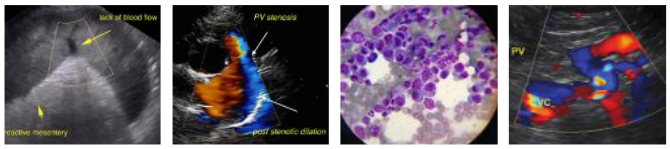
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Gingersnap Hugendubler

SPECIES

Canine

BREED

Chow Chow X

SEX

Spayed Female

AGE

11 Years

WEIGHT

64 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

Dr. Laura Campbell

INVOICE

37687

DATE

5/17/22

PRESENTING CLINICAL SIGNS

Ginger is a 11.5 year old FS Chow Chow mix. Her owner has recently reported that she is panting all the time when active and when resting. She has a history of back pain and arthritis. She is currently taking Carprofen and is fed Hill's j/d diet for joint support. Her heart and lungs auscultated normally. Her owner wishes to be proactive, so she is pursuing a general senior work up. There were no concerns with her CBC, T4, chemistry or electrolytes. Additional recommended diagnostics included 3-view thoracic radiographs, abdominal U/S, UA with UPC, and BP (today was 139/82, 137/82, 135/80)

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 **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 6.32 cm. The left kidney measured 6.77 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 left adrenal gland measured 2.6 cm x 0.86 cm at the cranial pole and 0.62 cm at the caudal pole. The right adrenal gland measured 3.95 cm x 1.2 cm at the cranial pole and 0.60 cm at the caudal pole.

Spleen

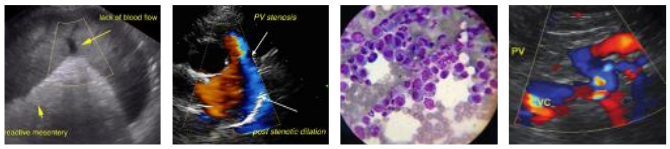
The **spleen** was mildly enlarged and slightly heterogeneous. No disruption of architecture. The spleen was folded upon itself cranially.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented a mild amount of sand accumulation and dependent debris, not pathological.

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.



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Pancreas

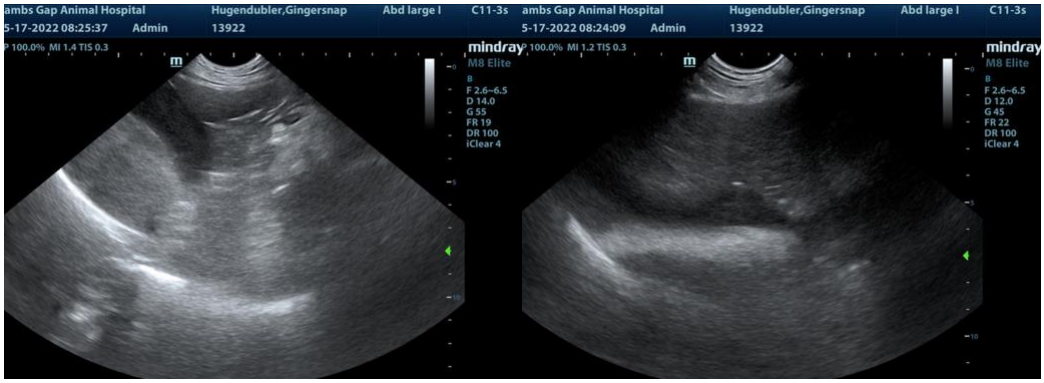
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

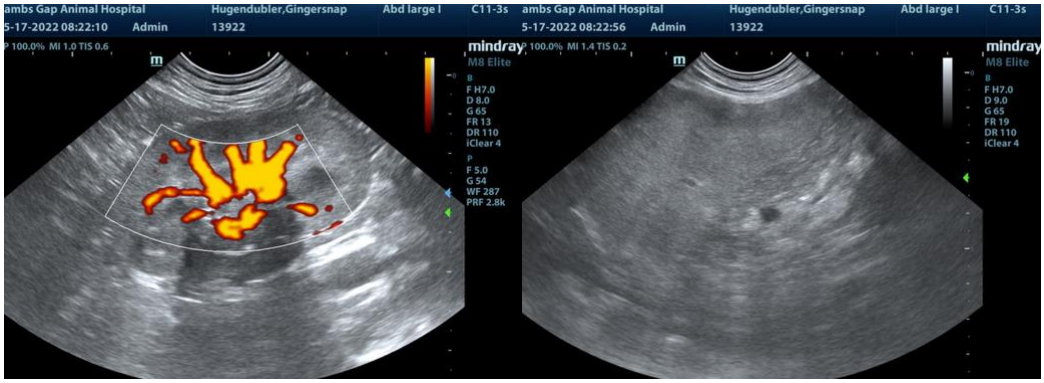
ULTRASONOGRAPHIC FINDINGS

- Minor splenic enlargement with micronodular hyperplasia pattern
- Age related hepatic changes with biliary sand

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of visceral disease responsible for the clinical signs. Structurally, the adrenal glands appear unremarkable. However, if the patient appears Cushingoid, and USG is <1.020, then workup for PDH/Cushing's would be appropriate. Pain related, thoracic or CNS/cognitive disease should be considered.





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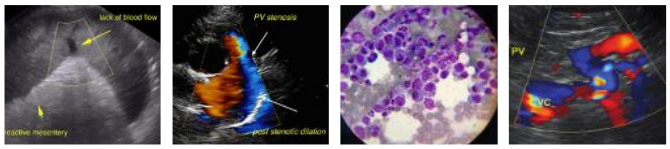

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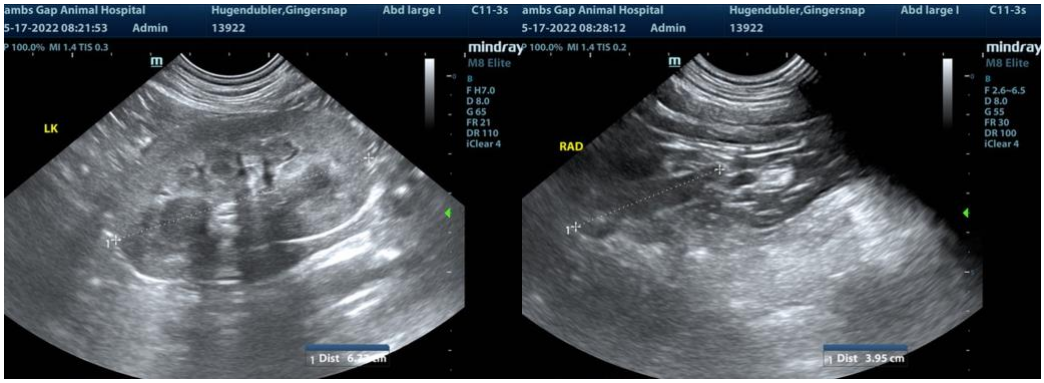

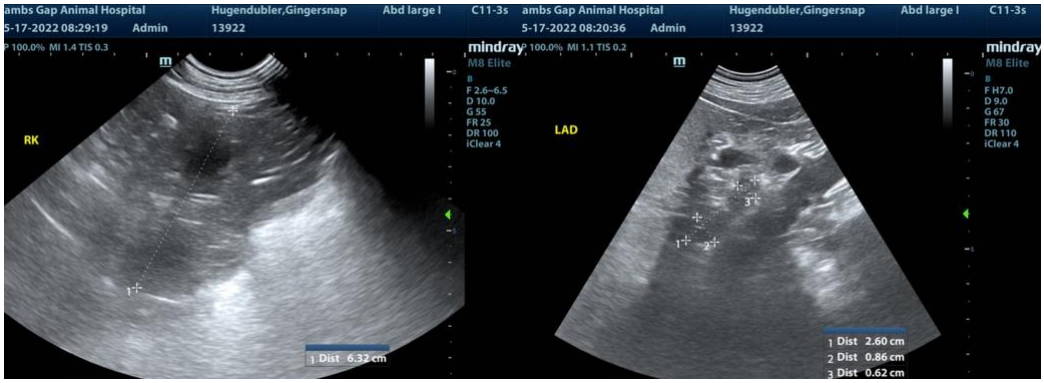

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com