



**PATIENT**

Beemer Patel

**PRESENTING CLINICAL SIGNS**

History: WT LOSS PU/PD AZOTEMIA DILUTED URINE UTI NO ANEMIA ELEVATED PHOSPHORUS

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Welsh Terrier

**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.

**SEX**

MN

The kidneys revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present.

**AGE**

13 yr

The left kidney measured 3.86 cm in length. The right kidney measured 3.9 cm in length.

**WEIGHT**

10.5 lb

**Adrenal Glands**

The right adrenal gland was enlarged and irregular with enhanced surrounding mesentery. The right adrenal gland measured 1.1 cm cranial pole width by 0.92 cm caudal pole width.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The left adrenal gland was enlarged.

**IMAGING PERFORMED BY**

Dr. Barnea

**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.

**HOSPITAL NAME**

Tenaflly Vet Center

**Liver**

The liver images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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 some mild dependent sludgy debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

**REFERRING VET**

Dr. Barnea

**INVOICE**

10650ag

**Gastrointestinal**

**DATE**

05/23/2022

The pylorus in this patient presented with concentric hypertrophy and hypertrophy of the muscularis and mucosal layer. The lumen was empty. The small intestine and the colon were unremarkable.



## PATIENT

Beemer Patel

## SPECIES

Canine

## BREED

Welsh Terrier

## SEX

MN

## AGE

13 yr

## WEIGHT

10.5 lb

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Dr. Barnea

## HOSPITAL NAME

Tenafly Vet Center

## REFERRING VET

Dr. Barnea

## INVOICE

10650ag

## DATE

05/23/2022

## Pancreas

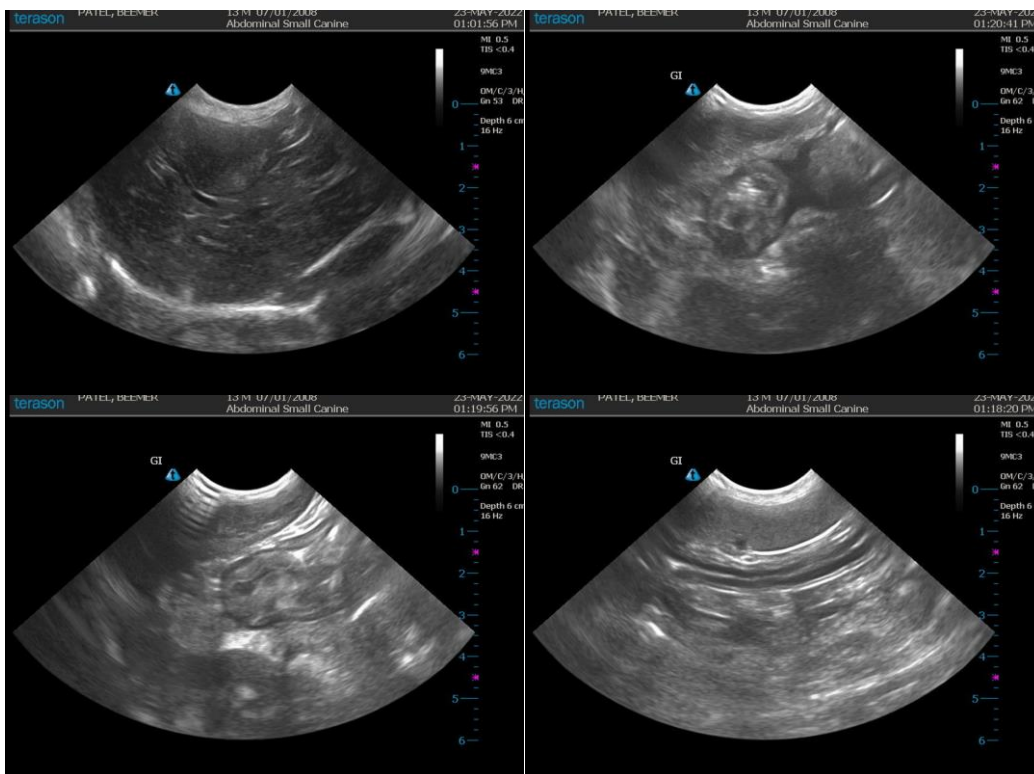
The base and limbs of the pancreas were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

- Bilateral adrenal hypertrophy-concern for PDH or possibility of emerging right adrenal neoplasia
- Benign geriatric abdomen otherwise with pyloric hypertrophy

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Based on the adrenal presentation, a workup for Cushing's disease is indicated.





**PATIENT**

Beemer Patel

**SPECIES**

Canine

**BREED**

Welsh Terrier

**SEX**

MN

**AGE**

13 yr

**WEIGHT**

10.5 lb

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Dr. Barnea

**HOSPITAL NAME**

Tenafly Vet Center

**REFERRING VET**

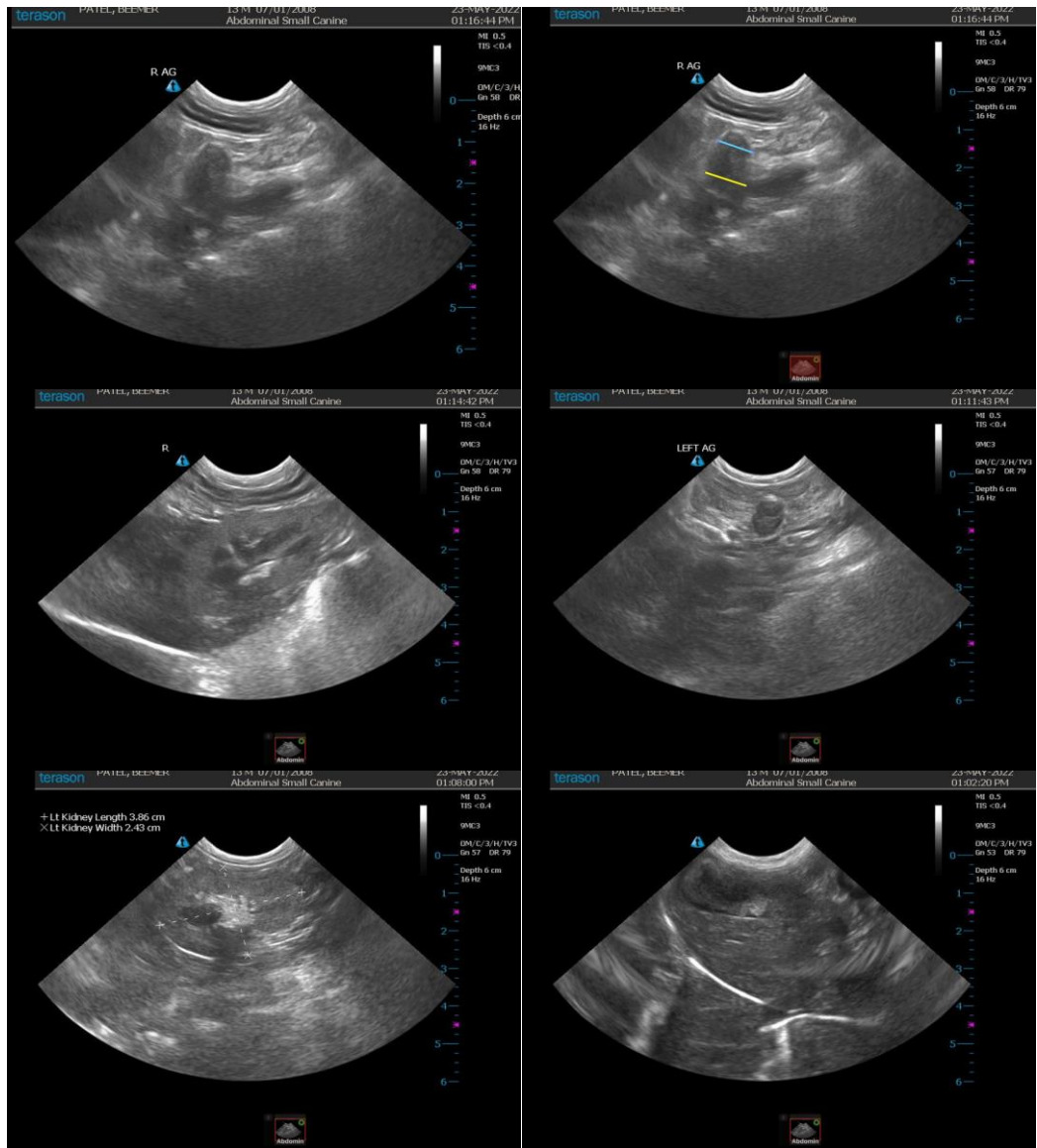
Dr. Barnea

**INVOICE**

10650ag

**DATE**

05/23/2022



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.

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