

**DATE**

4/15/22

PRESENTING CLINICAL SIGNS

History: Onset of renal insufficiency/history of liver disease. Rechecking from ER visit for a wound and ear and eye issues.

PATIENT

Holly Vezos

Current Medications: Cefpodoxime, carprofen, tramadol, trazodone, famotidine, gabapentin, cetirizine (treatments are for a wound on the head except famotidine which is started for GI protectant from renal insufficiency).

SPECIES

Canine

BREED

Pug Mix

Lab Results: 04/10/22 Crea 2.5 (0.5-1.8), BUN 32 (7-27), ALK 678 (23-212), ALT 107 (10-125), Glob 4.0 (2.5-4.5). 08/04/21 UA SG 1.012, prot 30, pH 5 micro neg. Hem: plat 607 (200-500). Chem BUN 37.8 (7-29), Crea 1.0, TP >11.0, Glob 9.5 (2.1-4.9), ALT 195, ALK 852, TBILI 1.55, Chol 365, AMY 1567 (500-1400).

Date of Previous IntraPet Ultrasound: 8/18/21. See attached.

Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

SEX

Spayed Female

Imaging Performed By: Stephanie Pearce RDCS, RVT.

AGE

11/21/10

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 3.0 cm beyond the cystourethral junction.

WEIGHT

37.9 Pounds

The **kidneys** revealed moderate degenerative changes, increased cortical echogenicity and loss of corticomedullary definition. The right kidney measured 5.39 cm. The left kidney measured 5.1 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some mild heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The right adrenal gland measured 2.4 cm x 0.7 cm at the caudal pole and 0.63 cm at the cranial pole. The left adrenal gland measured 1.88 cm x 0.63 cm at the caudal pole and 0.47 cm at the cranial pole.

HOSPITAL NAME

Friendly Paws VC

REFERRING VET

Dr. Price

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.

INVOICE

14759

Liver

The **liver** revealed coarse architecture, increased portal marking and diffuse heterogeneous parenchymal changes. Generalized hepatomegaly noted. No overt masses present yet irregular swelling and nodular changes present. 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.

Pancreas

The **pancreas** revealed hypoechoic parenchyma with undulating contour, measuring up to 0.9 cm in the left limb.

ULTRASONOGRAPHIC FINDINGS

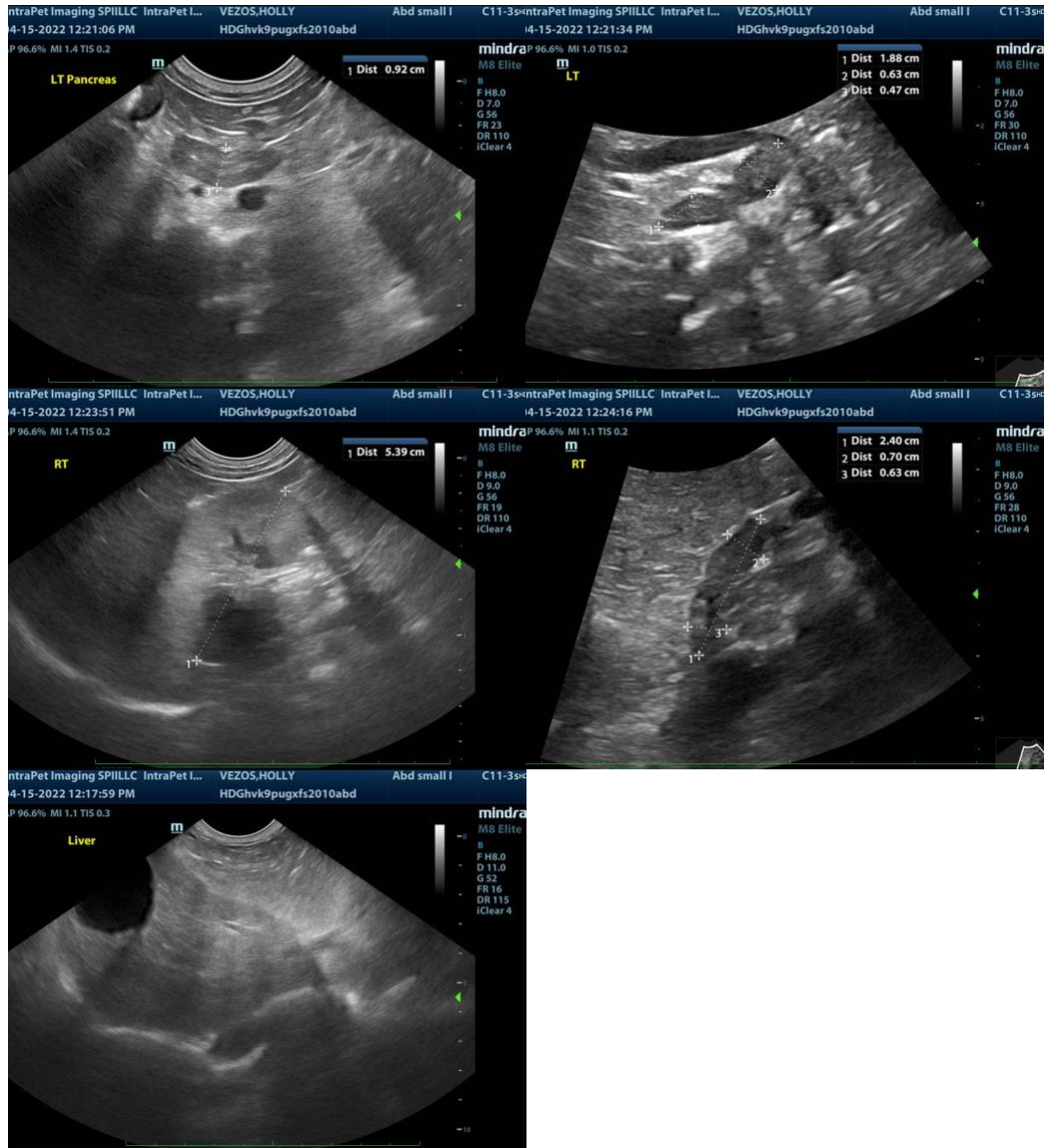
- Diffuse hepatic disease with nodular hyperplasia
- Prominent irregular pancreas
- Age-related renal and adrenal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis titers warranted with ultrasound guided FNA or core biopsy of the liver in this patient. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas, as some level of pancreatitis is likely. Ampicillin, metronidazole, hepatic nutraceuticals recommended in the meantime.

With respect to the prior renal findings, minor progressive degenerative changes were noted, but not significant subjectively.





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.

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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