



**PATIENT**

Spike Narula

**SPECIES**

Canine

**BREED**

Mixed GS

**SEX**

Neutered Male

**AGE**

4 Years

**WEIGHT**

36.5

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Doctor Valentina

**HOSPITAL NAME**

The Veterinary Surgery

**REFERRING VET**

Valentina Fresta

**INVOICE**

21642

**DATE**

3/15/23

**PRESENTING CLINICAL SIGNS**

Presented for recurrent otitis on the left ear resistant to the local ears drops. Otherwise, being happy in himself. Has lost few kgs since the last few months. Spike in the past year showed an ulcer on the left nostril that was treated successfully with steroids and antibiotics. Ana test was negative. The patient is BAR .Still overweight .The left ear reveal oedematous ear canal and purulent discharge is obvious. The right ear is fine.HR 130 RR 32 . Heart and lung sound clear. The rest of the examination is unremarkable.

Abnormal PE/Chem/CBC/UA Results: The CBC reveals normal parameters. The comprehensive reveals higher ALP. T4 is in the normal range. We took a ear swab for a culture.

**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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 5.6 cm. The left kidney measured 5.9 cm. Blood flow to the kidneys appeared to be adequate.

**Adrenal Glands**

The **left adrenal gland** was subjectively flattened, measuring 0.4 cm at the caudal pole and 0.48 cm at the cranial pole.

The region of the **right adrenal gland** was imaged and revealed no evident pathology.

**Spleen**

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 of the spleen was noted.

**Liver**

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.

**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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

**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**

- Structurally unremarkable abdomen
- Subjectively flattened left adrenal gland

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Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of pathology.

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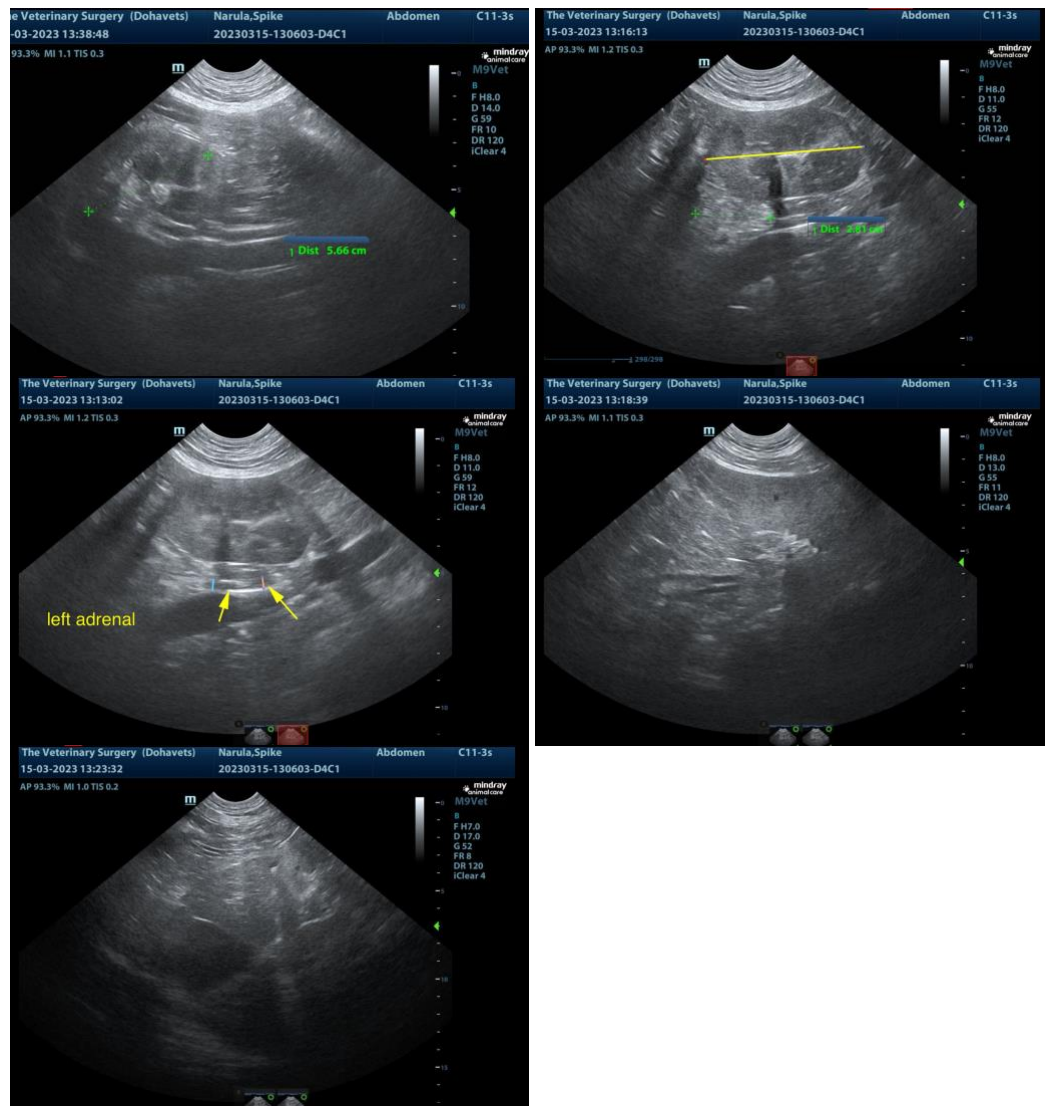
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Canine

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

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