



PATIENT PRESENTING CLINICAL SIGNS

Lucifer Naumov
acute onset lethargy, diarrhea, fever
Abnormal PE/Chem/CBC/UA Results: nsf

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Mixed

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 prostate was uniform at 2.4 cm.

SEX

Intact Male

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 7.74 cm. The left kidney measured 7.35 cm.

AGE

1 Year

Adrenal Glands

WEIGHT

79.4 Pounds

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 3.04 cm x 0.49 cm at the caudal pole and 0.42 cm at the cranial pole. The right adrenal gland measured 3.32 cm x 1.35 cm at the cranial pole and 0.48 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV

Spleen

The **spleen** was folded upon itself cranially, uniform, mildly enlarged, likely reactive state.

DABVP, Cert. IVUSS

Liver

IMAGING PERFORMED BY

Diane McFadden, RVT

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

HOSPITAL NAME

Rockaway AH

Gastrointestinal

REFERRING VET

Dr. Maniar

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.

INVOICE

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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.

DATE

5/27/22

ULTRASONOGRAPHIC FINDINGS

- Uniform splenic enlargement – likely reactive state.



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HOSPITAL NAME

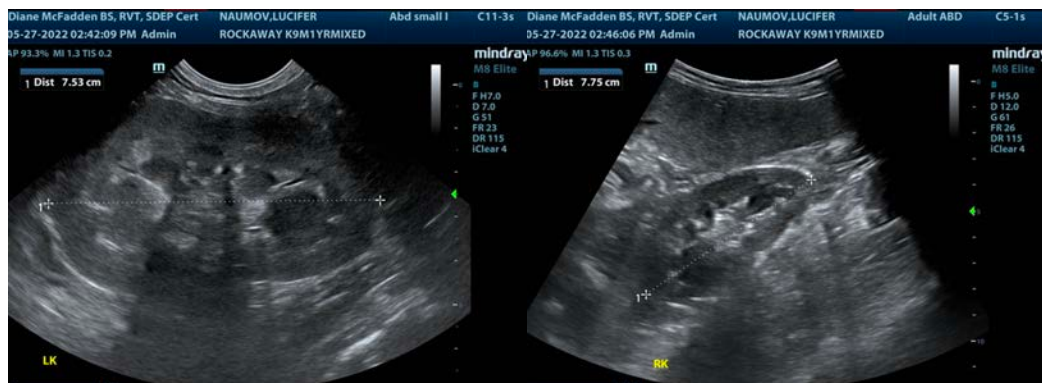
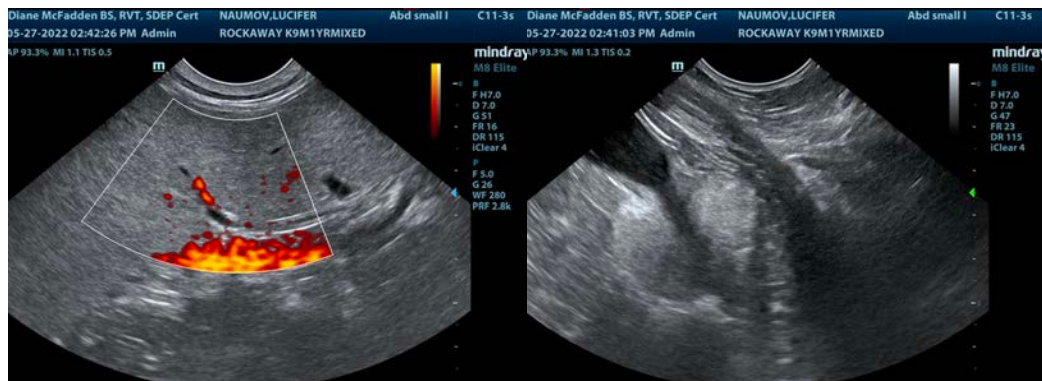
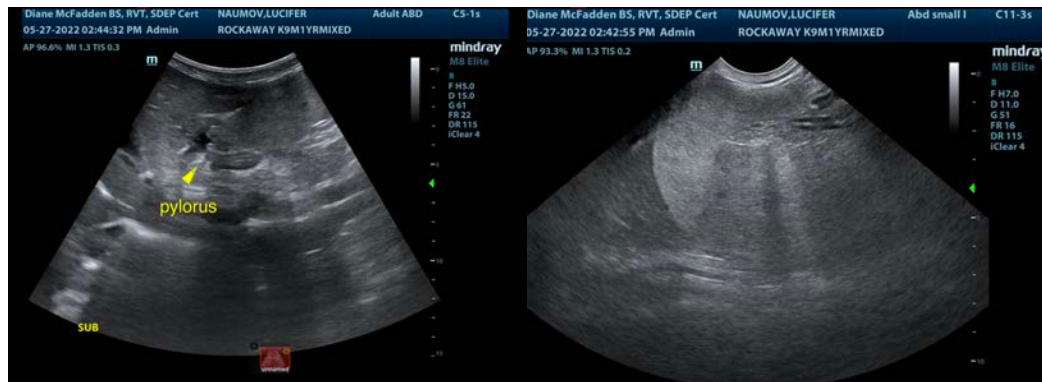
Rockaway AH

REFERRING VET

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of neoplasia or overt cause of the clinical signs. Enterotoxins, systemic infection such as viral, lyme disease, rickettsial disease or similar should be considered. Clinical trial of Doxycycline/Clindamycin combination could be considered from an empirical standpoint.



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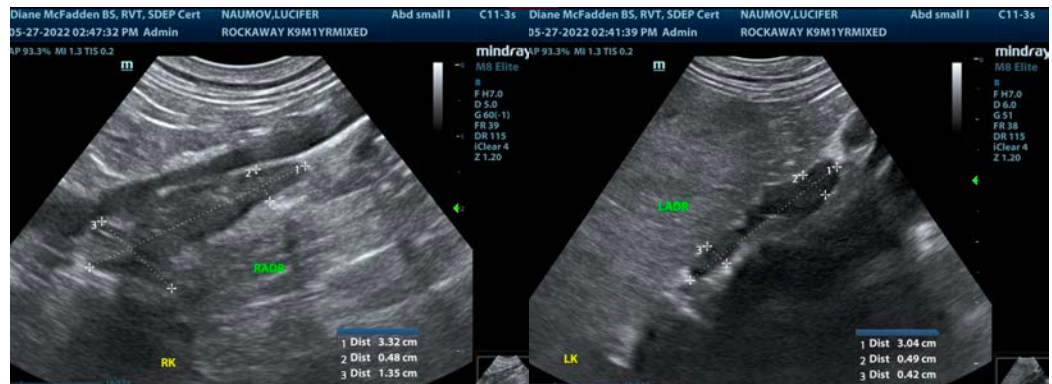
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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