



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Hailey Ball
SPECIES Canine
BREED Australian Shepherd Mix
SEX Spayed female
AGE 17 years
WEIGHT 22.5 kg

PRESENTING CLINICAL SIGNS
History: Hailey presented on 1/31/23 for a possible seizure/syncopal episodes. O notes when she is excited she will stop and become rigid with drooling and heavy panting.
Abnormal PE/Chem/CBC/UA Results: On PE today Hailey was noted to have slightly muddy gums. Under sedation she had a left sided 2/6 systolic heart murmur. All other PE findings were unremarkable. Chest radiographs taken today suggestive of mild pleural effusion.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction and appeared normal. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra 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. Cortical cysts were noted throughout the kidneys. The right kidney measured 7.0 cm. The left kidney measured 7.0 cm.

Adrenal Glands

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was 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 1.68 x 0.55 cm at the caudal pole and 0.52 cm at the cranial pole. The right adrenal gland measured 3.17 x 1.37 cm at the cranial pole and 0.58 cm at the caudal pole.

Spleen

The **spleen** revealed multi-focal, hypoechoic target nodules with some distortion of architecture.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. The hepatic veins were dilated. This is consistent with passive congestion owing to thoracic disease. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gaynor

HOSPITAL NAME

Lambertville VC

REFERRING VET

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INVOICE

42526

DATE

2/2/23



PATIENT

hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. Pleural effusion was noted through the diaphragm.

Hailey Ball

SPECIES

Gastrointestinal

Canine

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.

BREED

Australian Shepherd
Mix

Pancreas

SEX

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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.

AGE

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Free Abdomen

Slight areas of free fluid were noted in the abdomen.

WEIGHT

22.5 kg

Thorax

Areas of lung consolidation were noted.

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ULTRASONOGRAPHIC FINDINGS

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Nodular splenic changes with passive congestion liver.

Bilateral adrenal hypertrophy, possible normal variant.

Ascites likely owing to passive congestion and pleural effusion.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Intercostal ultrasound as well as chest radiographs and echocardiogram are recommended. There is a strong concern for dual cavity neoplasia. FNA of the splenic nodules, abdominocentesis and cytospin are warranted. CNS examination with brain CT would be ideal in this patient. The prognosis is very guarded.

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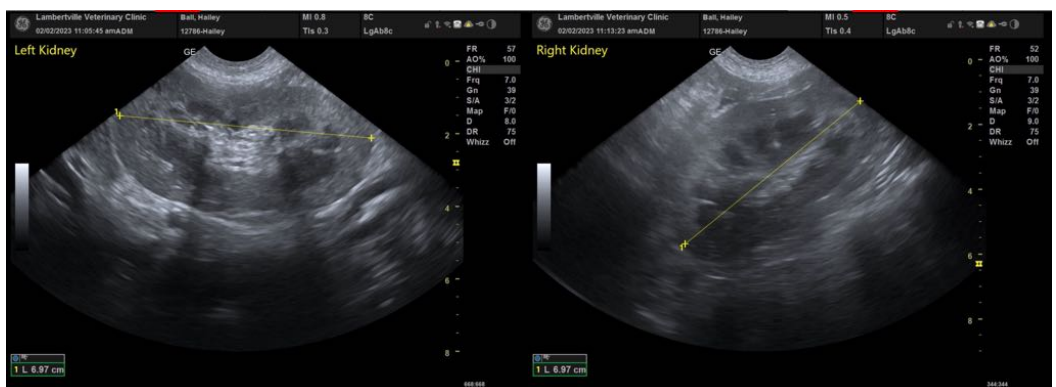
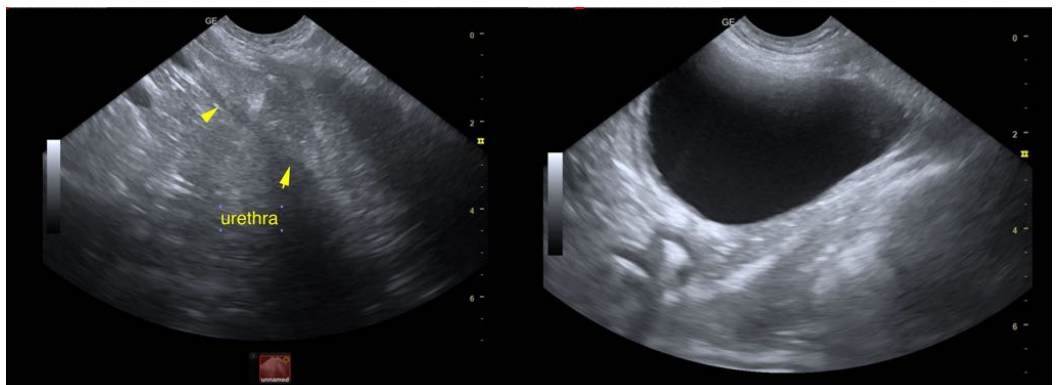
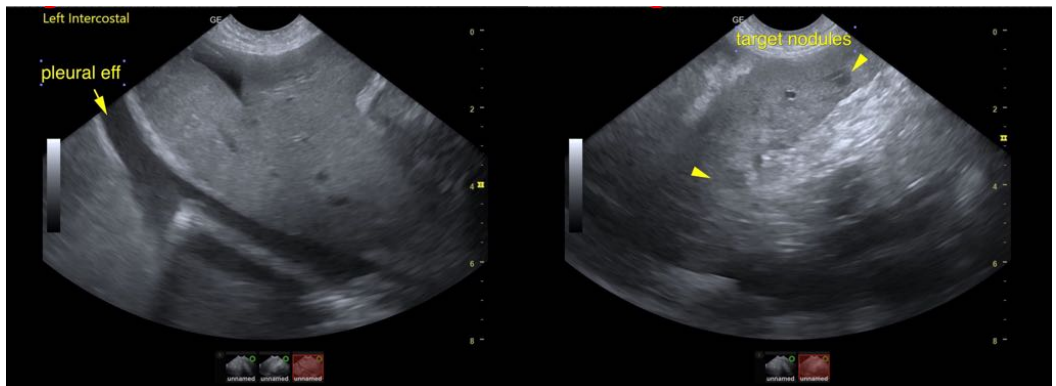
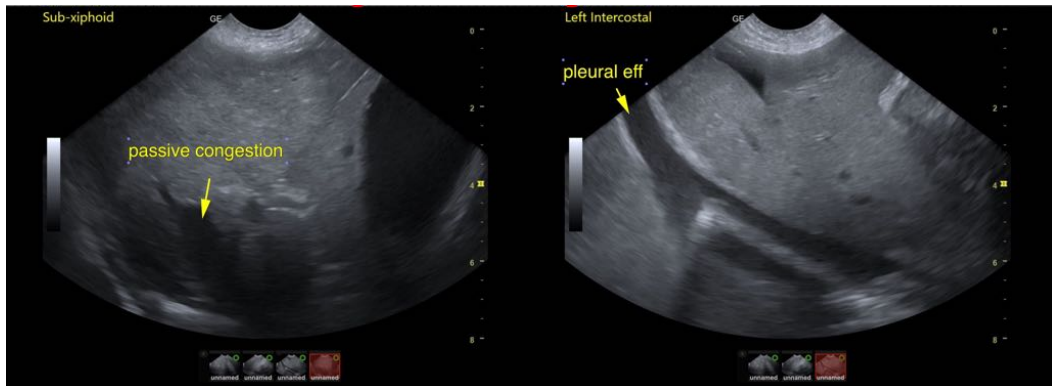
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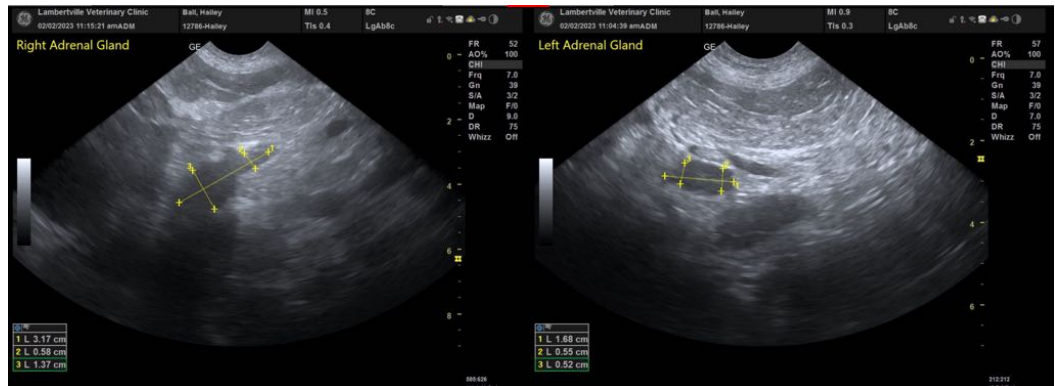
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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