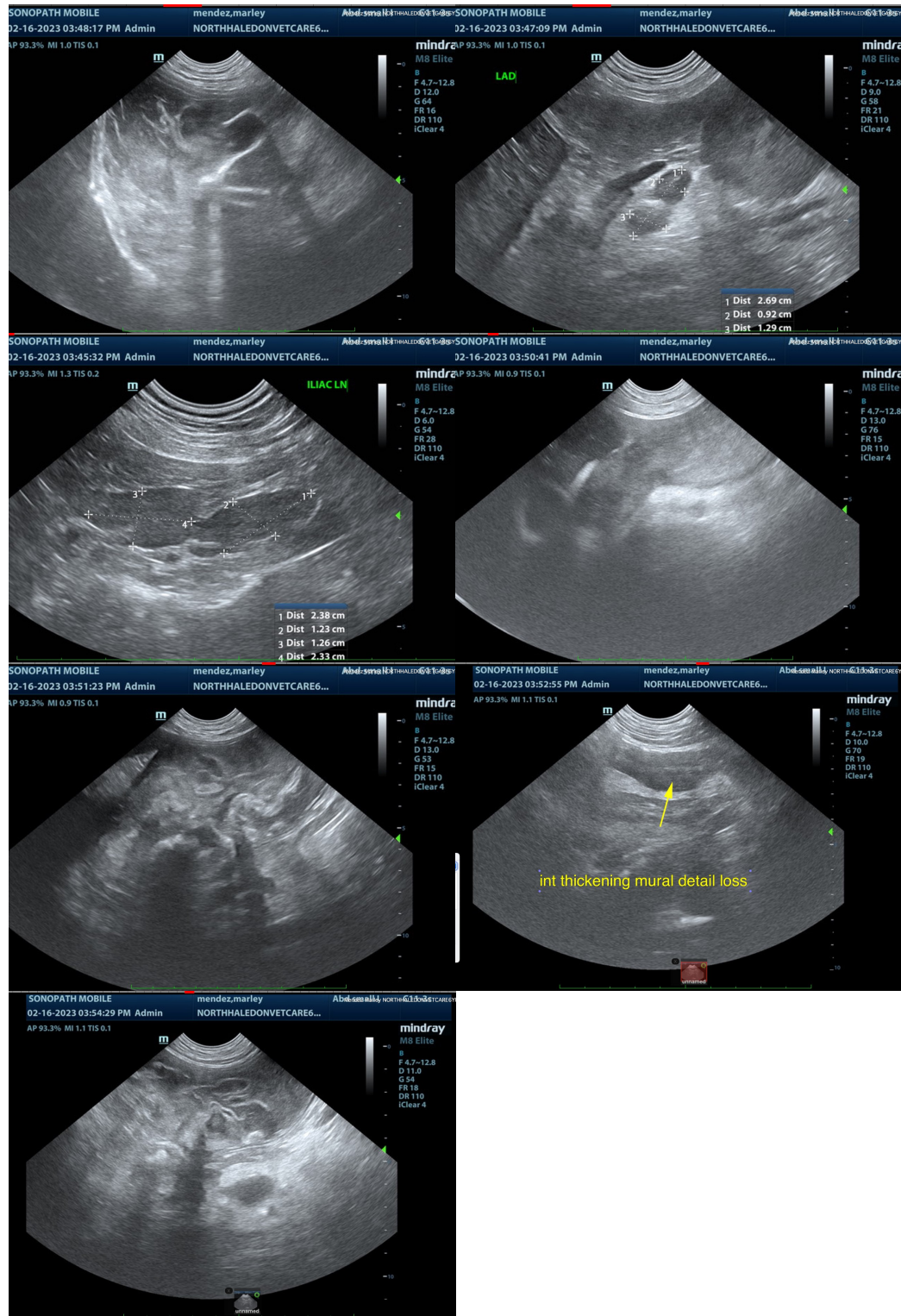
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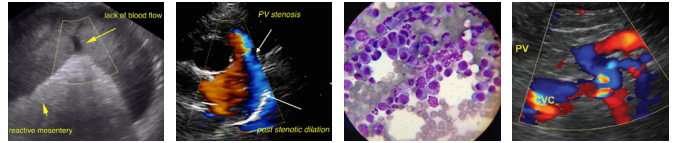
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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.

SPECIES

Canine

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

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