



PATIENT

Rudy Howell

SPECIES

Canine

BREED

Pug

SEX

Neutered Male

AGE

10 Years

WEIGHT

10 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Griffin

HOSPITAL NAME

Northside VC

REFERRING VET

Griffin

INVOICE

22124

DATE

4/21/23

PRESENTING CLINICAL SIGNS

Patient has intermittent diarrhea

Abnormal PE/Chem/CBC/UA Results: PE: BAR CBC: RBC35.6%, WBC4.86 CHEM: BUN 31, Ca 12.1, TP>12, CHOL 98

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.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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. Mineralization was present in the kidneys. The left kidney measured 3.63 cm. The right kidney measured 3.63 cm. A cortical infarct was noted in the left kidney. Nonobstructive calculi were noted.

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 right adrenal gland measured 0.65 cm. The left adrenal gland measured 0.56 cm.

Spleen

The **spleen** revealed multifocal hypoechoic nodules with disrupted architecture, particularly at the cranial pole of the spleen.

Liver

The **liver** was normal in size and contour with slight increased portal markings. 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 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.



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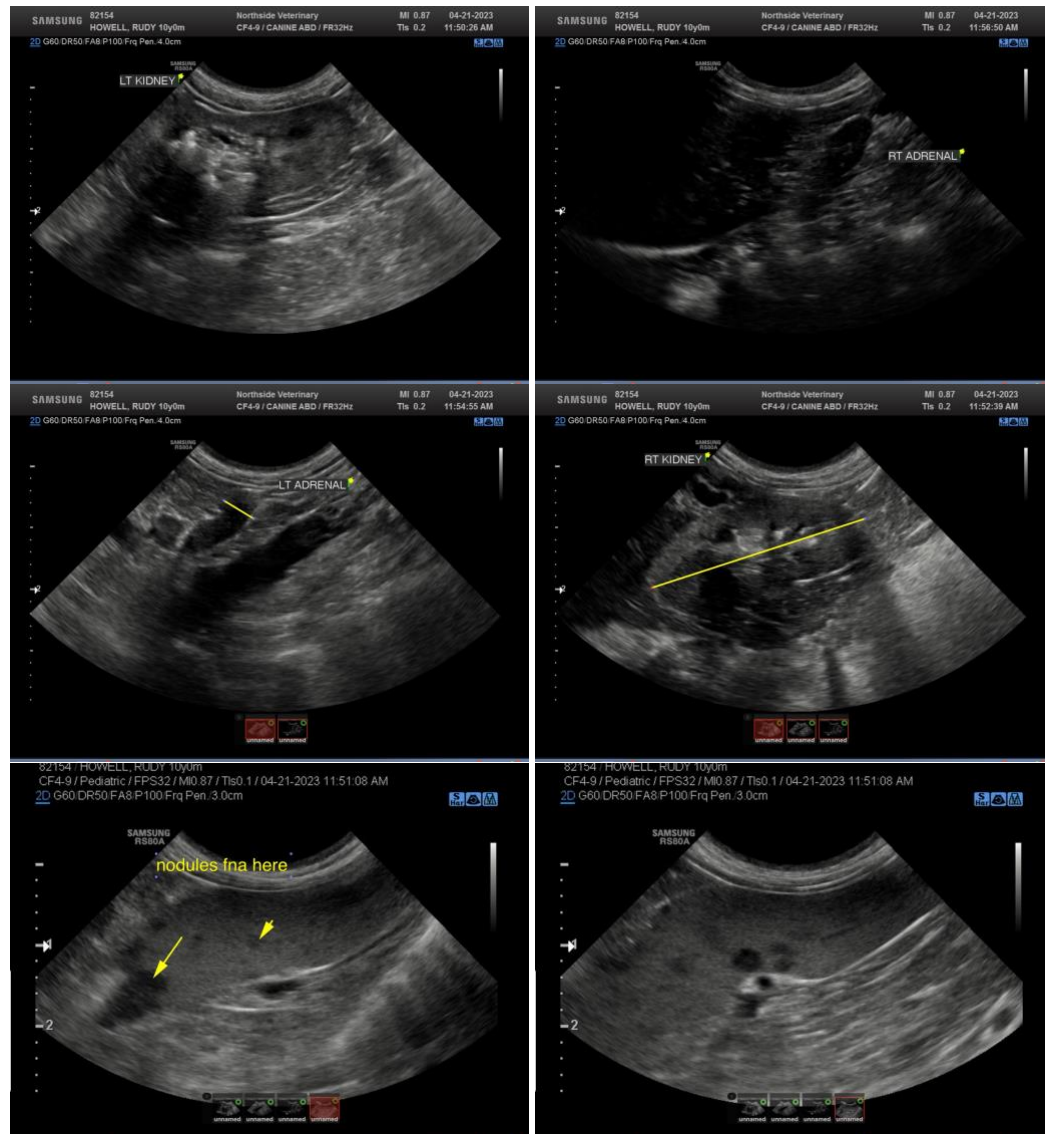
4/21/23

ULTRASONOGRAPHIC FINDINGS

- Undefined splenic nodules – hyperplasia, splenitis and round cell neoplasia are all possible. FNA, cytology and culture indicated.
- Moderate degenerative renal changes with nonobstructive nephrolithiasis and a cortical infarct in the left kidney
- Increased portal markings in the liver

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chest radiographs are warranted to assess for comorbidity. Splenectomy could also be considered with liver inspection and biopsy.





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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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