



PATIENT

Casey Mayhew

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Male

AGE

10 years

WEIGHT

50.5 pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Evanna

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

Dr. Hallihan

INVOICE

10547ag

DATE

05/09/2022

PRESENTING CLINICAL SIGNS

History: nodules on spleen
Abnormal PE/Chem/CBC/UA Results: (5/7/22) ALT - 291 , ALK PHOS - 246 (11/08/21) ALT- 243.
ALK PHOS - 154

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 minor 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 left kidney measured 6.3 cm in length. The right kidney measured 6.78 cm in length.

Adrenal Glands

The left adrenal gland was mildly enlarged similar to the prior sonogram. The right adrenal gland was of normal shape, size, position and echogenicity for this breed measuring 9 mm maximum width.

Spleen

The spleen presented with subtle heterogenous parenchymal changes with no evidence of significant disease.

Liver

The liver images submitted revealed uniform vacuolar hepatopathy pattern with occasional heterogeneous parenchymal changes. The gallbladder appears improved regarding the excessive sludge with minor micropolyloid changes noted.

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.



PATIENT

Casey Mayhew

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Male

AGE

10 years

WEIGHT

50.5 pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Evanna

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

Dr. Hallihan

INVOICE

10547ag

DATE

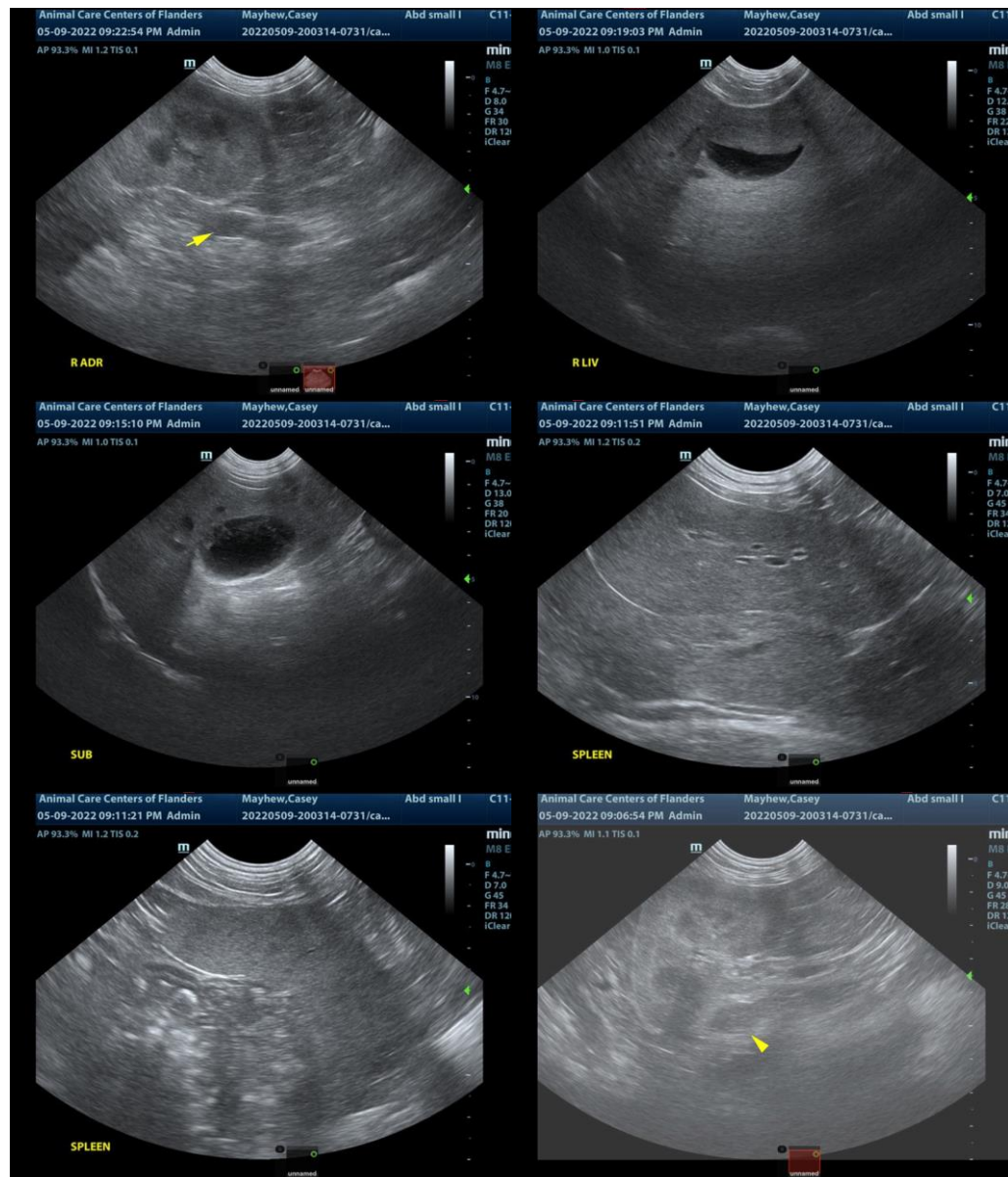
05/09/2022

ULTRASONOGRAPHIC FINDINGS

- Benign hepatopathy-stable
- Improved gallbladder presentation
- Age related splenic and renal changes
- Mild bilateral adrenal hypertrophy
- Large amount of abdominal fat

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If the patient appears Cushingoid and the USG >1.020 then a workup for PDH is indicated. The liver presentation is likely due to reactive hepatopathy given the patient history. A diet change to a hydrolyzed diet and 10 days of Metronidazole with reassessment of liver values in 3 weeks could also be considered from an empirical standpoint.





PATIENT

Casey Mayhew

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Male

AGE

10 years

WEIGHT

50.5 pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Evanna

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

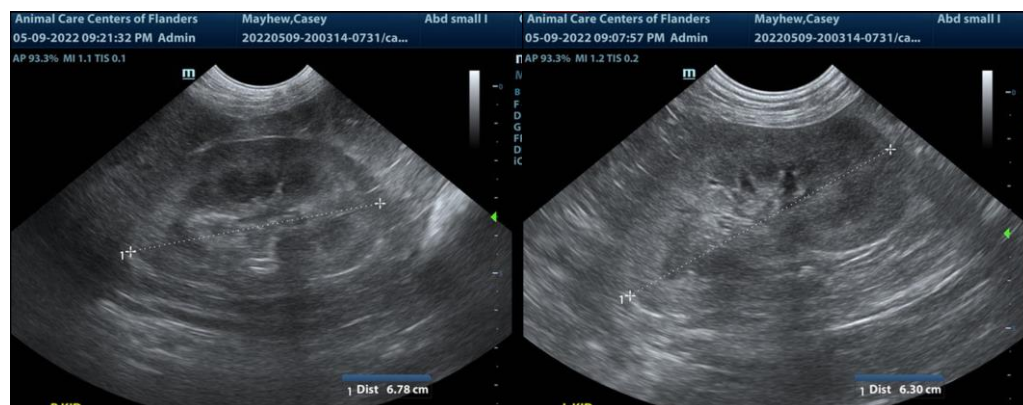
Dr. Hallihan

INVOICE

10547ag

DATE

05/09/2022



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