

**DATE**

5/13/22

**PRESENTING CLINICAL SIGNS**

History: Owners report that patient wasn't eating well prior to dental in January. No improvement post in all. Recent inappetence is much worse. No significant improvement with entyce. Only minimum weight loss (0.8lb) seen since January.

**PATIENT**

Zoey Ames

Current Medications: Zonisamide 75mg BID- years, Entyce 27mg SID.

Lab Results: Low cholesterol. Mild neutrophilia, mild monocytosis.

**SPECIES**

Date of Previous IntraPet Ultrasound: No previous.

Canine

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**BREED**

Imaging Performed By: Stephanie Pearce RDCS, RVT.

Italian Greyhound

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****SEX**

Spayed Female

**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.

**AGE**

2/27/13

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.

**WEIGHT**

19.9 Pounds

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 5.21 cm. The left kidney measured 4.97 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 1.68 cm x 0.52 cm at the cranial pole and 0.51 cm at the caudal pole. The left adrenal gland measured 2.24 cm x 0.46 cm at the caudal pole and 0.47 cm at the cranial pole.

**HOSPITAL NAME**

Festival VC

**Spleen**

The **spleen** revealed minor age-related changes. A hyperechoic subcapsular rim was noted in the spleen, likely owing to a history of splenitis. Mild undulating contour noted. FNA of the spleen indicated to ensure a more significant disease is not present.

**REFERRING VET**

Dr. Davies

**Liver**

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia. An isoechoic nodule was noted in the left lateral liver, measuring 1.08 cm x 0.71 cm.

**INVOICE**

15185

**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**

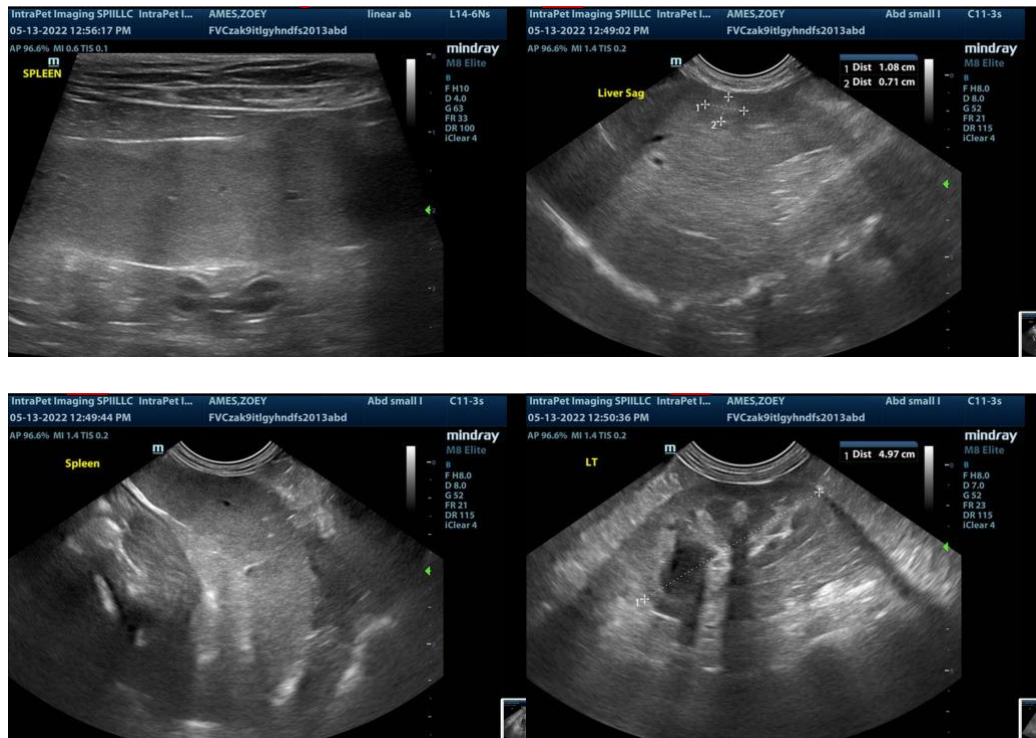
There is a possibility of some low-grade **pancreatic** changes, however, the changes were minor. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.

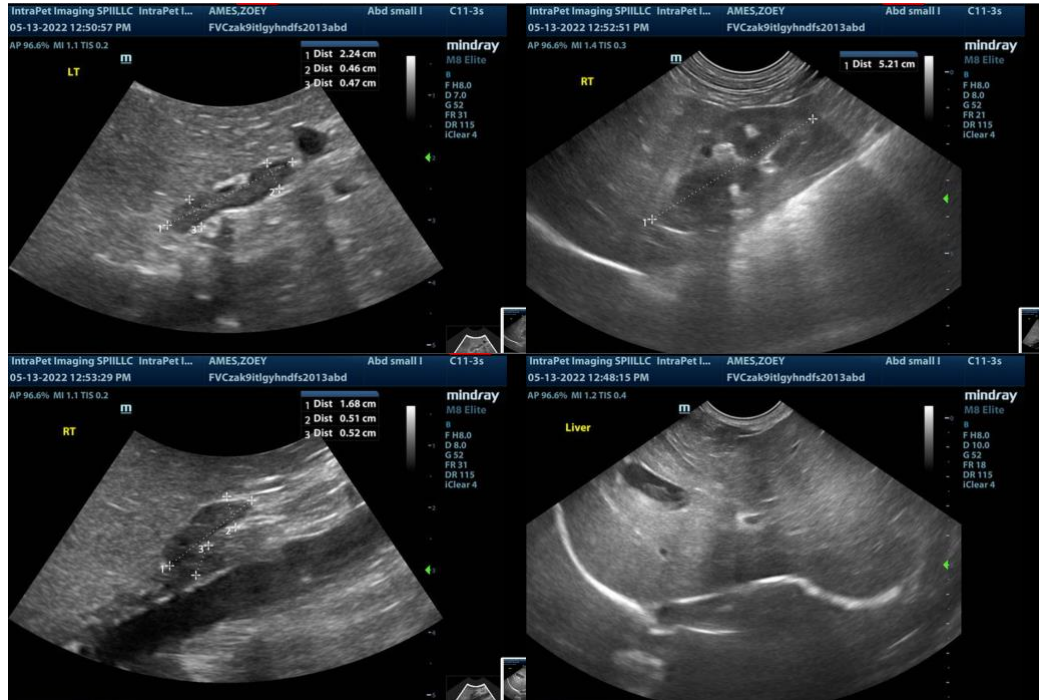
### **ULTRASONOGRAPHIC FINDINGS**

- Largely age-related abdominal changes
- Mild hepatomegaly/benign hepatopathy
- Minor age-related splenic changes with undulating contour and hyperechoic subcapsular rim.
- Possible low-grade pancreatic changes

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

Other causes of hyporexia, such as orthopedic, CNS or thoracic disease should be considered. FNA of the spleen indicated to ensure a more significant disease is not present. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.





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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