



PATIENT

Elwood Dua

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered Male

AGE

9 Years

WEIGHT

93 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

HOSPITAL NAME

Companion AH
Parsippany

REFERRING VET

Dr. Wolf

INVOICE

36707

DATE

4/7/22

PRESENTING CLINICAL SIGNS

Hepatomegaly. Elevated liver enzymes.

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 2.0 cm beyond the cystourethral junction.

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 7.47 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 2.27 cm x 1.79 cm at the cranial pole and 1.21 cm at the caudal pole. The left adrenal gland measured 2.74 cm x 1.76 cm.

Spleen

The **spleen** was largely normal with the exception of a focal hypoechoic nodule measuring 1.56 cm x 1.16 cm at the mid cranial body.

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.

Gastrointestinal

The **stomach** revealed a minor amount of anechoic fluid with mildly thickened, slightly spastic duodenum without evidence of foreign body. No loss of mural detail.

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.

ULTRASONOGRAPHIC FINDINGS

- Low-grade gastroduodenitis pattern
- Reactive hepatopathy likely



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- Focal splenic nodule - Nodular hyperplasia versus emerging hemangiosarcoma or round cell neoplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

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Low-grade inflammation of the GI tract is likely being absorbed in the portal system, causing a reactive hepatopathy scenario. Monitor splenic nodule, given the breed predisposition to splenic pathology. Recommend recheck sonogram in 3-4 weeks. If any history GI upset in this patient, diet change may be appropriate.

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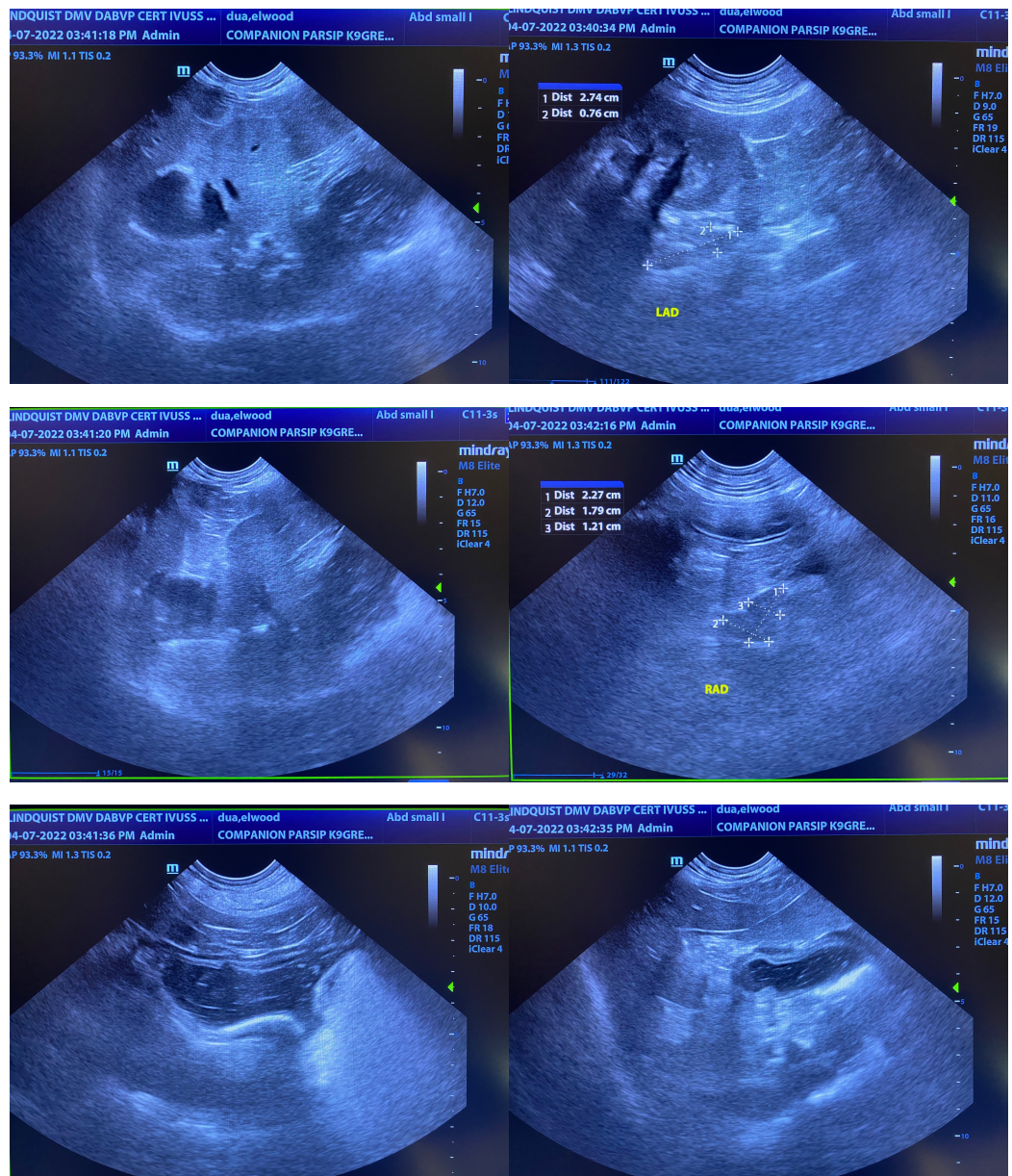
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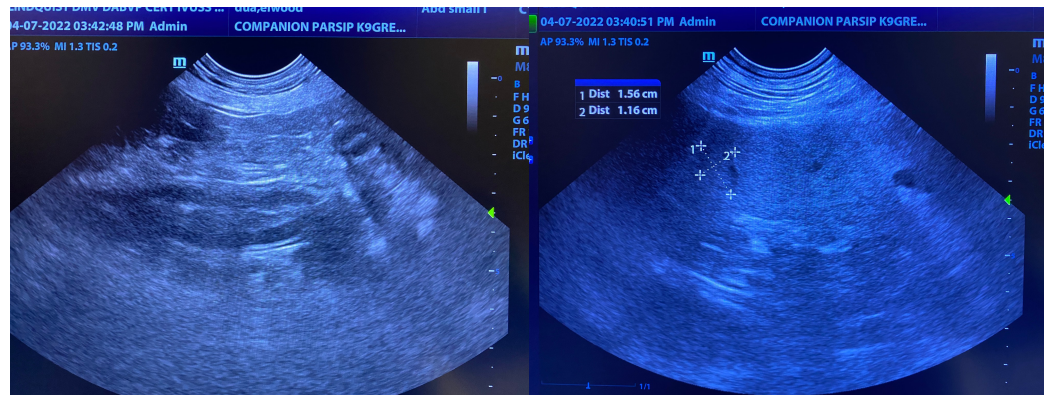
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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