



PATIENT	PRESENTING CLINICAL SIGNS
Chandler Hagerman	History: Vomiting after 5pm meal-food, Hx of intestinal spindle cell sarcoma removed 7/2019 Last AUS 8/2020. Current meds: Cobalequin, Gabapentin 600mg bid PRN (anxiety), Pepcid 20mg sid Abnormal PE/Chem/CBC/UA Results: USG 1.025 1/19/2022
SPECIES	
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Mix	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.
SEX	The residual prostate was uniform and measured 0.86 cm.
Neutered male	The iliac trifurcation was unremarkable.
AGE	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. Hyperechoic medullary rim sign was noted and measured 6.3 cm. The right kidney measured 7.06 cm.
13 ½ years	
WEIGHT	
84.9 lbs	
INTERPRETED BY	Adrenal Glands
Eric Lindquist, DMV DABVP, Cert. IVUSS	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 right adrenal gland measured 2.86 x 1.08 cm at the cranial pole and 0.76 cm at the caudal pole. The left adrenal gland measured 2.09 x 0.46 cm at the cranial pole and 0.67 cm at the caudal pole.
IMAGING PERFORMED BY	Spleen
Shari Reffi, CVT	The spleen was slightly heterogenous with no overt masses noted. However, slight scalloping contour was noted. If any weight loss is present then FNA is indicated. The spleen measured 2.0 cm in maximum width. There were no overt masses. Subtle micronodular changes were noted.
HOSPITAL NAME	Liver
American AH	The liver images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Occasional, non-disruptive hypoechoic nodular change was present. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.
REFERRING VET	
Dr. Stockmal	
INVOICE	
96764	
DATE	
3/10/22	



PATIENT

Gastrointestinal

Chandler Hagerman

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.

SPECIES

Canine

BREED

Mix

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.

SEX

Neutered male

Heart

Rapid view of the heart revealed no evidence of pathology.

AGE

13 ½ years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

84.9 lbs

Heterogenous spleen.

Slight, irregular contour.

Otherwise, geriatric abdomen.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no overt evidence of metastatic disease. However, if the splenic presentation is a new development compared to prior sonograms then FNA is indicated or if weight loss is an issue.

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

American AH

REFERRING VET

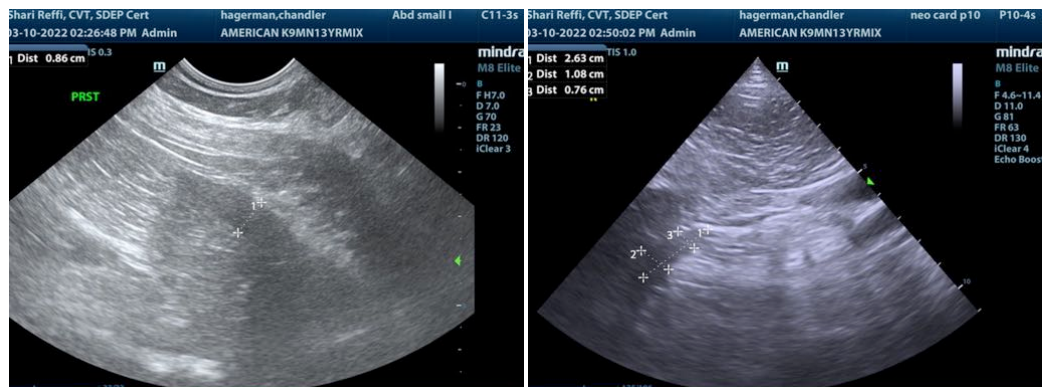
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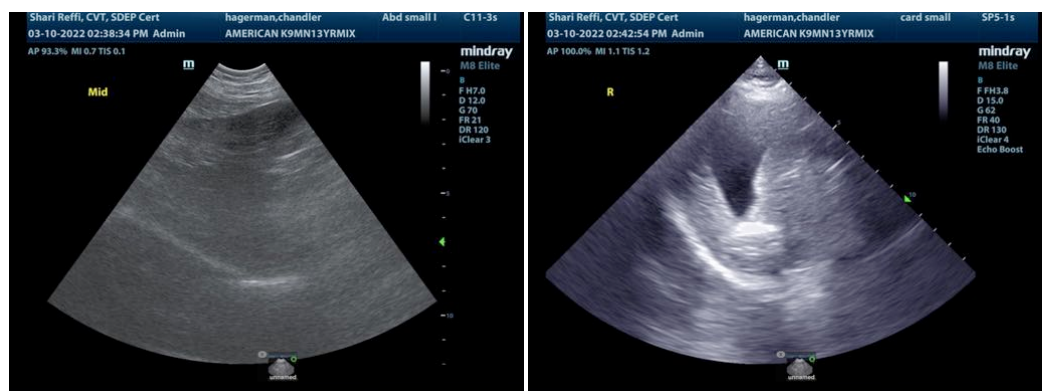
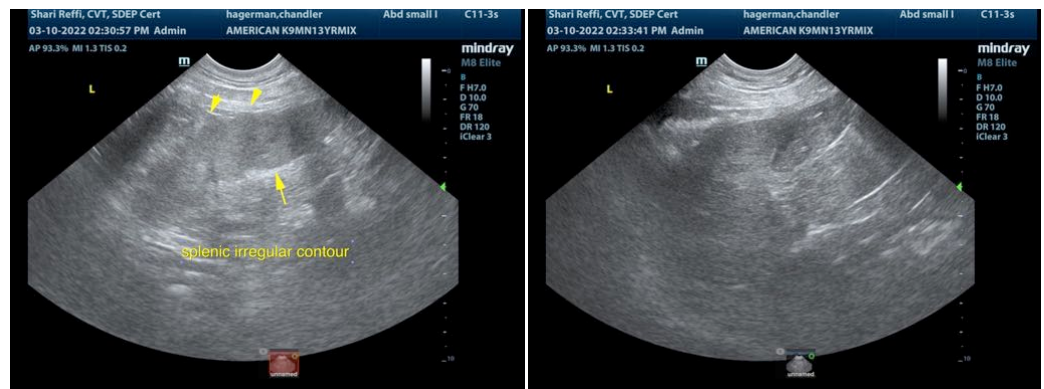
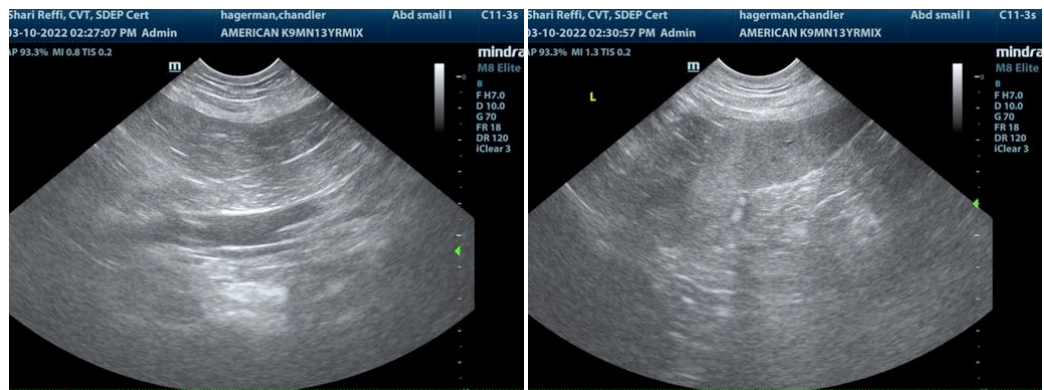
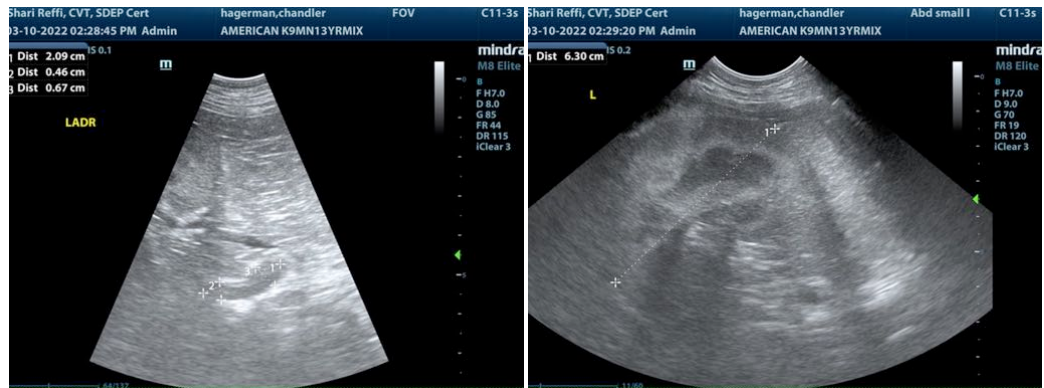
Dr. Stockmal

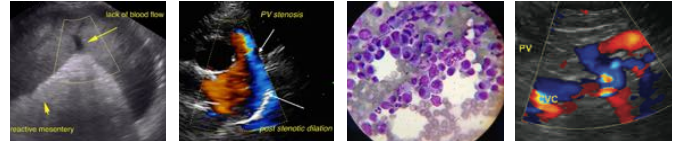
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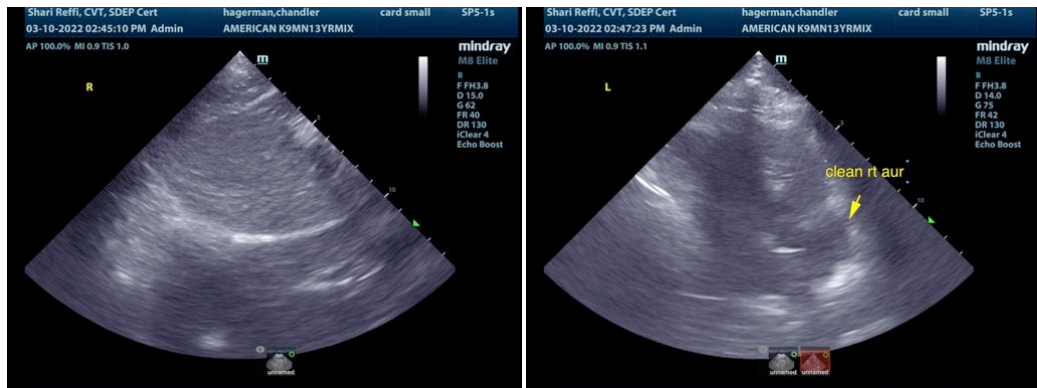
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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