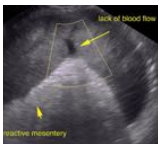
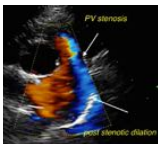
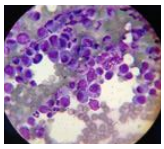
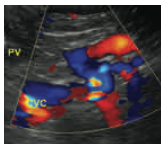

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PATIENT

Kegler Bacon

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered male

AGE

12 years

WEIGHT

31.8 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Mergl

HOSPITAL NAME

Niagara Falls Animal Medical Centre

REFERRING VET

Dr. Mergl

INVOICE

30204

DATE

5/9/22

PRESENTING CLINICAL SIGNS

HISTORY: -Presented for wellness exam, vaccines, and 4dx wellness on May 6, 2022 -Doing well at home as per O -Has some difficult with stairs but this has been normal for him and O believes due to age. -No v/d/c/s -O has no concerns. PAST MEDICAL HISTORY: hx of allergies and ear issues CURRENT MEDICATIONS/SUPPLEMENTS:(dose/frequency/last given) None
Abnormal PE/Chem/CBC/UA Results: BODY CONDITION SCORE: 6/9 TEMPERATURE: 37.6 c CARDIOVASCULAR: 106bpm, grade 3-4 pansystolic heart murmur with PMI over left apex, no arrhythmia. pulses strong and synchronous bilaterally RESPIRATORY: panting, eupenic, lung sounds clear and equal EENT: NSF, age related nuclear sclerosis OU NEUROLOGIC: WNL INTEGUMENT: multiple small raised massed in various locations of the body, previous FNA dx as lipomas ABDOMEN: Right side of caudal abdomen felt possible firm mass. non-painful on palpation MS: ambulatory x 4, crepitus in both stifles, stiff in hind limbs GENITOURINARY: NSF LN: possibly enlarged firm left popliteal lnn. submandibulars symmetrical BLOOD WORK ABNORMALITIES: -Mild hyperalbuminemia (40 g/L) -Mild elevation in ALT (279 U/L)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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 was noted. Ureteral papillae were normal.

The residual prostate was uniform and measured 0.78 cm.

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 5.4 cm. The right kidney measured 6.2 cm.

Adrenal Glands

The right **adrenal gland** was 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 right adrenal gland measured 0.68 cm at the cranial pole and 0.57 cm at the caudal pole. Mild, heterogenous parenchymal changes were noted at the caudal pole. The left adrenal gland measured 0.79 cm at the caudal pole and 0.54 cm at the cranial pole.

Spleen

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

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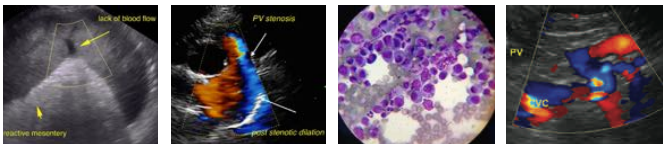

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Liver

The **liver** is subnormal in size. There was no obvious evidence of portosystemic shunting. The gallbladder and the common bile duct were unremarkable.

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.

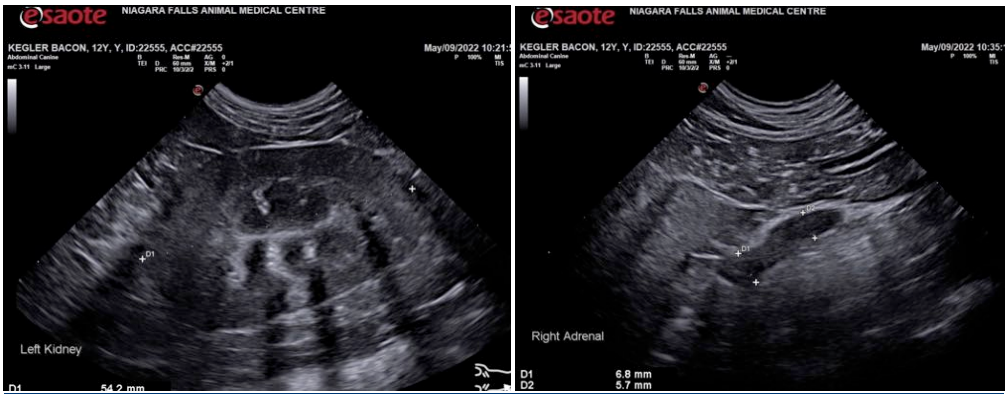
ULTRASONOGRAPHIC FINDINGS

Age related abdominal changes with mild microhepatica.

No evidence of significant parenchymal disease other than subnormal size in the liver.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bile acid profile is indicated. If the bile acids are elevated then further imaging of the portal hilus is warranted to assess portal vein to vena cava ratio. However, given that no evidence of bladder or renal calculi are present then portosystemic shunting is unlikely. Microvascular dysplasia/portal vein hypoplasia is a strong potential especially if bile acids are elevated.



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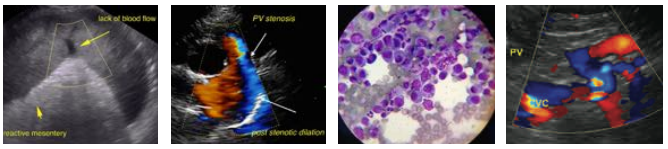

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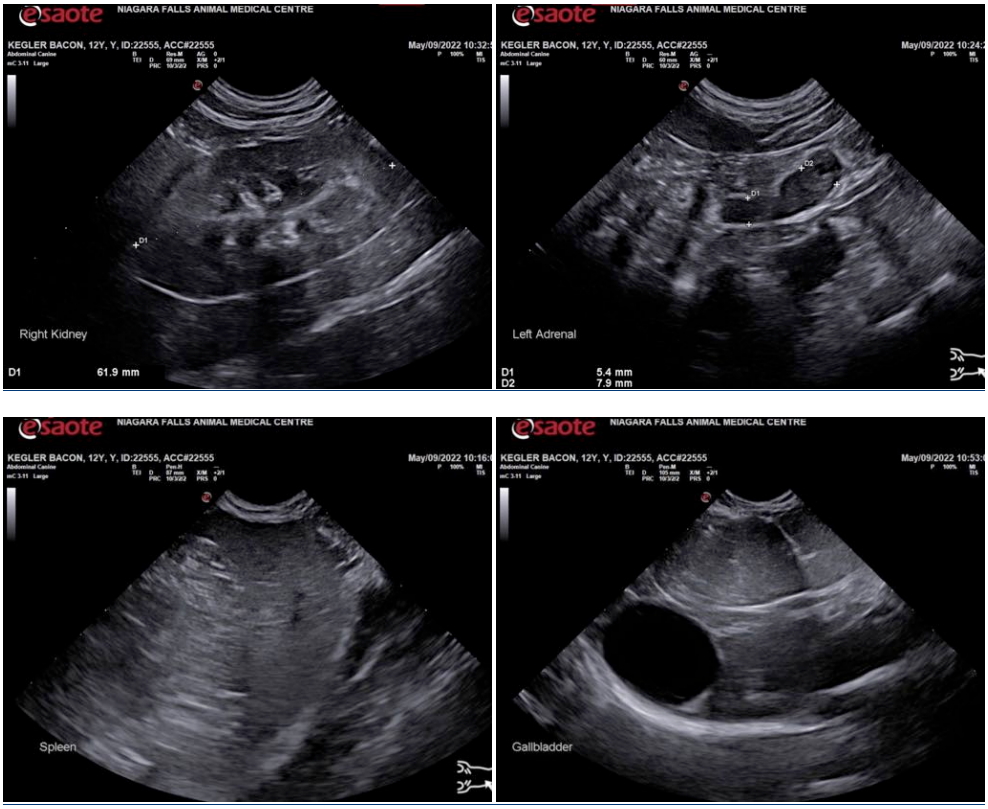

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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