



PATIENT

Velvet Lindquist

SPECIES

Canine

BREED

Bull Terrier

SEX

Intact female

AGE

2 years

WEIGHT

Not given

PRESENTING CLINICAL SIGNS

History: Mild liver enzyme elevation-normalized today. Clinically normal, in estrus. No current meds.
Abnormal PE/Chem/CBC/UA Results: 4/5/22-ALT 220 (125H); ALKP 251 (212H); GGT 12 (11H).
4/6/22- ALT 55, ALKP 27, GGT 0

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 was noted. Ureteral papillae were normal.

The uterus was uniform and measured 1.13 cm. Minor cystic or follicular changes were noted in the left ovary. Minor microcystic or follicular changes were noted in the right ovary as well. The right ovary measured 1.17 x 1.66 cm. The left ovary measured 2.33 x 1.17 cm.

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 right kidney measured 5.5 cm. The left kidney measured 5.65 cm.

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 2.39 x 0.94 cm at the cranial pole and 0.54 cm at the caudal pole. The left adrenal gland measured 2.72 x 0.38 cm at the cranial pole and 0.42 cm at the caudal pole.

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.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

VCA Blairstown AH

REFERRING VET

Dr. Lovell

INVOICE

98095

DATE

4/6/22



PATIENT *Gastrointestinal*

Velvet Lindquist The duodenum is slightly spastic. The remainder of the gastrointestinal tract was unremarkable.

SPECIES *Pancreas*

Canine The **pancreas** was slightly heterogenous on the right limb.

BREED **ULTRASONOGRAPHIC FINDINGS**

Bull Terrier Slight heterogenous pancreas and spastic duodenum.

SEX Normal reproductive tract with minor ovarian changes.

Intact female Likely reactive hepatopathy.

AGE **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

2 years Subxiphoid palpation is recommended to assess for pain-solicited response. If pain is noted low grade pancreatitis is suspected. Diet change to a hydrolyzed diet may prove effective if reactive hepatopathy is playing a role. FNA of the liver could be considered for further definition.

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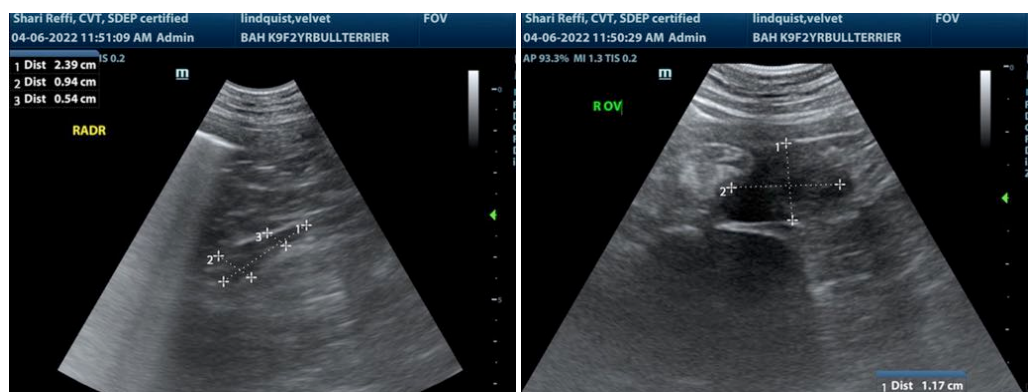
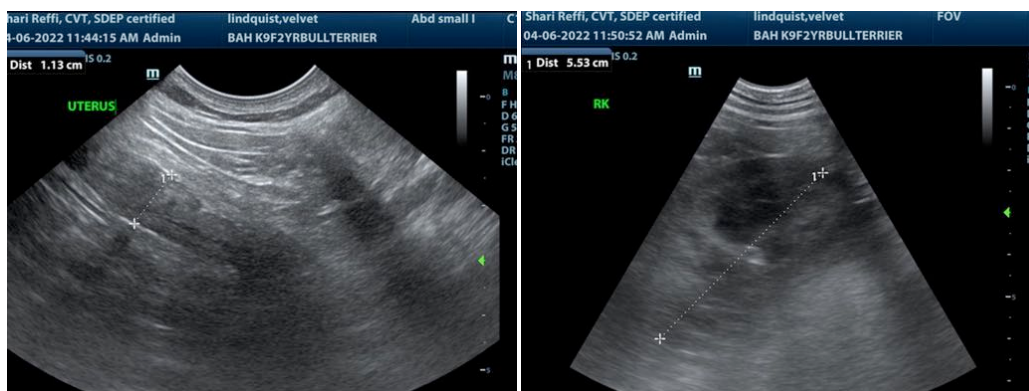
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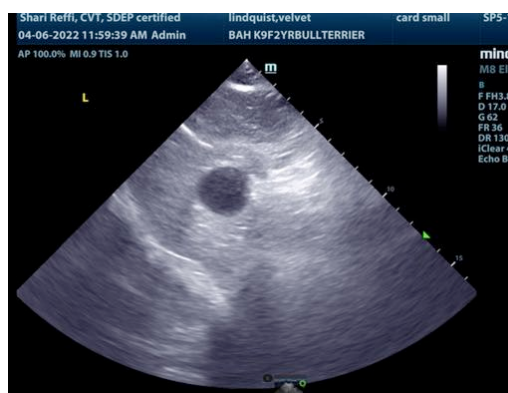
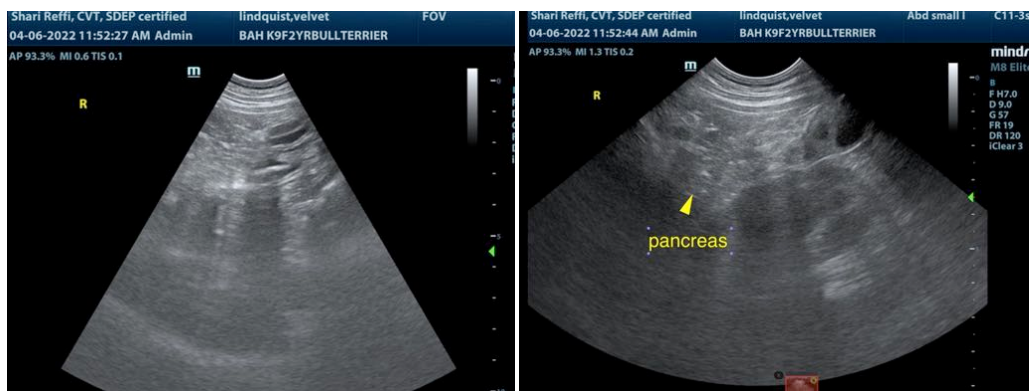
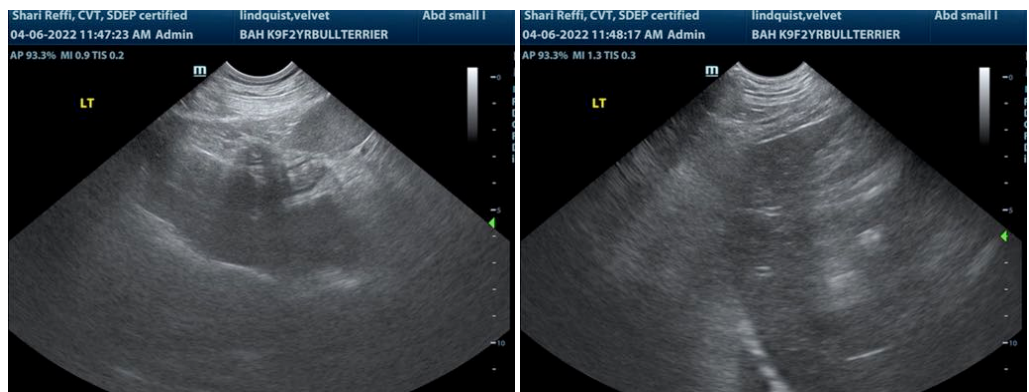
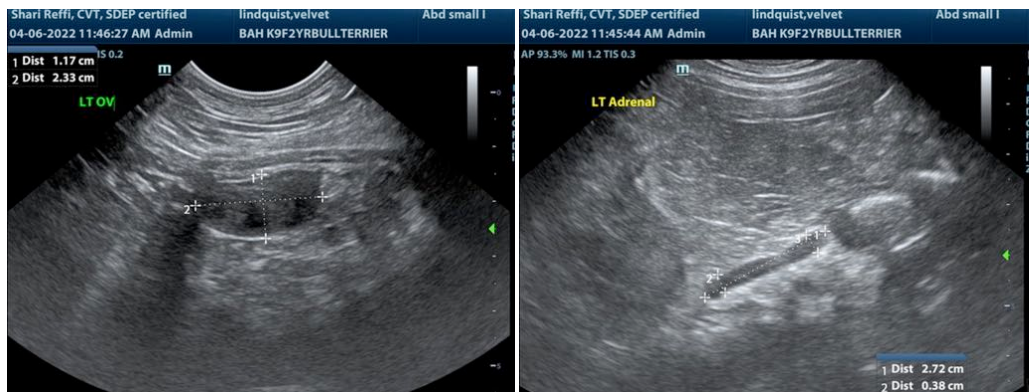
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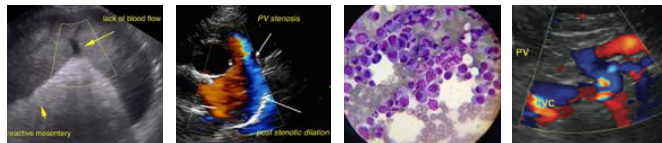
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Bull Terrier

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
Info@SonoPath.com

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