



PATIENT PRESENTING CLINICAL SIGNS

Brody Luther Nausea and not eating
Abnormal PE/Chem/CBC/UA Results: CBC: RBC 9.5, HCT 63% CHEM: ALKP 15 CPL: abnormal

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

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 were noted. Ureteral papillae were normal.

SEX

Neutered Male

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The kidneys measured 5.0 cm each.

AGE

9 Years

Adrenal Glands

WEIGHT

33 Pounds

The **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 0.8 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 0.6 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Dr. Griffin

Liver

HOSPITAL NAME

Northside VC

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.

REFERRING VET

Dr. Griffin

Gastrointestinal

INVOICE

36009

The **stomach** presented concentric wall thickening with luminal fluid accumulation. Wall thickness measured up to 2.0 cm. Areas of loss of mural detail and reactive mesentery present. The small intestine and colon were unremarkable. Regional lymph nodes mildly enlarged, hypoechoic, irregular, and rounded, measuring up to 1.5 cm. Significant regional inflammation noted around the stomach and lymph nodes.

DATE

3/9/22



PATIENT

Brody Luther

Pancreas

SPECIES

Canine

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. Significant regional inflammation noted around the pancreas.

BREED

Mix

ULTRASONOGRAPHIC FINDINGS

- Significant gastric thickening with regionally enlarged lymph nodes – Severe gastritis with lymphadenitis versus gastric neoplasia with metastatic disease to regional lymph nodes.

SEX

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the accessible lymph nodes and gastric wall recommended. The gastric wall may be difficult to obtain definitive diagnosis from. Full thickness gastric and lymph node biopsies warranted. Guarded prognosis. Sampling strongly encouraged.

AGE

9 Years

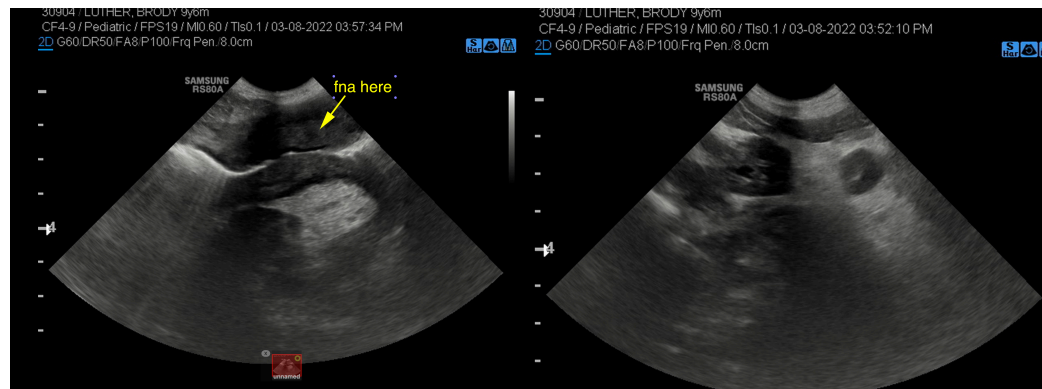
WEIGHT

33 Pounds

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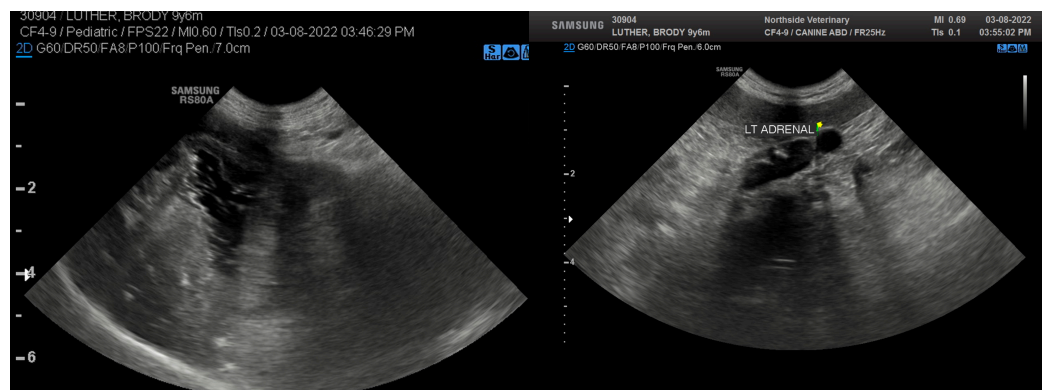
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PATIENT

Brody Luther

SPECIES

Canine

BREED

Mix

SEX

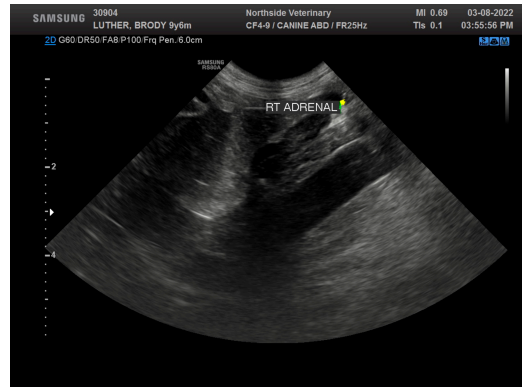
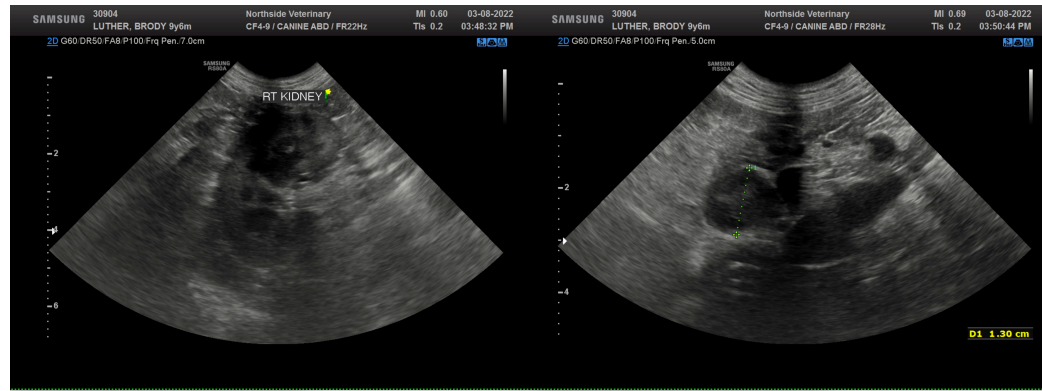
Neutered Male

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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.

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