

**DATE**

4/25/22

PRESENTING CLINICAL SIGNS

P was seen at another vet on 4/16/22 for being lethargic and painful. Bloodwork was done which showed an elevated ALKP so an US was recommended.

Current Medications: Carprofen 25mg BID, Gabapentin 100mg BID.

PATIENT

Sammi Aberg

Lab Results: Increased ALKP.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brilhart, RDMS.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Mix

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 was noted. Ureteral papillae were normal.

SEX

Spayed Female

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 left kidney measured 5.29 cm. The right kidney measured 6.13 cm.

AGE

81/10

WEIGHT

30 lbs

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 2.32 x 0.68 cm at the caudal pole and 0.55 cm at the cranial pole. The right adrenal gland measured 2.45 x 0.58 cm at the caudal pole and 0.82 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** revealed a focal, hypoechoic, non-disruptive nodule that measured 0.87 cm in the mid body. The remainder of the spleen was unremarkable with uniform parenchyma. Occasional, hyperechoic lipogranuloma was noted on the spleen as well.

HOSPITAL NAME

Charm City Vet

REFERRING VET

Dr. Karbonik

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. Non-obstructive calculus was noted and measured 0.5 cm. 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.

INVOICE

99507

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.

Heart

Rapid view of the heart revealed no evidence of pathology in the right auricle, pericardium. The contractility and chamber sizes are normal.

ULTRASONOGRAPHIC FINDINGS

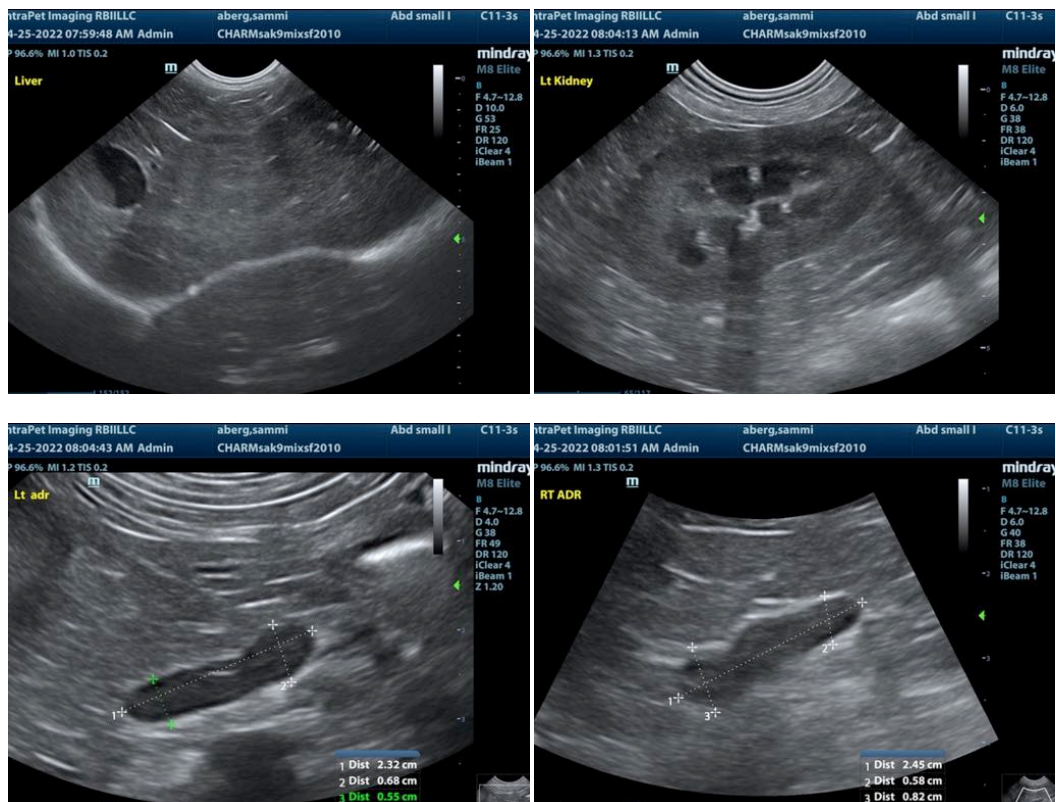
Splenic nodule, non-vascular.

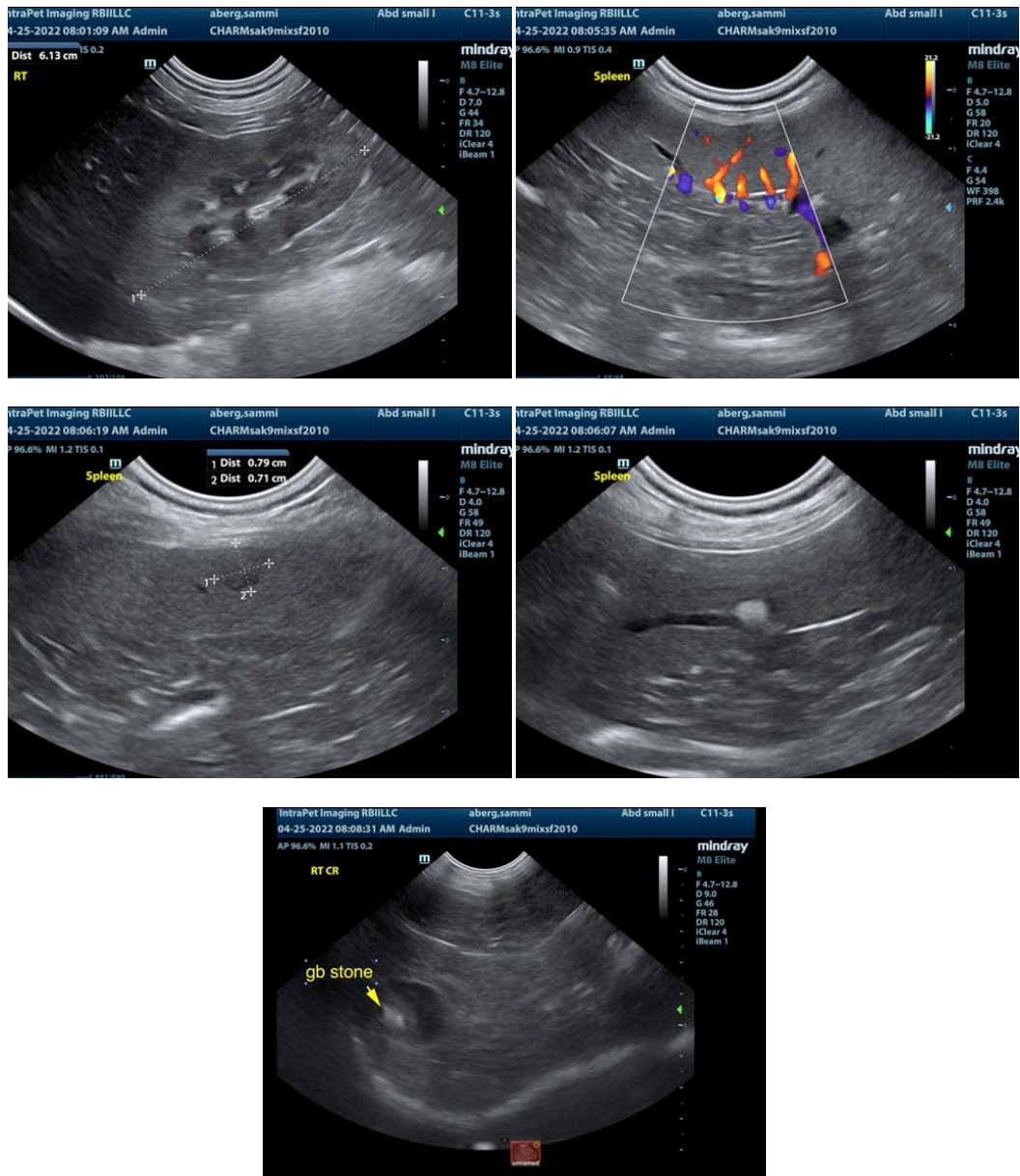
Age related hepatic changes, subjectively benign.

Non-obstructive gallbladder calculus, yet non-obstructive.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the splenic nodule and liver can be justified; however, subjectively it appears benign. Recheck sonogram is recommended in a month of the splenic nodule to assess for any growth, yet likely hyperplasia. Ursodiol therapy can be considered in an attempt to dissolve the calculus, yet likely unrelated to the liver enzyme elevation.





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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