



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Peaches Blanchard	History: progressive history of increased alkp (years). Tried denamarin with no help previously. presented for lower urinary signs 1 month ago - UTI, bladder stones, treated with abx based on culture - UTI resolved, stones resolved. ON labwork at that time further increase in alkp. Also persistent proteinuria. Once UTI treated patient clinical signs resolved at home, no clinical signs currently. Medications - clavamox, gabapentin (MPL, djd)
<b>SPECIES</b>	
Canine	
<b>BREED</b>	
Terrier Mix	Abnormal PE/Chem/CBC/UA Results: 2/25/22 - alkp1101, cholesterol 589, trig 3025, T4 <0.5, UA: 1.036, pyuria, bacteria, ph 8.5, UPC 6.4. during collection of urine visualized stones with ultrasound. urine culture - proteus. treated with clavamox. Recheck UA 3 weeks post abx UA 1.053, 6.0, clear sediment, 3+p, UPC 3.5.
<b>SEX</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Spayed Female	<b>Urinary System</b>
<b>AGE</b>	The <b>bladder</b> in this patient was mildly thickened with slight echogenic mural changes. 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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. This is a minor change.
4.5 Years	
<b>WEIGHT</b>	
34.7 Pounds	The <b>kidneys</b> 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 left kidney measured 5.0 cm. The right kidney measured 5.0 cm.
<b>INTERPRETED BY</b>	<b>Adrenal Glands</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>left adrenal gland</b> was 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 0.65 cm.
<b>IMAGING PERFORMED BY</b>	
Nicole Arms, VMD	The <b>right adrenal gland</b> was slightly heterogeneous, measuring approximately 1.0 cm at maximum width.
<b>HOSPITAL NAME</b>	<b>Spleen</b>
Gilbertsville VH	The <b>spleen</b> 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.
<b>REFERRING VET</b>	<b>Liver</b>
Nicole Arms, VMD	Exam of the cranial abdomen demonstrated excessive <b>liver</b> size, swollen contour, with conserved uniform architecture. Parenchymal echogenicity was diffusely isoechoic to the spleen and falciform fat.
<b>INVOICE</b>	
14370	
<b>DATE</b>	
3/18/22	



## PATIENT

Peaches Blanchard

## SPECIES

Canine

## BREED

Terrier Mix

## SEX

Spayed Female

## AGE

4.5 Years

## WEIGHT

34.7 Pounds

Minor excessive GB debris was noted with the presence gall bladder dilation and precipitate without the overt formation of mucocele but this may be an issue in the future. This type of liver presentation typically is associated with slow and gradual SAP elevations with low-grade ALT rise. USG-FNA sampling is encouraged if more aggressive LE profiles are present such as ALT > 200 or rapid rise in SAP. These presentations are usually reactive hepatopathies owing to other disease processes either endocrine (Diabetes, Hypothyroidism, Cushing's disease), "antigen surveillance" from the gut/pancreas, or idiopathic breed predisposed progressions. This is a mild change.

## ***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 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 right **pancreatic** limb was hypoechoic and irregular with regional inflammation.

## **ULTRASONOGRAPHIC FINDINGS**

- Right limb pancreatitis
- Vacuolar hepatopathy
- Slightly heterogeneous right adrenal gland
- Age-related urinary bladder changes

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Treatment for pancreatitis warranted in this patient. IV fluid support, 24-hour NPO and pain management. Recheck sonogram in 5-7 days as long as the patient is making positive progress. Minor potential for pancreatic neoplasia.

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

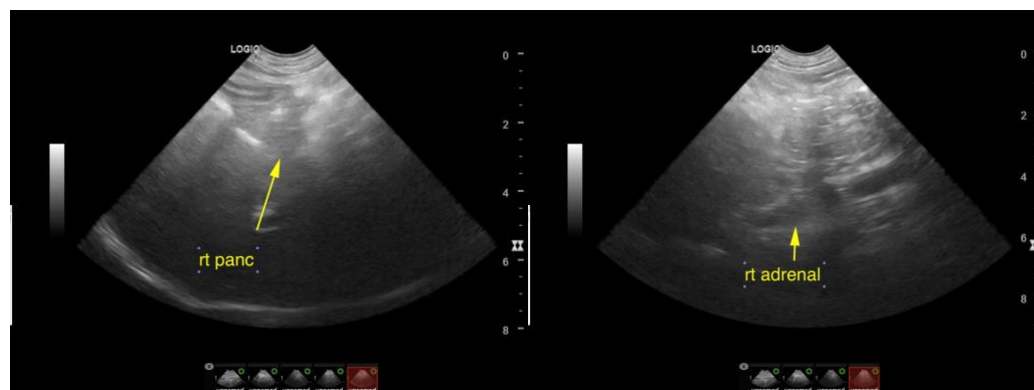
Nicole Arms, VMD

## HOSPITAL NAME

Gilbertsville VH

## REFERRING VET

Nicole Arms, VMD



## INVOICE

14370

## DATE

3/18/22



**PATIENT**

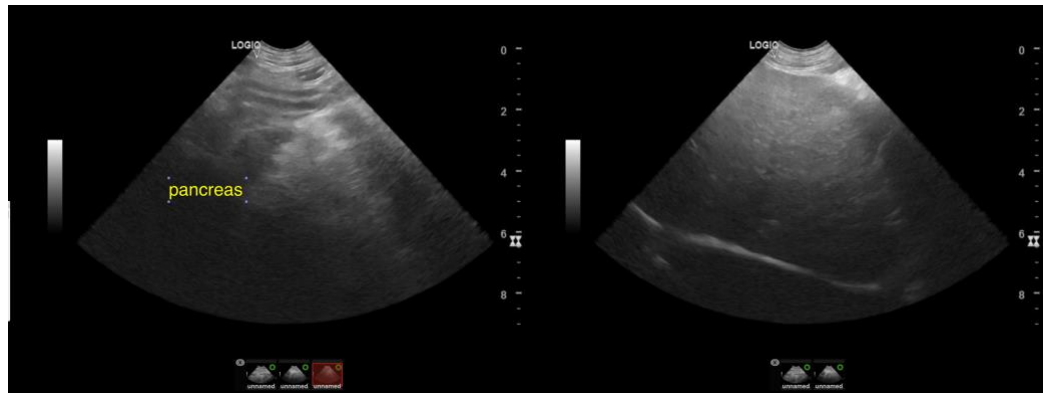
Peaches Blanchard

**SPECIES**

Canine

**BREED**

Terrier Mix



**SEX**

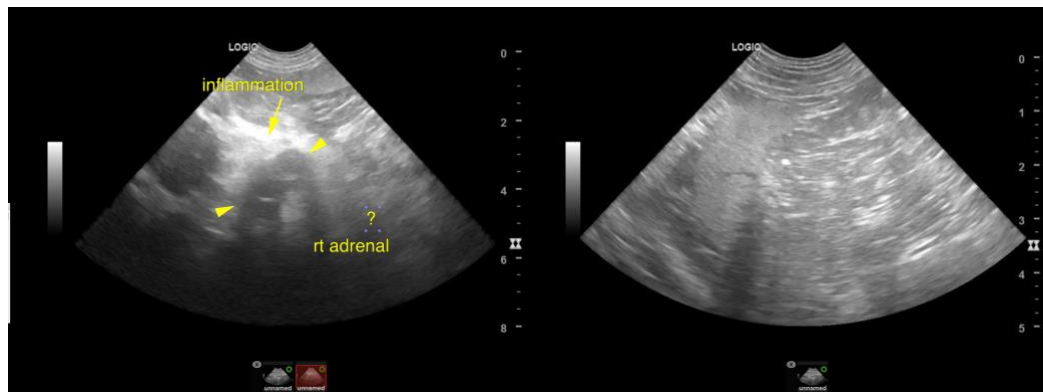
Spayed Female

**AGE**

4.5 Years

**WEIGHT**

34.7 Pounds



**INTERPRETED BY**

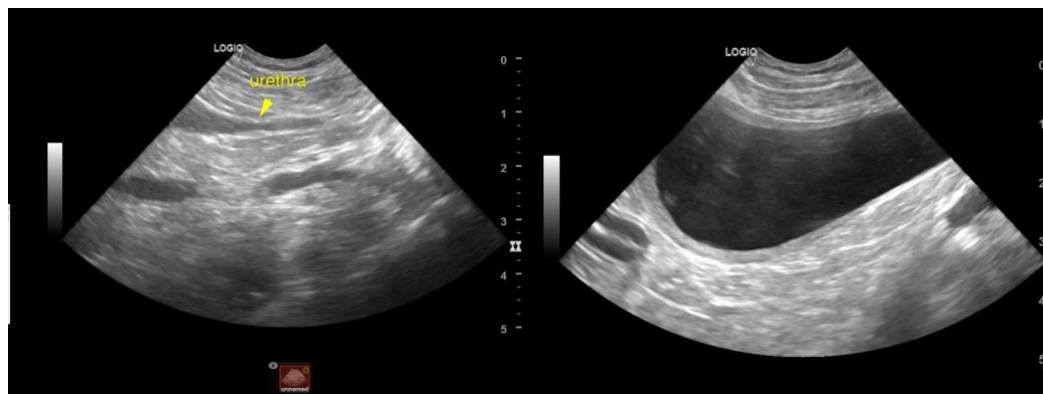
Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Nicole Arms, VMD

**HOSPITAL NAME**

Gilbertsville VH



**REFERRING VET**

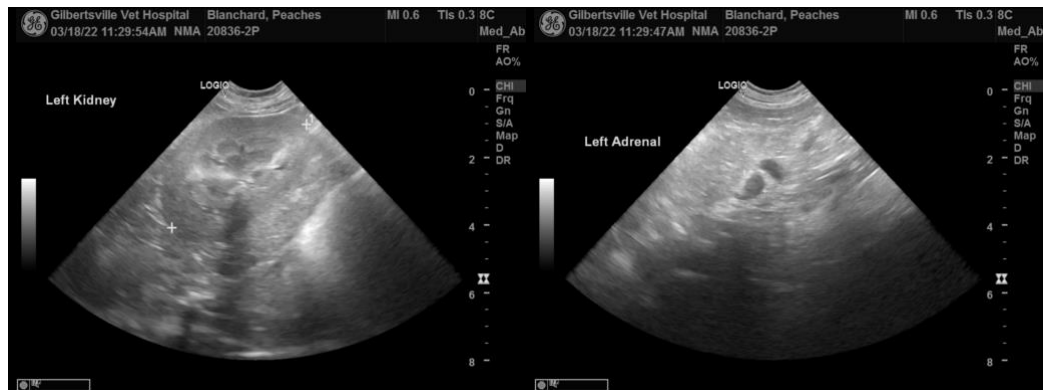
Nicole Arms, VMD

**INVOICE**

14370

**DATE**

3/18/22





**PATIENT**

Peaches Blanchard

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.

**SPECIES**

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.

**BREED**

Terrier Mix

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

**SEX**

Spayed Female

**AGE**

4.5 Years

**WEIGHT**

34.7 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Nicole Arms, VMD

**HOSPITAL NAME**

Gilbertsville VH

**REFERRING VET**

Nicole Arms, VMD

**INVOICE**

14370

**DATE**

3/18/22