

**PATIENT**

Pugsley Watson

**SPECIES**

Canine

**BREED**

Puggle

**SEX**

Neutered Male

**AGE**

14 Years

**WEIGHT**

31 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS

**HOSPITAL NAME**

The Veterinary Hospital

**REFERRING VET**

Dr. Johnson

**INVOICE NUMBER**

14670

**DATE**

4/8/22

**PRESENTING CLINICAL SIGNS**

History: cough, dyspnea, systolic murmur grade 4/6, abdominal effusion Current Medications Vetmedin 3.75 mg BID, lasix 20 mg BID, Benazipril 2.5 mg BID Primary Question/Differential to Be Answered in This Exam better definition of heart disease and medication adjustments as indicated

Abnormal PE/Chem/CBC/UA Results: ALT 346, Alk Phos 605, Phos 5.5

**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 residual prostate measured 0.74 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 5.66 cm. The left kidney measured 5.62 cm.

**Adrenal Glands**

The **left adrenal gland** comprised a mass, measuring 3.2 x 2.18 cm. Capsular expansion was noted with regional enhanced pericapsular fat. The left adrenal mass appeared to be fairly vascular on color flow assessment.

The **right adrenal gland** was 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 1.67 cm x 0.34 cm at the cranial pole and 0.76 cm at the caudal pole.

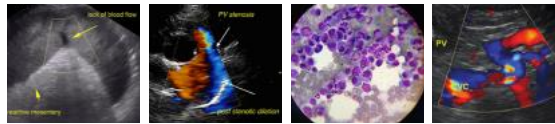
**Spleen**

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 were noted.

**Liver**

The **liver** was uniformly swollen and slightly coarse in architecture yet not overtly pathological. The liver presented passive congestive pattern, consistent with right sided heart failure or other obstructive disease. Secondary ascites was present.

**Gastrointestinal**



**PATIENT** Some retention of ingesta was noted in the **stomach**. The small intestine and colon were unremarkable.

Pugsley Watson

**Pancreas**

Heterogeneous **pancreatic** changes were noted in the left limb with ill-defined parenchyma.

**SPECIES**

**Free Abdomen**

Canine A moderate amount of **ascites** was noted in this patient.

**BREED**

Puggle

- Passive congestion liver pattern with secondary ascites
- Left adrenal gland mass, moderately vascular, suspect carcinoma or pheochromocytoma
- Heterogeneous pancreas
- Stomach ingesta

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Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

As far as the clinical management, focus on thoracic findings.

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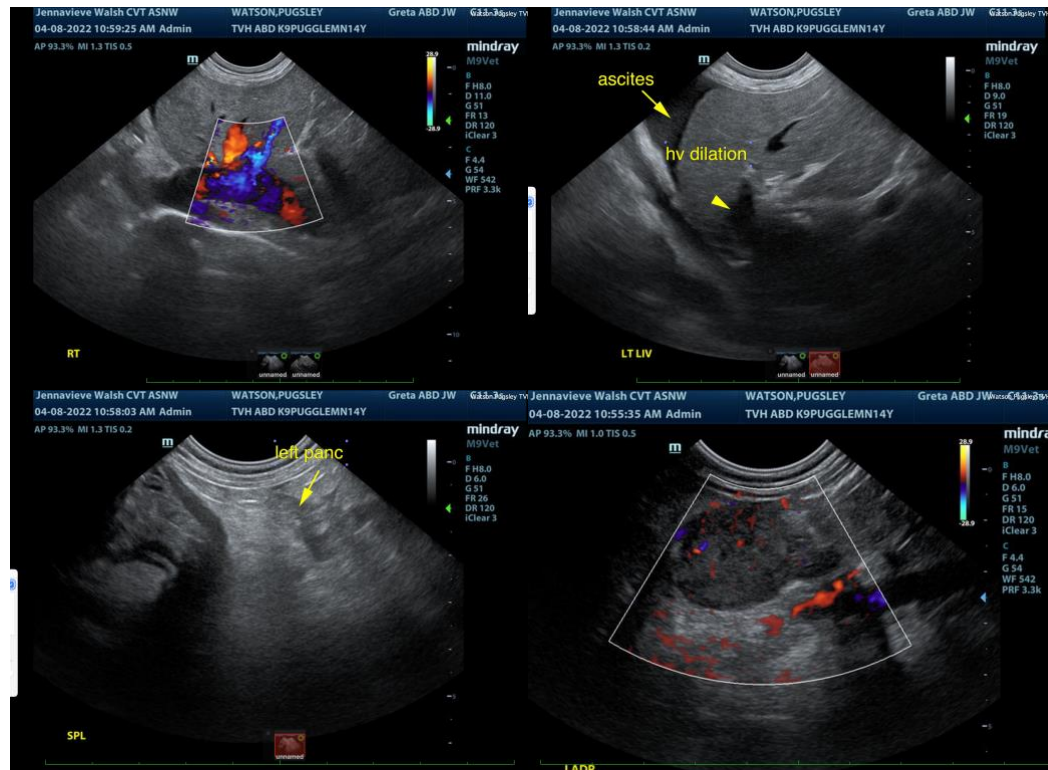
Dr. Johnson

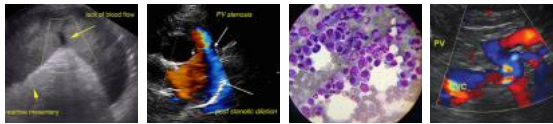
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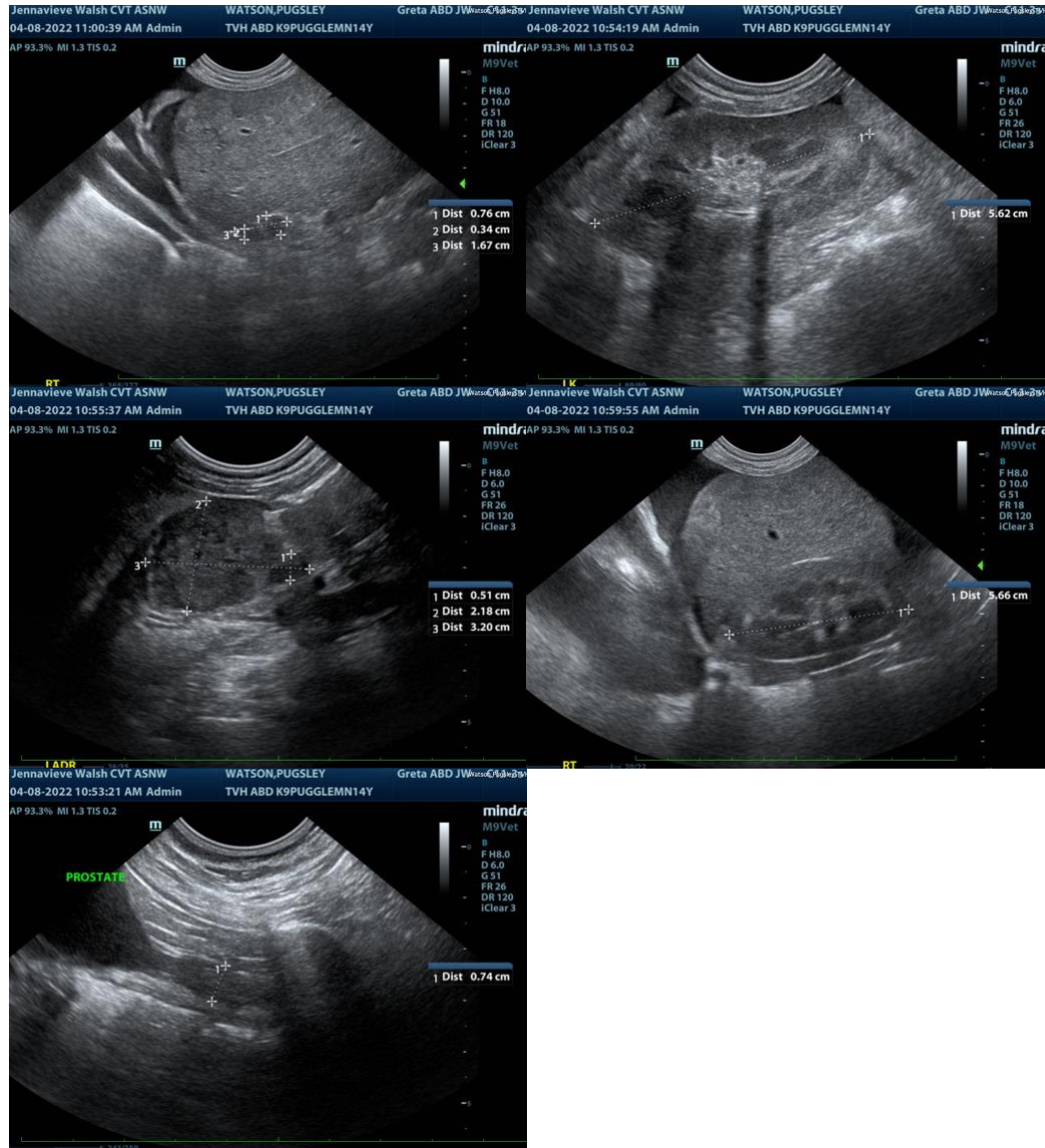
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**REFERRING VET**

Dr. Johnson

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.

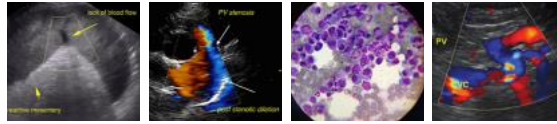
**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
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