

**DATE**

5/26/22

PATIENT

Casey Dodge

SPECIES

Canine

BREED

Retriever X

SEX

Spayed Female

AGE

5/23/10

WEIGHT

78.8 Pounds

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

Andi Parkinson RDMS

HOSPITAL NAME

Everhart Vet Hospital

REFERRING VET

Dr. Rubinstein

INVOICE

38030

PRESENTING CLINICAL SIGNS

Pt presents for persistent worsening cough of 1 month. primary vet tried antibiotics, steroids, cough tabs, zyrtec nothing seems to help. Pt also has known heart murmur. Also has elevated liver values.

Current Medications: Hydrocodone 5mg BID - few days, Prednisone 20mg BID - 2 wks, Cough tabs - 2 wks, Zyrtec 20mg 2 wks

Lab Results: ALP 900, ALT 300, GGT 13, Neut 13K.

Radiographs: Mild enlarged right heart, no mets, no CHF, no pneumonia

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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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. The right kidney measured 7.35 cm. The left kidney measured 7.45 cm.

Adrenal Glands

The **right adrenal gland** revealed an expansive nodule measuring 2.33 cm x 1.39 cm. The right adrenal gland measured 3.16 cm x 1.05 cm at the cranial pole and 0.80 cm at the caudal pole.

The **left adrenal gland** revealed a nodule measuring 0.63 cm x 0.90 cm. The left adrenal gland measured 2.3 cm x 0.74 cm at the cranial pole and 0.59 cm at the caudal 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** 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 some dependent 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.

Gastrointestinal

The **stomach** was filled with shadowing material, consistent with post-prandial presentation. However, if the patient was NPO, foreign matter is possible. The small intestine and colon were unremarkable.

Pancreas

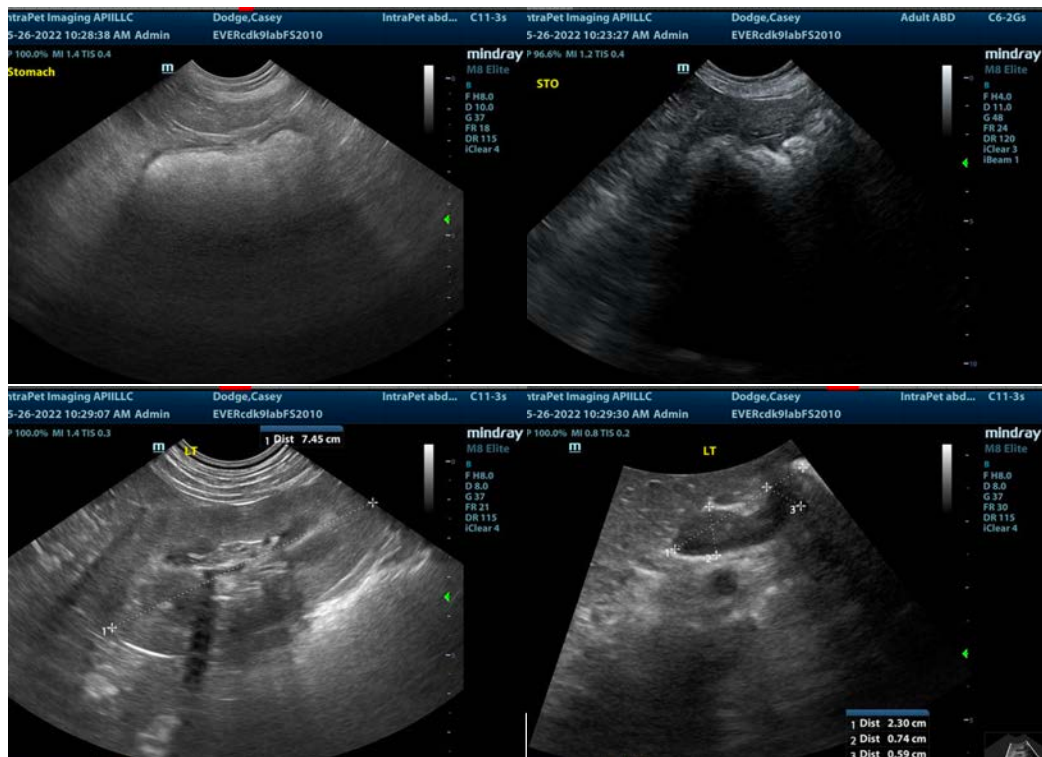
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

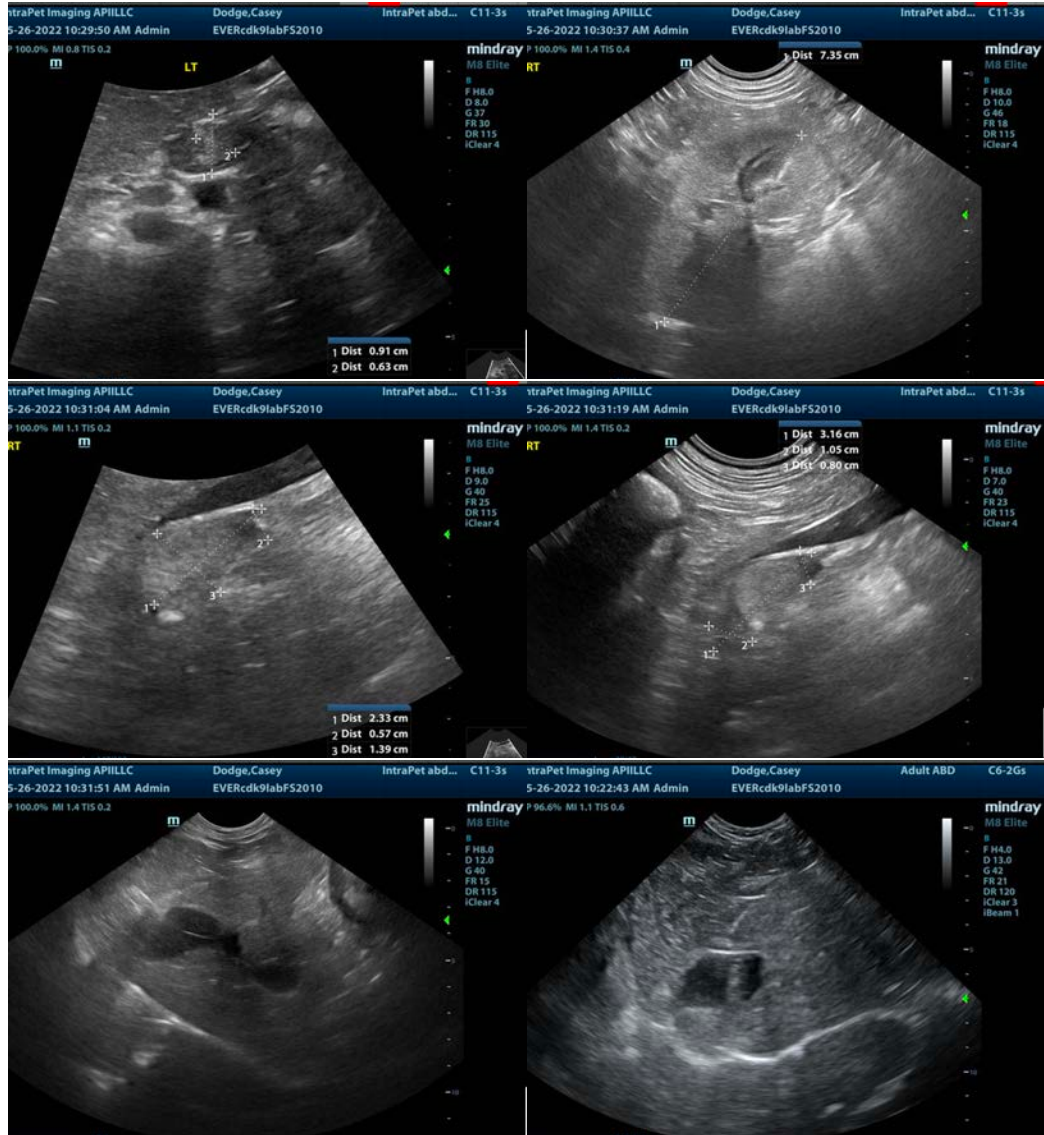
ULTRASONOGRAPHIC FINDINGS

- Non-specific mild inflammatory hepatopathy – largely age related changes.
- Bilateral adrenal nodules – likely adenomas, mild potential for carcinoma of the right adrenal, or pheochromocytoma less likely.
- Full stomach – consistent with post-prandial presentation, yet soft foreign matter cannot be ruled out depending on when the patient ate prior to the sonogram.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recheck sonogram in 3-4 weeks of the right adrenal gland and vena cava to assess for any progression.





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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