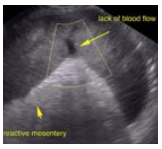
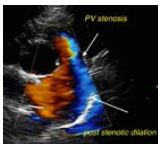
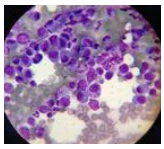
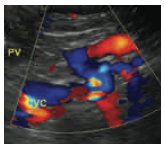




SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bernie Yockey

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

6 years

WEIGHT

88.2 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Carissa Rhoades

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Dr. Anderson

INVOICE

96201

DATE

2/21/22

PRESENTING CLINICAL SIGNS

Came to the clinic on Friday 2-18-2022 because we were pooping blood then we did blood work and we saw that he was IMHA. and we also thought Suspected intestinal mass, cancer causing IMHA? Abnormal PE/Chem/CBC/UA Results: PE: PALE SCLERA, PALE/MUDDY GUMS, MILD MEDIAL BUTTRESS LEFT STIFLE, NO PAIN ON ABDOMINAL PALPATION. Severe regenerative anemia Leukocytosis CBC: RBC 2.01 M/uL Hematocrit 36.6% Hemoglobin 4.6 g/dL Reticulocytes 152.4 KuL Neutrophils 13.08 K/uL Platelets83 K/uL CHEM: Calcium 7.6 mg/dL Total Protein 4.1 g/dL Albumin1.9 g/dL Globulin 2.2 g/dL Cholesterol 93 mg/dL

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 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Cortical infarct was noted in the dorsal cortex of the right kidney. The right kidney measured 8.33 cm. The left kidney measured 7.0 cm.

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 3.16 x 0.67 cm at the cranial pole and 0.68 cm at the caudal pole. The right adrenal gland measured 2.21 x 0.86 cm at the cranial pole and 0.73 cm at the caudal pole.

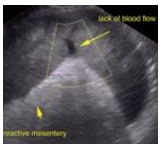
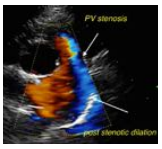
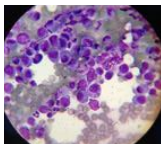
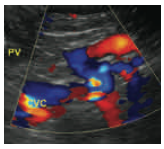
Spleen

The **spleen** revealed multi-focal, hypoechoic parenchymal changes were noted. There was no evidence of masses. However, microinfarcts, hyperplasia and round cell neoplasia are all possible.

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bernie Yockey

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

6 years

WEIGHT

88.2 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Carissa Rhoades

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Dr. Anderson

INVOICE

96201

DATE

2/21/22

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. Retention of ingesta was noted in the stomach as well as anechoic fluid. 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.

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.

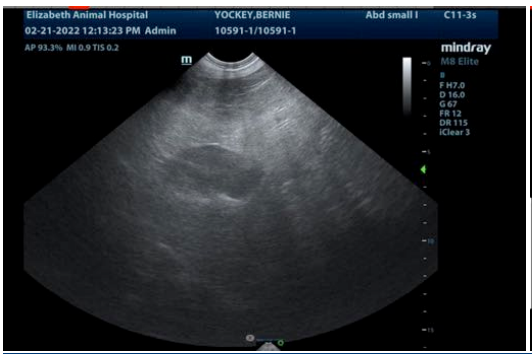
ULTRASONOGRAPHIC FINDINGS

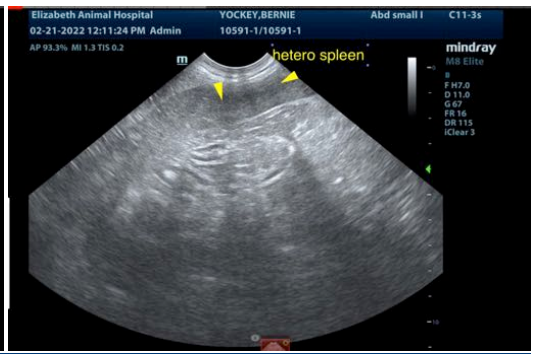
Unremarkable abdomen with right renal infarct and heterogenous spleen.

Benign hepatopathy.

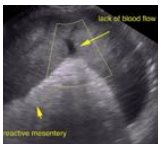
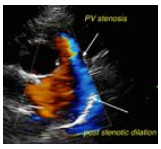
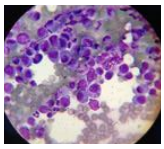
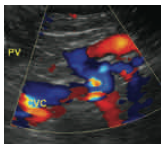
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of hemorrhage. FNA of the spleen is warranted after coagulation panel. The cause of albumin loss is unclear unless proteinuria is present. If proteinuria is not an issue then protein losing enteropathy may be an issue. However, structurally the GI tract appears normal. Coagulation panel and FNA of the spleen is warranted as a screening evaluation for underlying neoplasia as well as CBC path review if not already performed and bone marrow aspirate.





SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bernie Yockey

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

6 years

WEIGHT

88.2 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Carissa Rhoades

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Dr. Anderson

INVOICE

96201

DATE

2/21/22

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