



**PATIENT**

Dory Reisser

**SPECIES**

Canine

**BREED**

Pit Bull

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

27.4 kg

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC

**REFERRING VET**

Dr. Miller

**INVOICE**

36530

**DATE**

3/28/22

**PRESENTING CLINICAL SIGNS**

Presented at our hospital for breathing heavy, increased thirst. Recently she won't eat her food until its softened, panting, breathing heavier on walks Previous Health Concerns: elevated liver enzymes detected last year ( 5/2021) owner said BW done in November- not sent to us by rDVM.) Current Medications: Milk thistle, SAME

Abnormal PE/Chem/CBC/UA Results: Cardiovascular: gr 1/5 systolic; femoral pulses wnl Respiratory: increased BV sounds; no discreet crackles or wheezes Abdominal: full/tender cranially( mild) RDVM 5/2021 ALT 415(H) ALP 1074(H) WBC 5.81(L) Today SVEC ALT 466 (H) ALP >993 amylase 1728(H) lipase 389(H) Hct low normal 36.7 ( was 50 % on RDVM BW) rads- questionable densities/ inflammation lung fields; microchip; slight hepatomegaly; no obvious effusion

**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 7.5 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 2.62 cm x 0.78 cm at the cranial pole and 0.76 cm at the caudal pole. The right adrenal gland measured 2.54 cm x 0.61 cm at the cranial pole and 0.75 cm at the caudal pole.

**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.

**Liver**

The **liver** presented multifocal coalescing nodular changes with irregular contour. The gallbladder and common bile duct were unremarkable.

**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.



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**Pancreas**

Dory Reisser

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

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**ULTRASONOGRAPHIC FINDINGS**

- Coalescing nodular hepatic changes and irregular contour – pronounced nodular hyperplasia versus hepatic neoplasia.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

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Bile acid profile and ultrasound guided FNA of the liver indicated. This may be an incidental finding and not directly related to the clinical status. However, sampling is strongly suggested.

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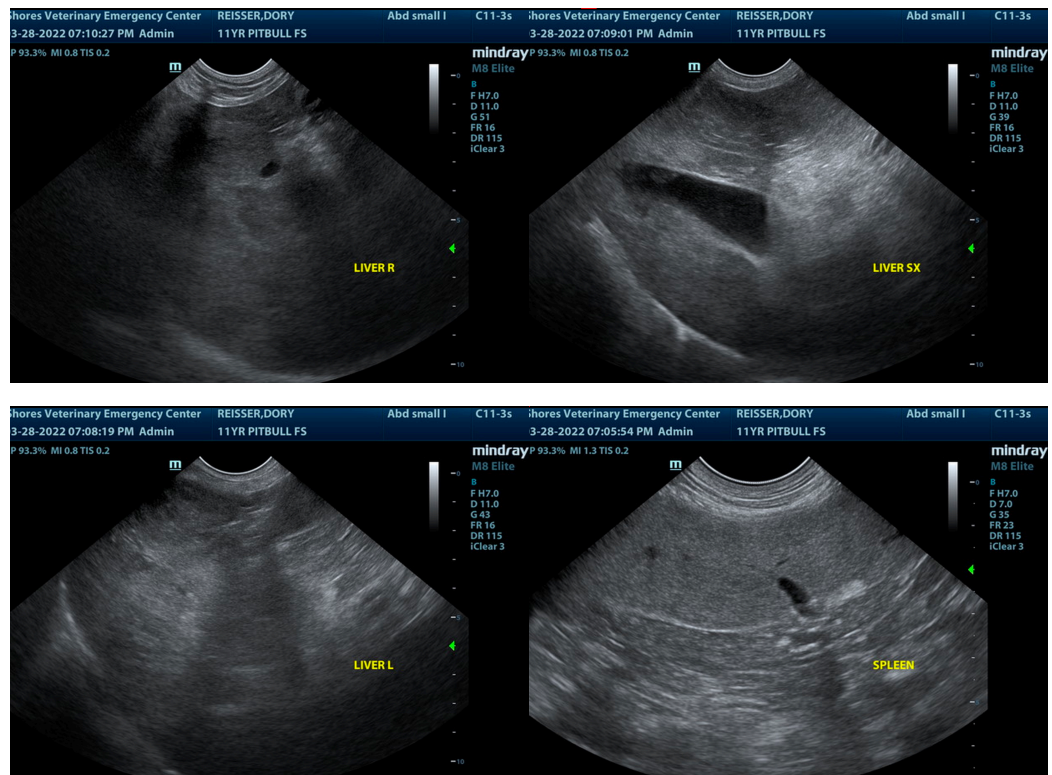
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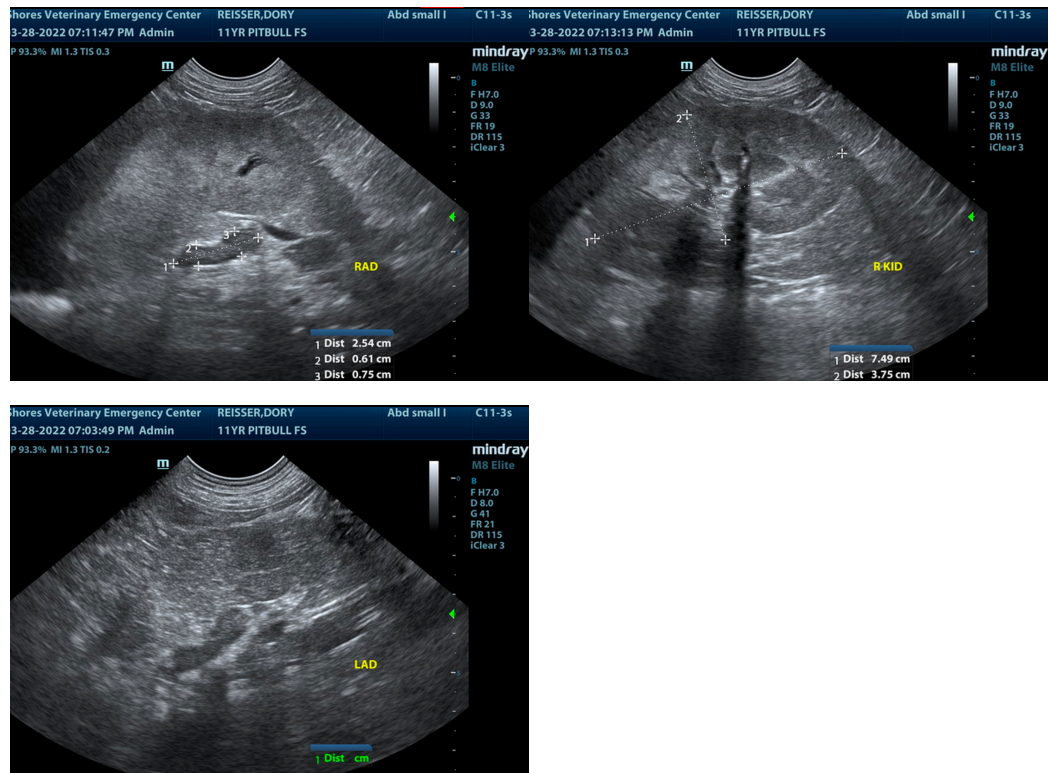
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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