



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Henry Varney

SPECIES
Canine

Previous mild ALT elevation in July 2021, slowly increasing. Most recent BW done showed severe LE elevations and visible icterus. Still eating, but not finishing his food. Has been on Clavamox, Metronidazole and Levothyroxine for hypothyroidism.

Abnormal PE/Chem/CBC/UA Results: PE: Jaundiced skin, yellow sclera. Pain on deep cranial abdominal palpation. BW (5/5/22): Neutrophilia, ALT > 1,000, ALP > 993, T. Bili 10.2. Lepto SNAP: NEG 4DX: Neg x 4 PT 22.5 H (up to 14.2), APTT 175 H (75-105)

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Labrador Retriever

Urinary System

SEX

Neutered male

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. 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.

AGE

4 years

The residual prostate measured 0.5 cm.

WEIGHT

111 lbs

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 6.7 cm. The left kidney measured 8.06 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 2.01 cm at the cranial pole and 0.87 cm at the caudal pole. The left adrenal gland measured 0.64 cm at the caudal pole and 0.62 cm at the cranial pole.

IMAGING PERFORMED BY

Dr. Ebersole

Spleen

HOSPITAL NAME

Scanvet

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.

REFERRING VET

Dr. Perkins

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Liver

The **liver** revealed coarse architecture with heterogenous parenchymal changes and increased portal markings with irregular contour and subjectively subnormal size. The gallbladder and common bile duct were unremarkable.

DATE

5/12/22



PATIENT

Gastrointestinal

Henry Varney

The **stomach** was filled with ingesta. The intestines were 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.

SPECIES

Canine

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Labrador Retriever

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.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

Fibrosing cholangiohepatitis, non-specific.

AGE

4 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Copper storage and acute on chronic insult is possible. Mushroom toxicity or other insult is possible. Primary copper storage may be an issue given the breed and age. Core liver biopsy and quantitative copper evaluation is indicated for further definition.

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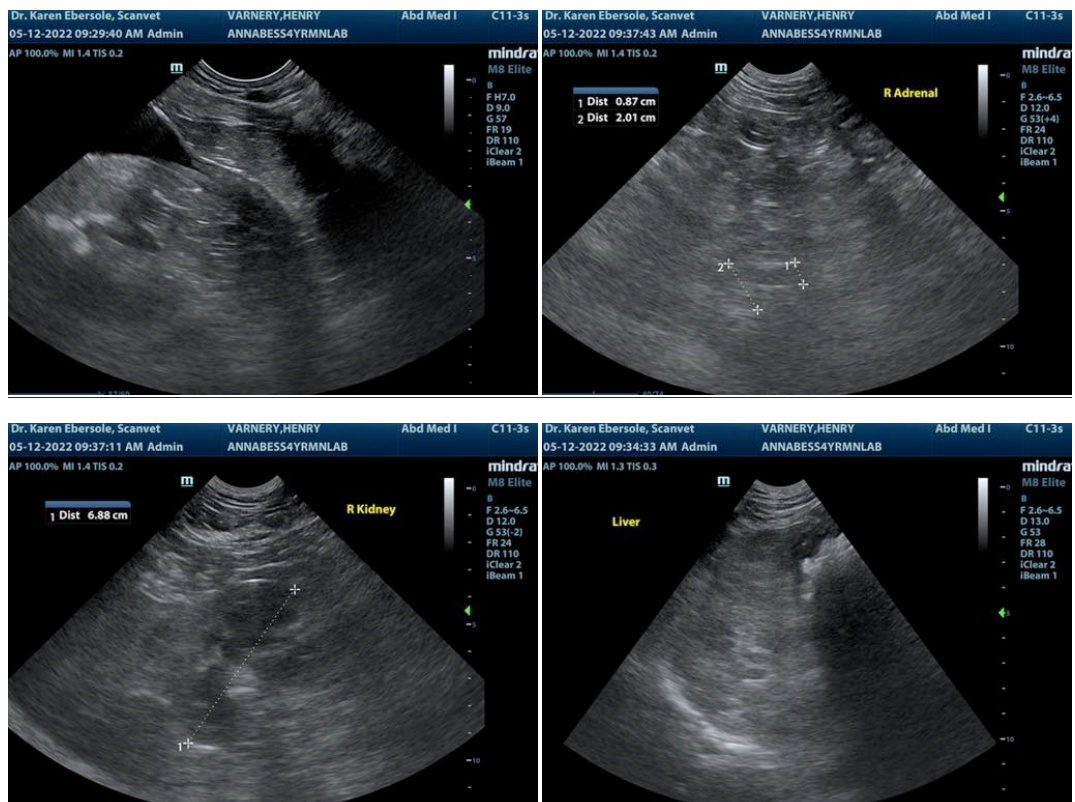
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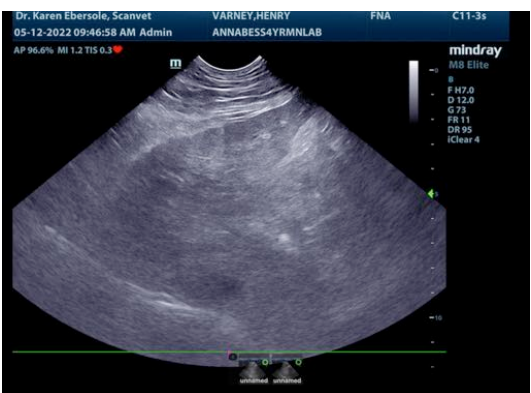
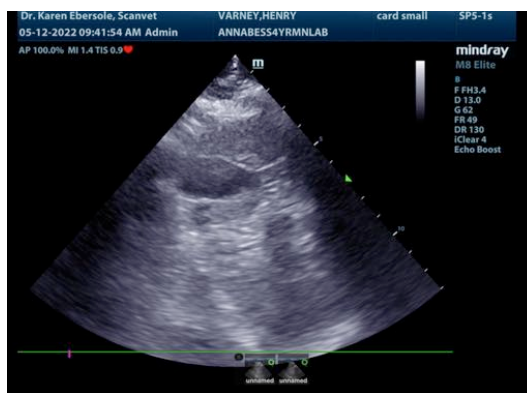
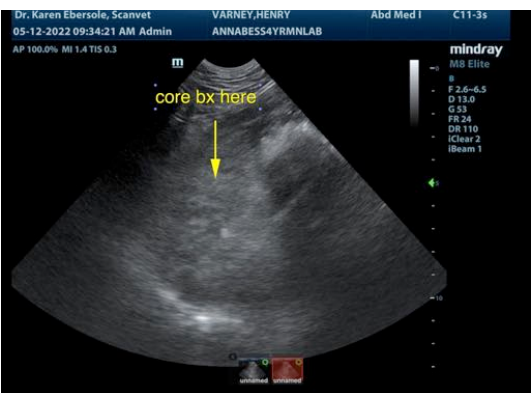
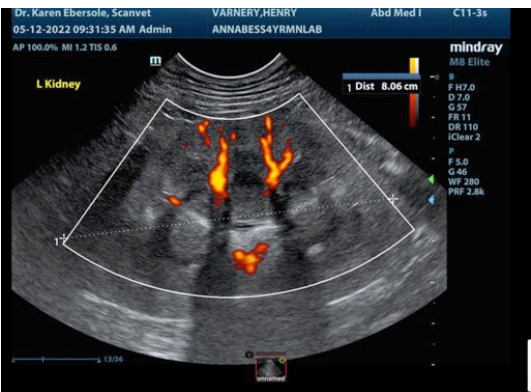
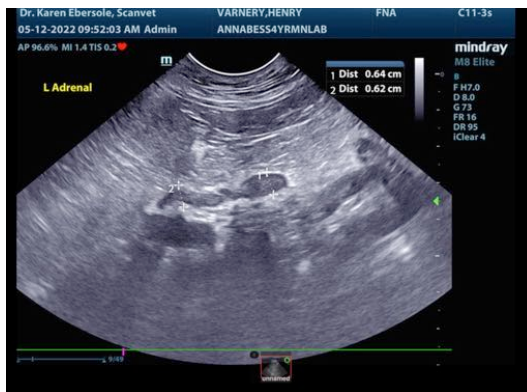
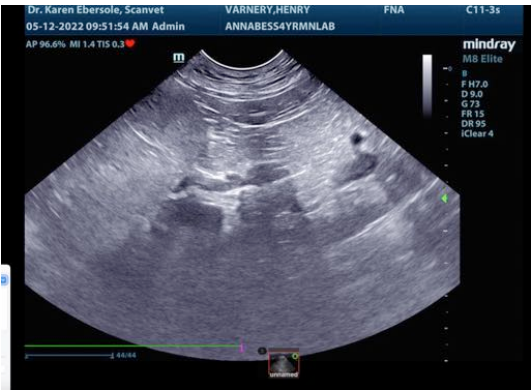
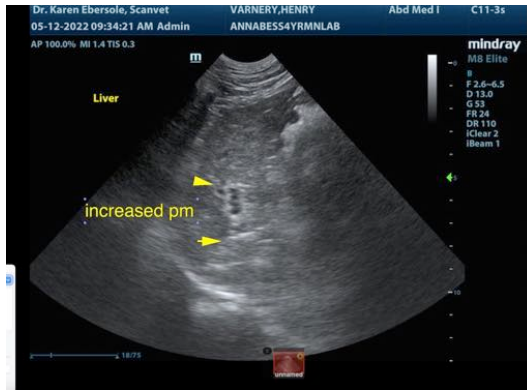
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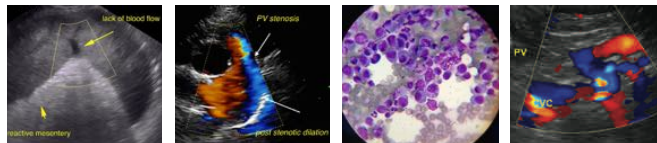
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

Labrador Retriever

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

SEX

Neutered male

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