



PATIENT

Lucky Hopkins

PRESENTING CLINICAL SIGNS

Controlled Cushing's. Follow up on bladder polyp and right ureteral papilla.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a persistent polyp at the ureteral papilla at 1.17 cm, similar to the prior sonogram. The prostate measured 1.0 cm.

BREED

Mix

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 6.22 cm. Anechoic cyst noted at the caudal pole of the left kidney measuring 2.25 cm.

SEX

Neutered Male

Adrenal Glands

AGE

8 Years

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins were noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The right adrenal gland measured 3.7 cm x 1.74 cm at the cranial pole and 0.99 cm at the caudal pole. The left adrenal gland measured 3.34 cm x 1.3 cm at the cranial pole and 1.42 cm at the caudal pole. Mineralization noted on the left adrenal gland.

WEIGHT

Spleen

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

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Liver

Exam of the cranial abdomen demonstrated excessive **liver** size, swollen contour, with conserved uniform architecture. Parenchymal echogenicity was diffusely isoechoic to the spleen and falciform fat. Minor excessive GB debris was noted with the presence gall bladder dilation and precipitate without the overt formation of mucocele but this may be an issue in the future. This type of liver presentation typically is associated with slow and gradual SAP elevations with low-grade ALT rise. USG-FNA sampling is encouraged if more aggressive LE profiles are present such as ALT > 200 or rapid rise in SAP. These presentations are usually reactive hepatopathies owing to other disease processes either endocrine (Diabetes, Hypothyroidism, Cushing's disease), "antigen surveillance" from the gut/pancreas, or idiopathic breed predisposed progressions.

HOSPITAL NAME

Franklin Lakes AH

REFERRING VET

Dr. Greenhut

Gastrointestinal

INVOICE

37454

The **stomach** was filled with progressively shadowing material measuring up to 5.0 cm, consistent with grass accumulation or similar.

DATE

5/6/22



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Pancreas

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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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Mix

- Persistent bladder polyp, normal urinary tract otherwise.
- Bilateral adrenal hypertrophy with irregular mineralization of the left adrenal
- Benign hepatopathy
- Grass type density in the stomach, non-obstructive

SEX

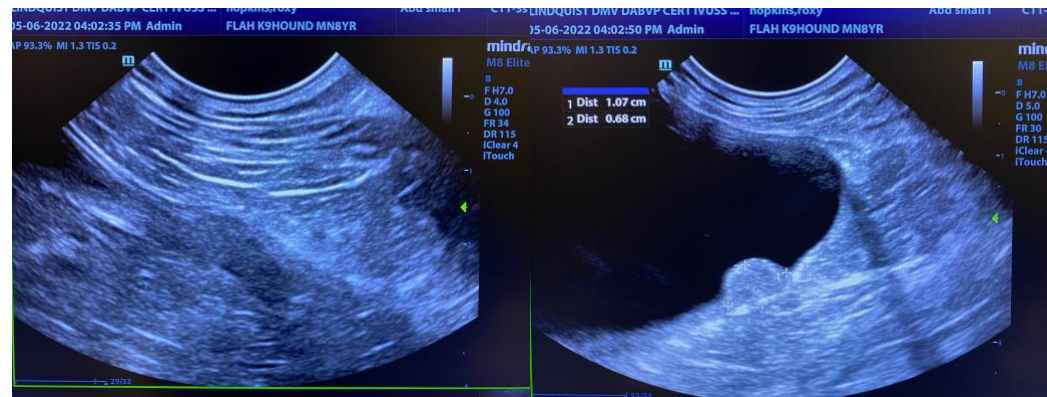
Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No progression from prior sonogram. Recheck sonogram in 6 months, earlier if clinical signs initiate regarding the urinary tract or gastrointestinal tract.

AGE

8 Years



WEIGHT

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SPECIES

Canine

BREED

Mix

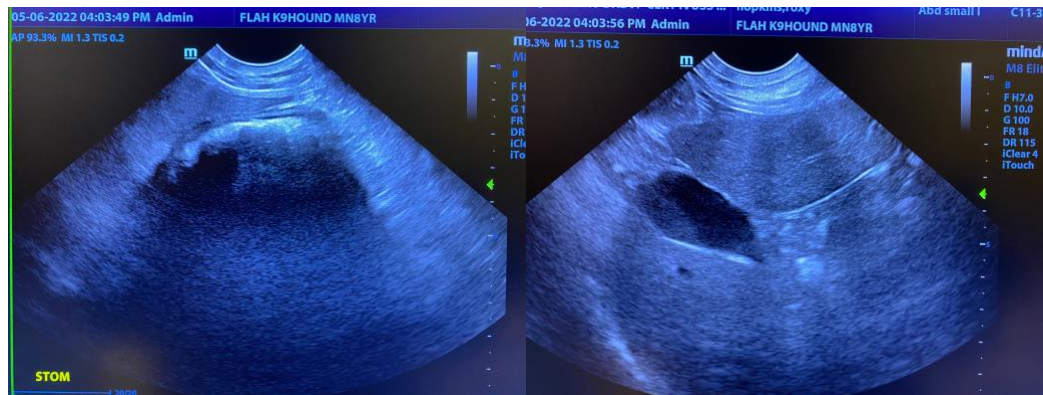
SEX

Neutered Male

AGE

8 Years

WEIGHT



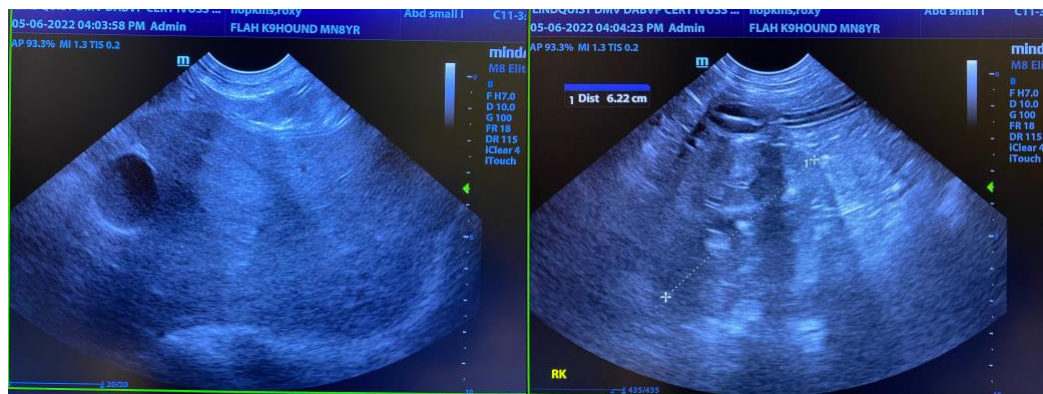
SEX

Neutered Male

AGE

8 Years

WEIGHT

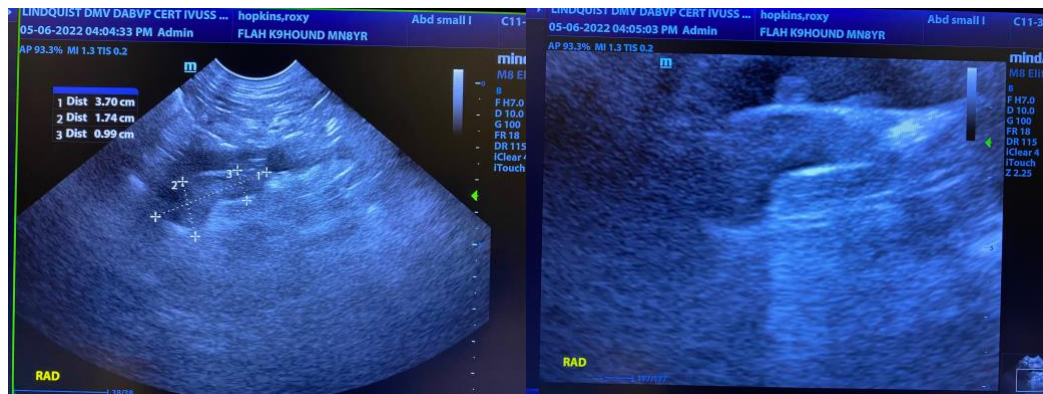


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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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