



PATIENT

Chance Repka

SPECIES

Canine

BREED

Labrador Retriever X

SEX

Neutered Male

AGE

7 Years

WEIGHT

53 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Val Shumskaya

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

INVOICE

43144

DATE

6/14/23

PRESENTING CLINICAL SIGNS

Addison's dz, V+

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 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 6.06 cm. The left kidney measured 5.03 cm.

Adrenal Glands

The adrenal glands were flattened, expected for Addisonian state. The left adrenal gland measured 1.34 cm x 0.34 cm at the cranial pole and 0.33 cm at the caudal pole. The right adrenal gland measured 1.96 cm x 1.06 cm at the cranial pole and 0.36 cm at the caudal pole.

Spleen

The **spleen** revealed a focal hypoechoic 1.0 cm nodule at the mid body. This should be monitored carefully, given the breed predisposition to splenic pathology. FNA would be appropriate.

Liver

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.

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.



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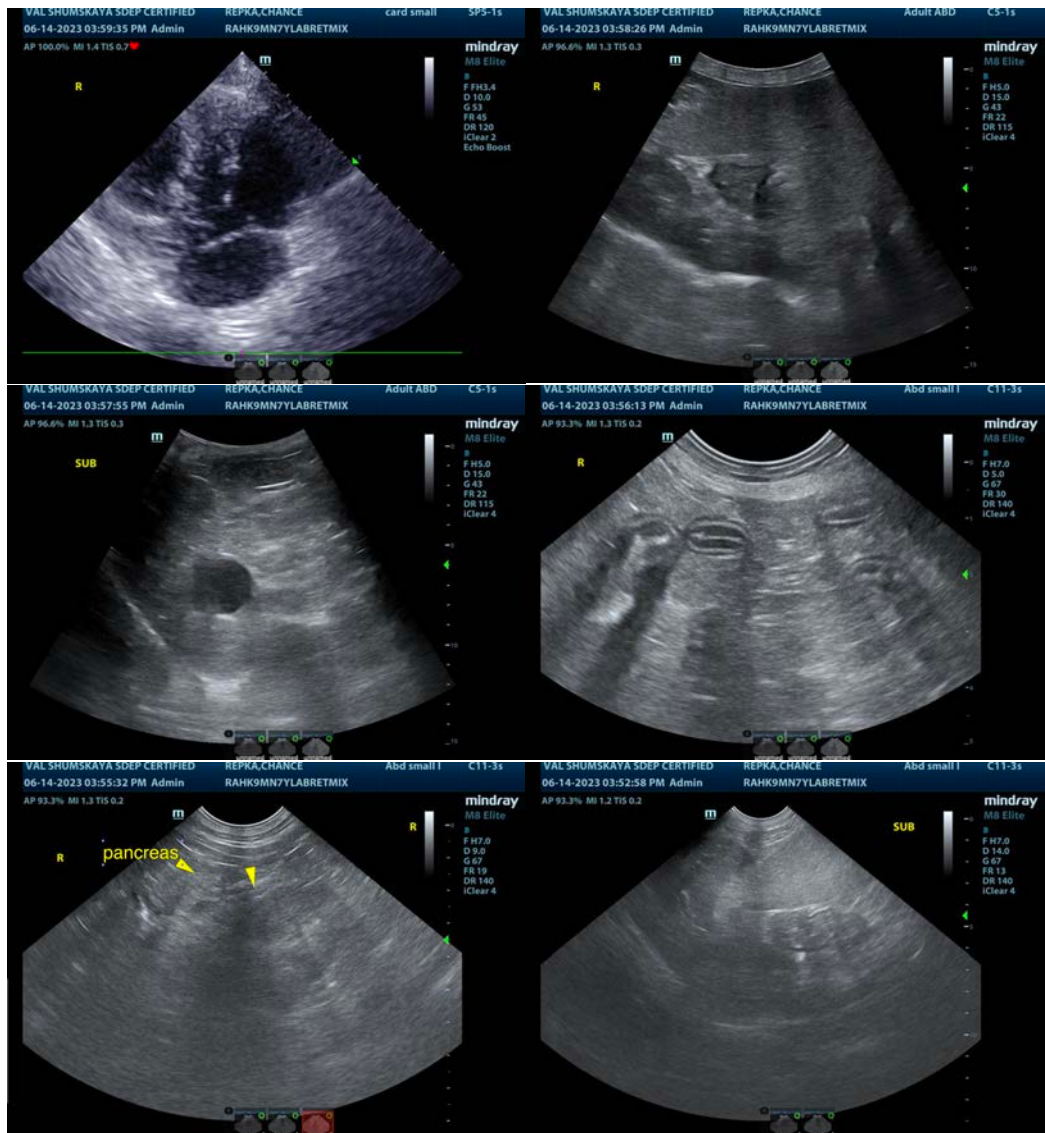
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ULTRASONOGRAPHIC FINDINGS

- Flattened adrenal glands – expected for Addisonian state.
- Hypochoic splenic nodule – likely hyperplasia, potential for round cell neoplasia or emerging hemangiosarcoma.
- Age related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recurrence of the Addisonian state may be playing a role in the vomiting in this patient. Adjustment of supplementation may be necessary. Recheck of the spleen in 4 weeks recommended to assess for any growth of the nodule +/- FNA.





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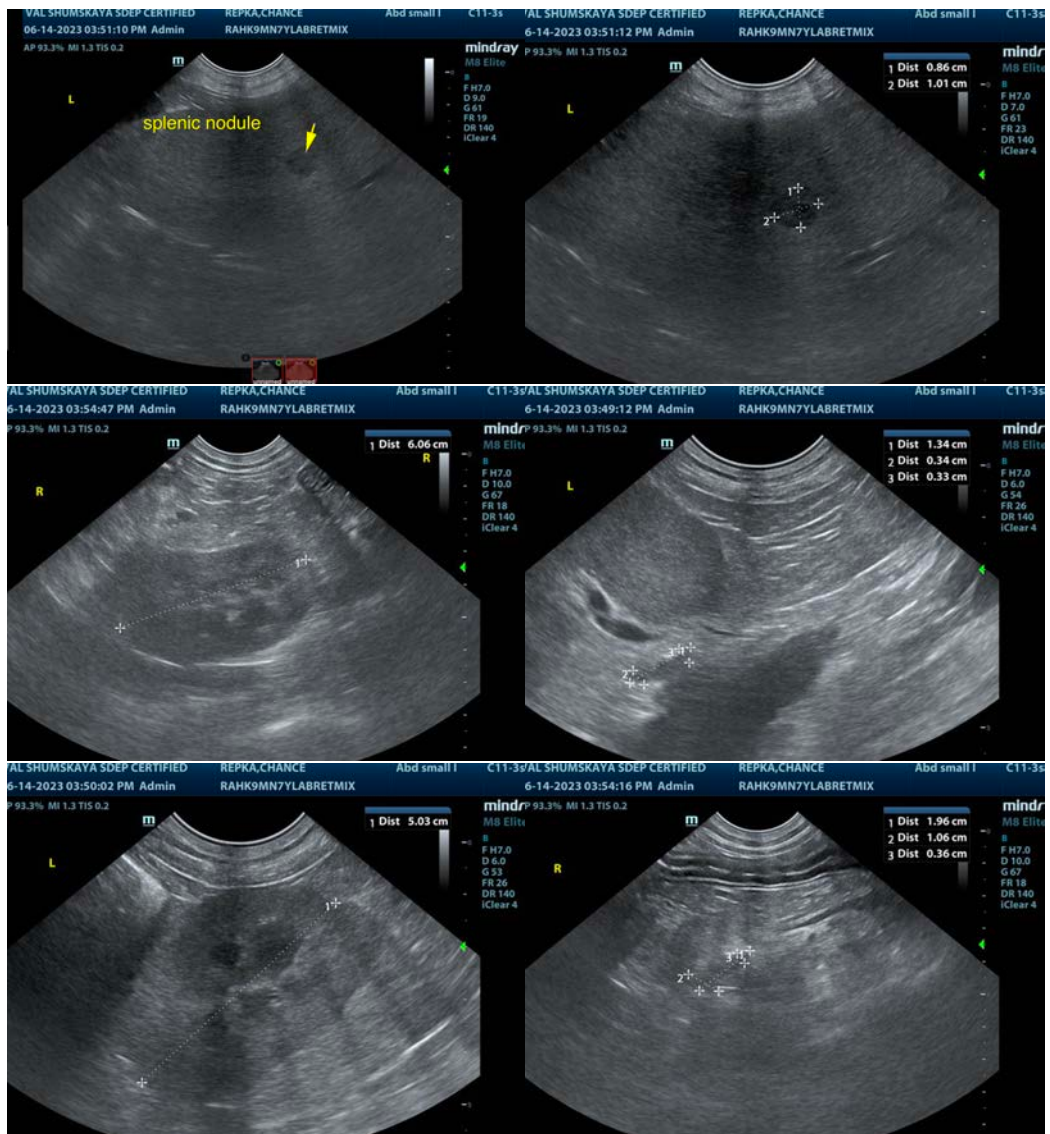
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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