

PATIENT

Bella Trix Sattur

PRESENTING CLINICAL SIGNS

History: Recheck abdominal ultrasound (1/18/22). No current meds.
 Abnormal PE/Chem/CBC/UA Results: LDDST WNL, HDDST WNL, Cortrosyn stim. WNL.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

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

Spayed Female

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. The left kidney measured 6.14 cm.

AGE

7 years

Adrenal Glands

WEIGHT

66 lbs

The right **adrenal gland** was similar to the prior sonogram and measured 2.8 x 1.58 cm at the cranial pole and 0.83 cm at the caudal pole. The left adrenal gland was normal in size and contour and measured 2.13 x 0.63 cm at the caudal pole and 0.56 cm at the cranial pole.

INTERPRETED BY

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

Spleen

The **spleen** revealed persistent micronodular changes. This is similar to the prior sonogram. If any weight loss is present then FNA is indicated.

IMAGING PERFORMED BY

Kelly Vazquez, CVT

Liver

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. 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.

HOSPITAL NAME

New Bridge VH

REFERRING VET

Dr. Glennon

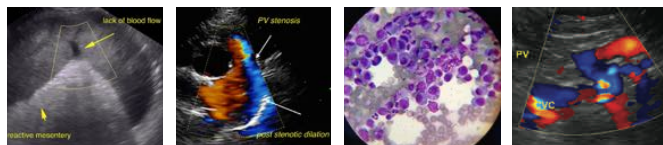
INVOICE

Gastrointestinal

The **stomach** revealed shadowing structure that measured 2.0 cm. This may represent medication or possible foreign matter. It does not appear obstructive at the time of the sonogram. The small intestines and colon were unremarkable.

DATE

3/24/22



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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.

SPECIES

Canine

Heart

BREED

Rapid view of the heart revealed no evidence of pathology.

Mix

ULTRASONOGRAPHIC FINDINGS

SEX

Persistent micronodular spleen, shadowing gastric material. This may be medications and are non-obstructive.

Spayed Female

Prominent, slightly irregular right adrenal gland.

AGE

The abdomen otherwise, appears stable.

7 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

The slightly irregular right adrenal gland is likely a normal patient variant if there is no hypertension or Cushing's disease present.

66 lbs

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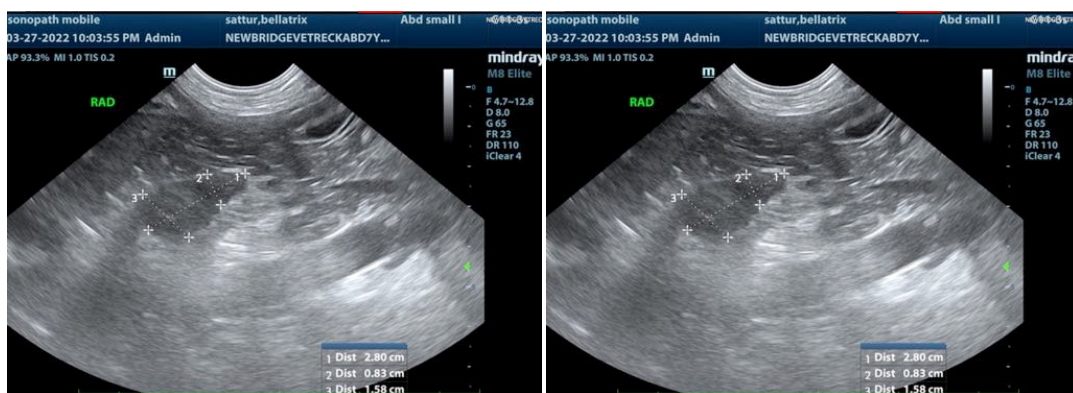
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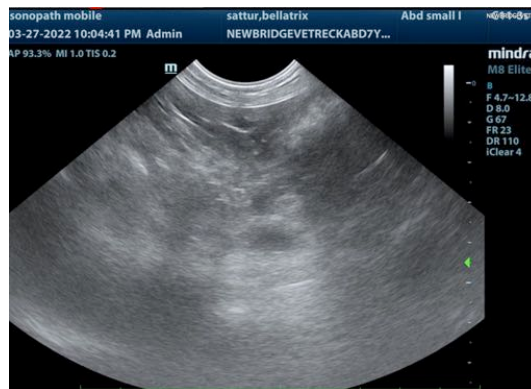
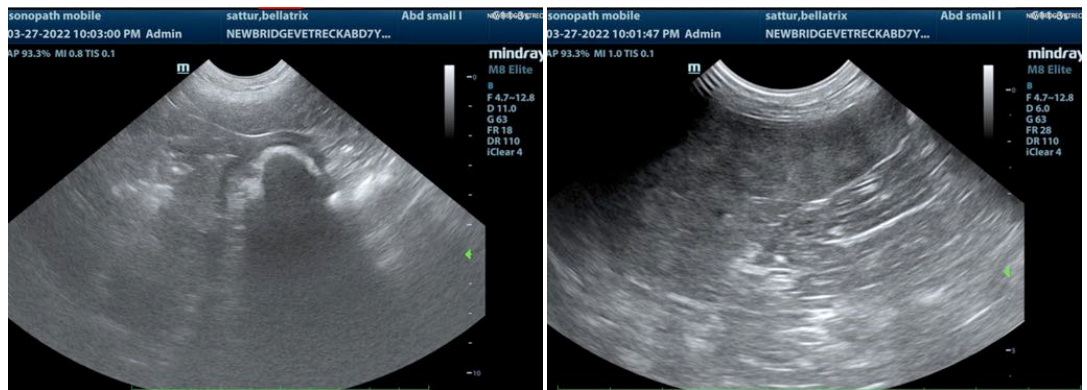
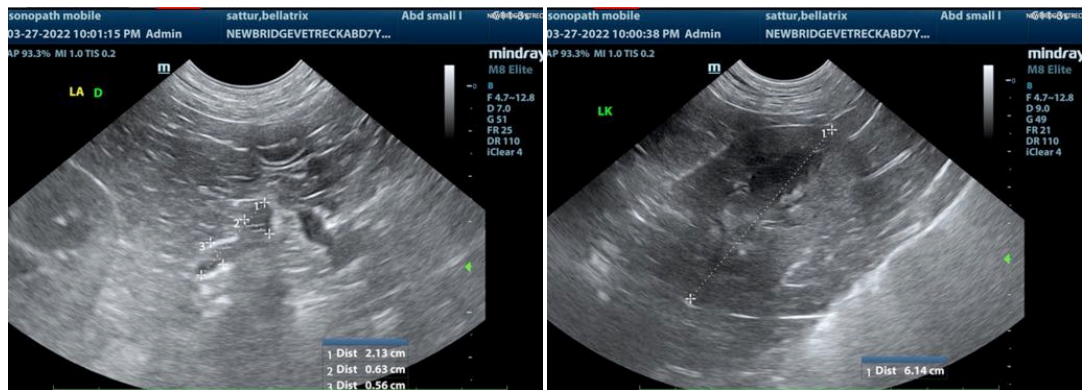
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Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

Info@SonoPath.com

DATE

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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.