



PATIENT

Blue Baron

RESENTING CLINICAL SIGNS

History: Evaluate for U bladder stones. Radiographs attached.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed thickened urethra with sand accumulation. The urethra measured up to 0.55 cm. Multiple calculi were noted. Grouping of which measured 3.5 cm. The largest calculus measured 0.88 cm and was non-obstructive at the time of the sonogram.

BREED

Husky Corgi Mix

SEX

Spayed Female

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 5.13 cm. The left kidney measured 4.9 cm.

AGE

2 years

Adrenal Glands

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 right adrenal gland measured 1.77 x 0.69 cm at the caudal pole and 0.49 cm at the cranial pole. The left adrenal gland measured 1.79 x 0.63 cm at the caudal pole and 0.31 cm at the cranial pole.

WEIGHT

38 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 was noted.

IMAGING PERFORMED BY

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Kenilworth AH

Liver

The **liver** was slightly subnormal in size. There is no overt portosystemic shunting. However, if bile acids are elevated then further imaging of the portal hilus "shunt hunt" would be recommended. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

REFERRING VET

Dr. Mansour

INVOICE

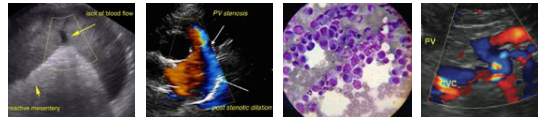
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Gastrointestinal

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.

DATE

6/14/22



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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

Bladder and urethral calculi, non-obstructive.

Husky Corgi Mix

Mild microhepatica.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

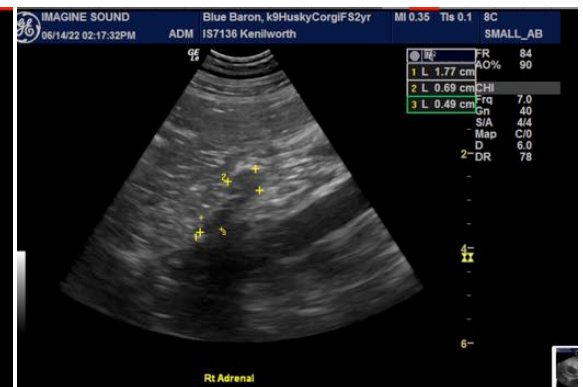
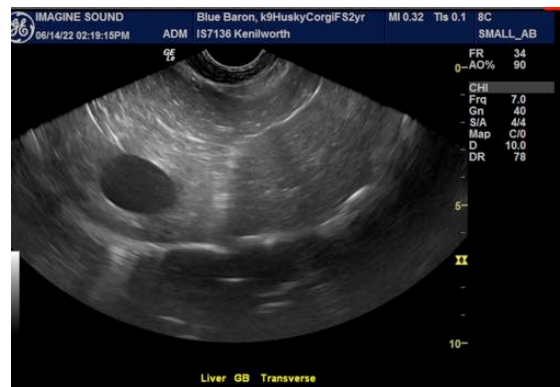
Bile acid profile is warranted to assess for possible causes of early calculus formation. If the bile acids are normal then cystotomy, stone analysis and culture are indicated. If the bile acids are elevated then further imaging of the portal hilus is warranted, likely under sedation.

AGE

2 years

WEIGHT

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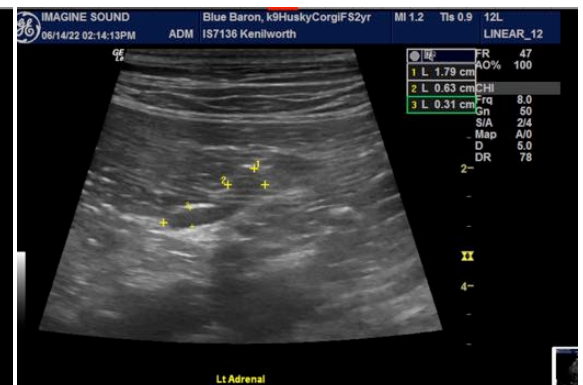
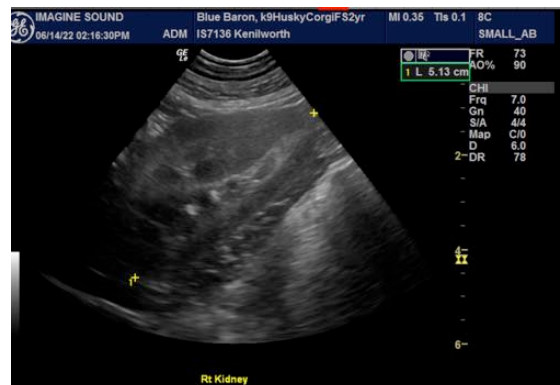
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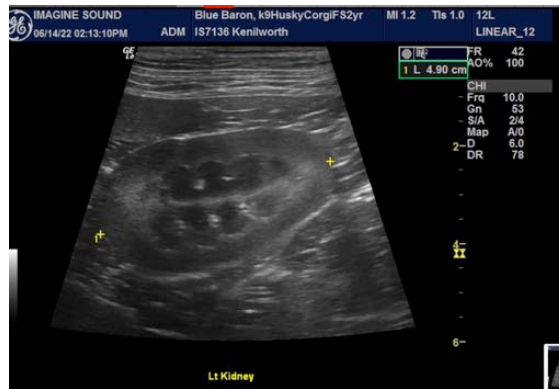
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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