

**DATE**

5/17/22

**PATIENT**

Penny Lane Highland

**SPECIES**

Canine

**BREED**Chesapeake Bay  
Retriever**SEX**

Spayed Female

**AGE**

6/16/16

**WEIGHT**

67.2 Pounds

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**IMAGING  
PERFORMED BY**

Rachel Brillhart RDMS

**HOSPITAL NAME**Animal Emergency  
Hospital**REFERRING VET**

Dr. Martinoli

**INVOICE**

37688

**PRESENTING CLINICAL SIGNS**

Has been boarded for past 6 days. Unsure if she has had or regular diet while there. Last night had a small altercation with another dog at the kennel; no injuries. Today workers at kennel saw her vomit clear liquid, then seemed to collapse onto her side. Later she did that again. Owner (daughter) did not see any twitching or seizure like activity when she picked her up and kennel did not describe any activity besides collapse.

Current Medications: Buprenorphine, Ampicillin, Cerenia.

Lab Results: ALKP 375.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**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 left kidney measured 6.44 cm. The right kidney measured 7.11 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 2.85 cm x 0.68 cm at the cranial pole and 0.79 cm at the caudal pole. The right adrenal gland measured 3.27 cm x 0.80 cm at the caudal pole and 0.86 cm at the cranial 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** revealed slight increased portal markings and coarse architecture. The gallbladder and common bile duct were unremarkable. Non-specific presentation.

**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

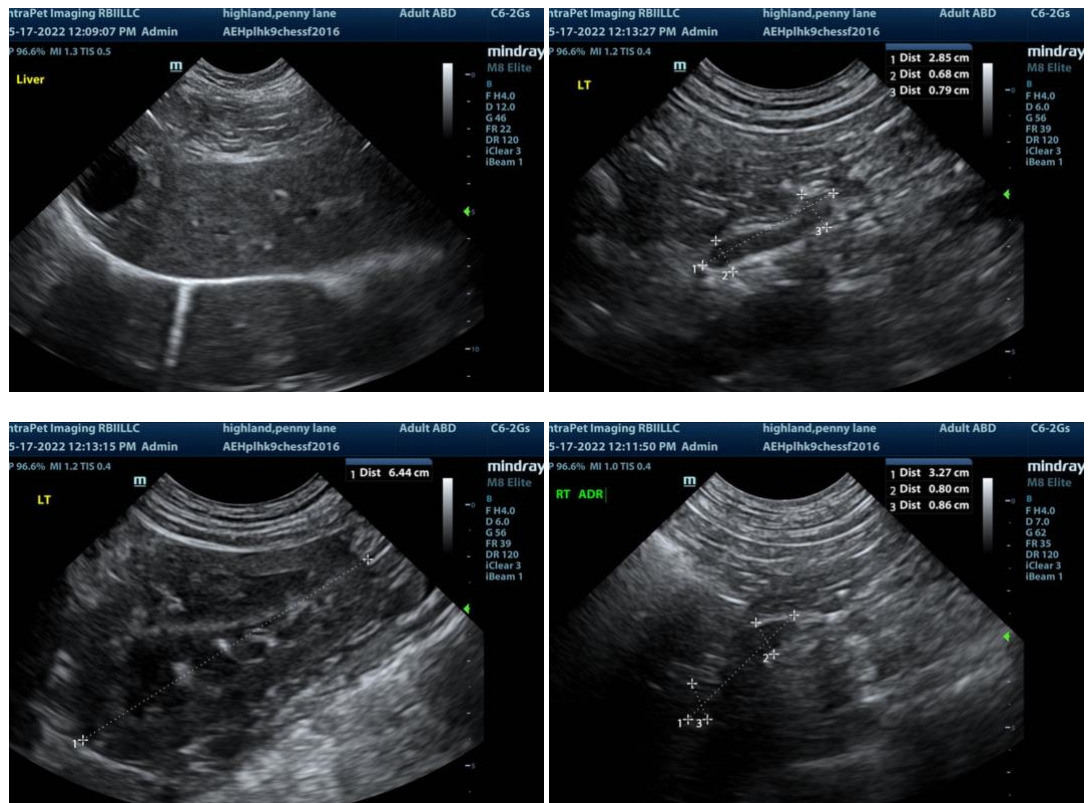
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

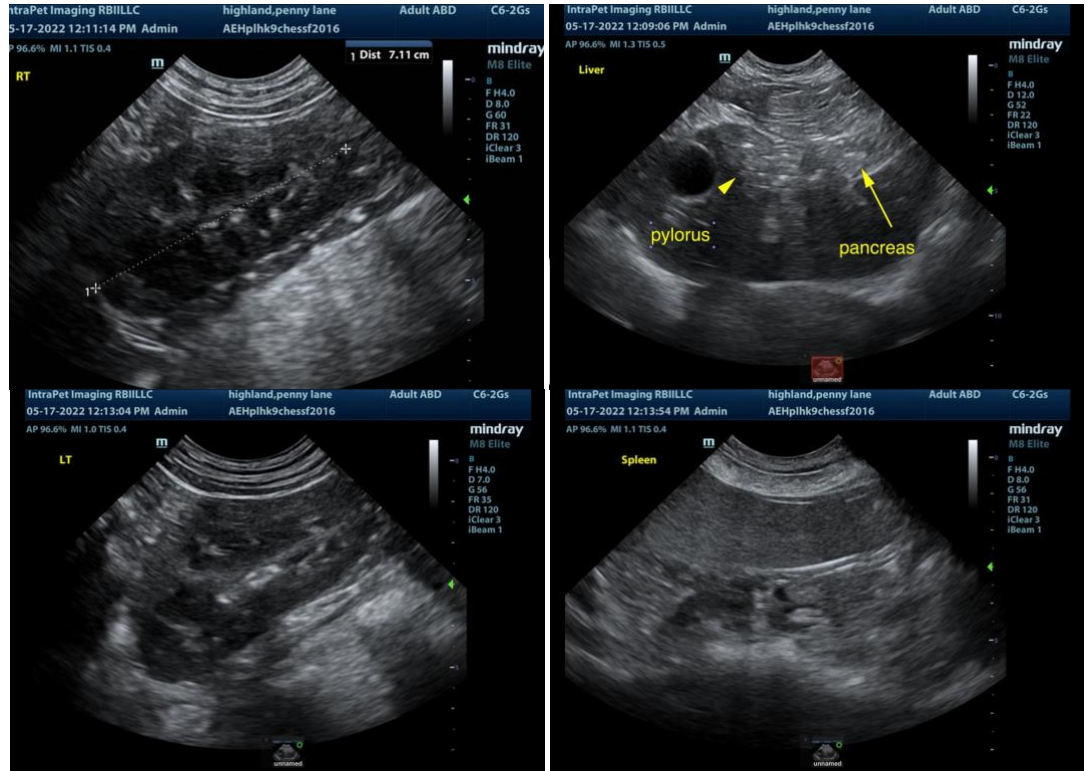
## ULTRASONOGRAPHIC FINDINGS

- Mild hepatic remodeling, non-specific, no other evidence of pathology

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No specific therapy indicated.





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.

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