



**PATIENT PRESENTING CLINICAL SIGNS**

Sofia Keenan Recheck of left adrenal tumor; uncontrolled diabetes, hx of Cushing's. On vetoryl 5 mg bid, cerenia 24 mg x 1/2 sid, vetsulin 11 units am and 10 units pm.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Bichon 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** were normal in size and contour; however, a minor hyperechoic ring was noted at the corticomedullary junction. This is consistent with diabetic nephropathy. This is likely from glucosuria. However, assessment for proteinuria is also warranted. This is an idiopathic finding, but an expected finding in diabetic patients. Increased cortical echogenicity was noted. This is consistent with degenerative changes. The right kidney measured 4.14 cm. The left kidney measured 3.9 cm.

**AGE**

10 years

**WEIGHT**

11.1 lbs

**Adrenal Glands**

The right **adrenal gland** was slightly swollen and mildly heterogenous with a hyperechoic nodule at the cranial pole measuring 1.82 x 0.43 cm at the caudal pole and 0.54 cm at the cranial pole. The left adrenal gland was persistently swollen and slightly heterogenous, yet reduced in size compared to the prior sonogram. The left adrenal gland measured 2.11 x 0.76 cm at the caudal pole and 0.74 cm at the cranial pole. The left adrenal gland was imaged from the right and left approaches.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Diane McFadden, RVT

**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 was noted.

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**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.

**DATE**

4/19/22



**PATIENT** *Gastrointestinal*

Sofia Keenan The **stomach** was filled with shadowing material. The small intestines and colon were unremarkable.

**SPECIES** *Pancreas*

Canine The right limb of the **pancreas** was hypoechoic and mildly irregular.

**BREED** **ULTRASONOGRAPHIC FINDINGS**

Bichon Mix Heterogenous adrenal glands with swelling. Reduction of left adrenal size compared to the prior sonogram.

**SEX** Diabetic nephropathy with moderate degenerative changes.

Spayed Female Shadowing material in the stomach.

**AGE** Hypoechoic and mildly irregular right limb of the pancreas.

10 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT** If the patient was n.p.o. at the time of the sonogram then foreign body should be considered. Subxiphoid palpation is recommended to assess for pain-solicited response. If pain is noted low grade pancreatitis is suspected. If upper gastrointestinal signs are present or anorexia then endoscopy would be indicated given the 3.0 cm shadowing structure. Otherwise, if the patient is stable a recheck sonogram is recommended in a week at full n.p.o. status to assess if the material is persistently present.

11.1 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

Note regarding adrenal gland size with Cushing's and Vetoryl, in my experience, the adrenal gland will change in size especially if inflammatory events occur. The regression of the left adrenal size would be consistent with a prior likely adenitis event, which has resolve.

**IMAGING PERFORMED BY**

Diane McFadden, RVT

**HOSPITAL NAME**

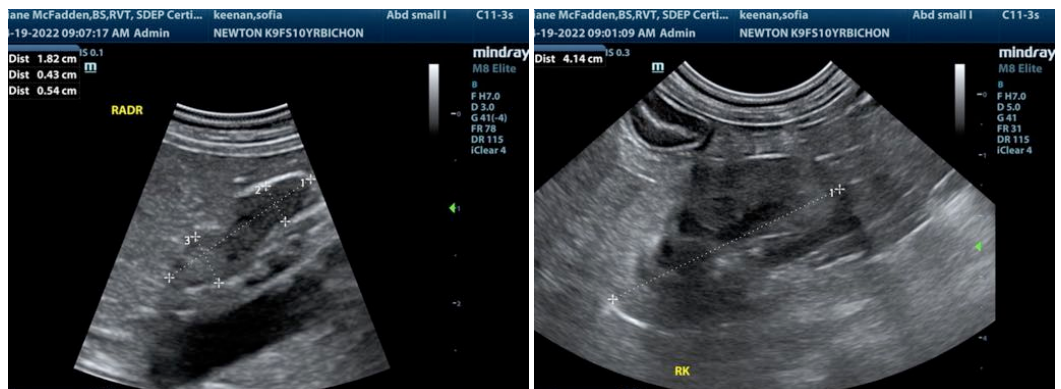
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**DATE**

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**PATIENT**

Sofia Keenan

**SPECIES**

Canine

**BREED**

Bichon Mix

**SEX**

Spayed Female

**AGE**

10 years

**WEIGHT**

11.1 lbs

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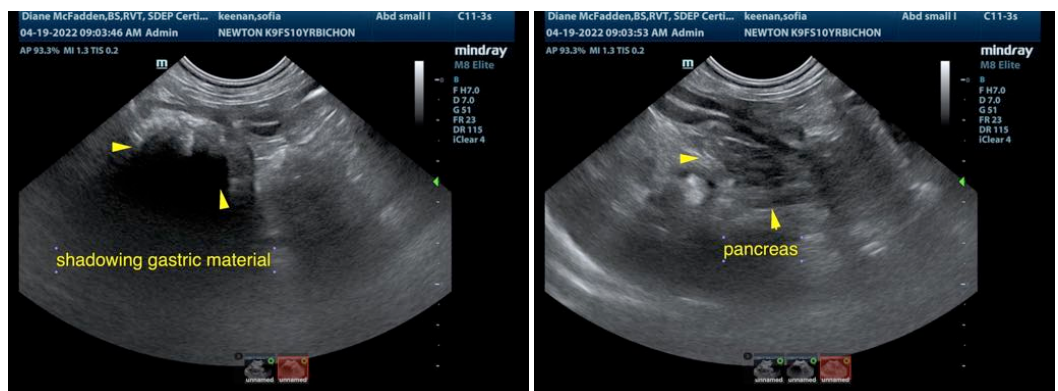
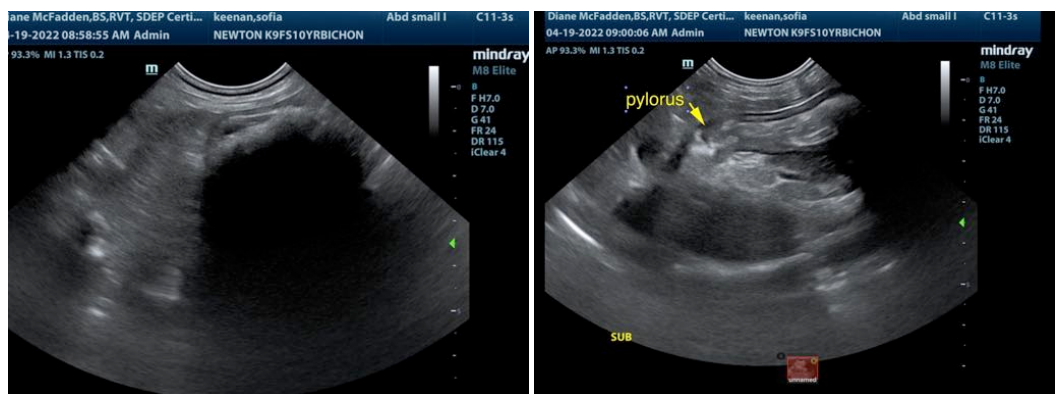
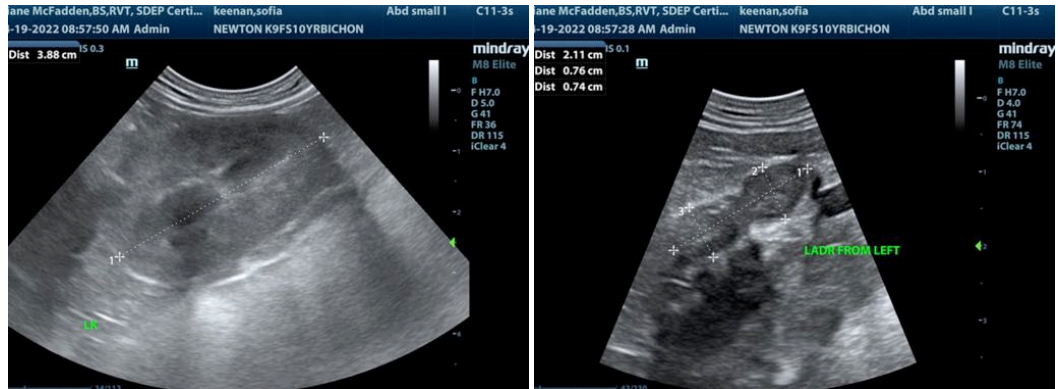
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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