



PATIENT PRESENTING CLINICAL SIGNS

Sadie Shultz Azotemia Dehydration Tachycardia Bacteriuria seen in UA (cocci) Borderline hypoglycemia
Abnormal PE/Chem/CBC/UA Results: PCV/TS: 44/7.4 EPOC: Ca: 1.09 BUN: >120 after dilution
141.6 Creat: 6.0 Gluc: 62 Cortisol: 7.3

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Corgi

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. Slight apical polyp noted, not clinically significant.

SEX

Spayed Female

The **kidneys** presented a chronic interstitial nephrosis pattern. Subnormal blood flow on power doppler assessment. The left kidney measured 4.54 cm. The right kidney measured 4.92 cm. Corticomedullary mineralization noted in the right kidney. Lack of corticomedullary definition noted in both kidneys. An anechoic cyst was noted in the caudal pole of the right kidney measured 5.0 mm.

AGE

8

Adrenal Glands

WEIGHT

7.5 kg

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 left adrenal gland measured 0.50 cm.

INTERPRETED BY

Eric Lindquist, DMV

Spleen

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

Dr. Laura de Cordon

Liver

HOSPITAL NAME

Mason Dixon Animal
Emergency Hospital

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.

REFERRING VET

Dr. Laura de Cordon

INVOICE

43206

Gastrointestinal

DATE

6/15/23

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. The gastric wall presented echogenic mucosal changes, likely microulcerative disease. There were minor areas of luminal fluid noted. There was no evidence of obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable. Gastroenteritis likely secondary to azotemia.



PATIENT *Pancreas*

Sadie Shultz

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

Corgi

- Chronic interstitial nephrosis pattern, acute on chronic renal failure
- Secondary azotemic gastroenteritis

SEX

Spayed Female

Leptospirosis titers warranted. Toxin exposure should be considered as well as potential lyme nephritis. Urine culture and sensitivity, 72-hour IV fluid protocol, blood pressure measurement, broad-spectrum antibiotics all indicated. The kidneys appear approximately 50-60% compromised from a subjective structural standpoint. Therefore, I'm concerned for an acute insult on top of chronic disease that was already present. No obstructive nephrolithiasis noted at this point. However, small pinpoint mineralizations are present.

AGE

8

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

7.5 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Laura de Cordon

HOSPITAL NAME

Mason Dixon Animal
Emergency Hospital

REFERRING VET

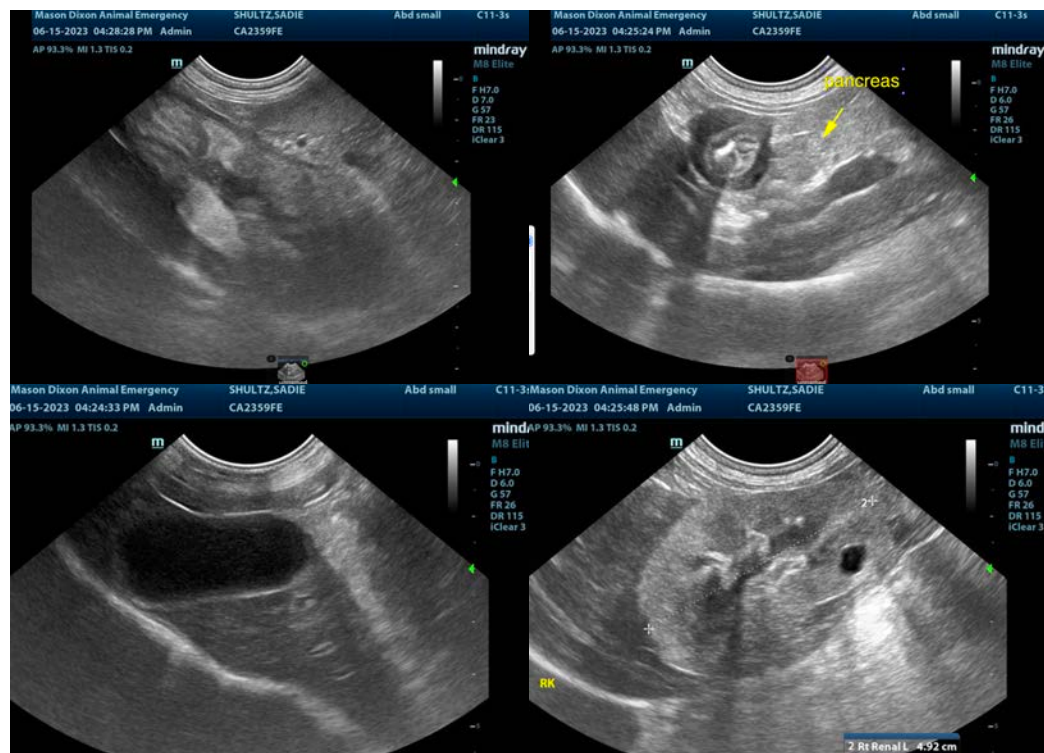
Dr. Laura de Cordon

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DATE

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PATIENT

Sadie Shultz

SPECIES

Canine

BREED

Corgi

SEX

Spayed Female

AGE

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WEIGHT

7.5 kg

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HOSPITAL NAME

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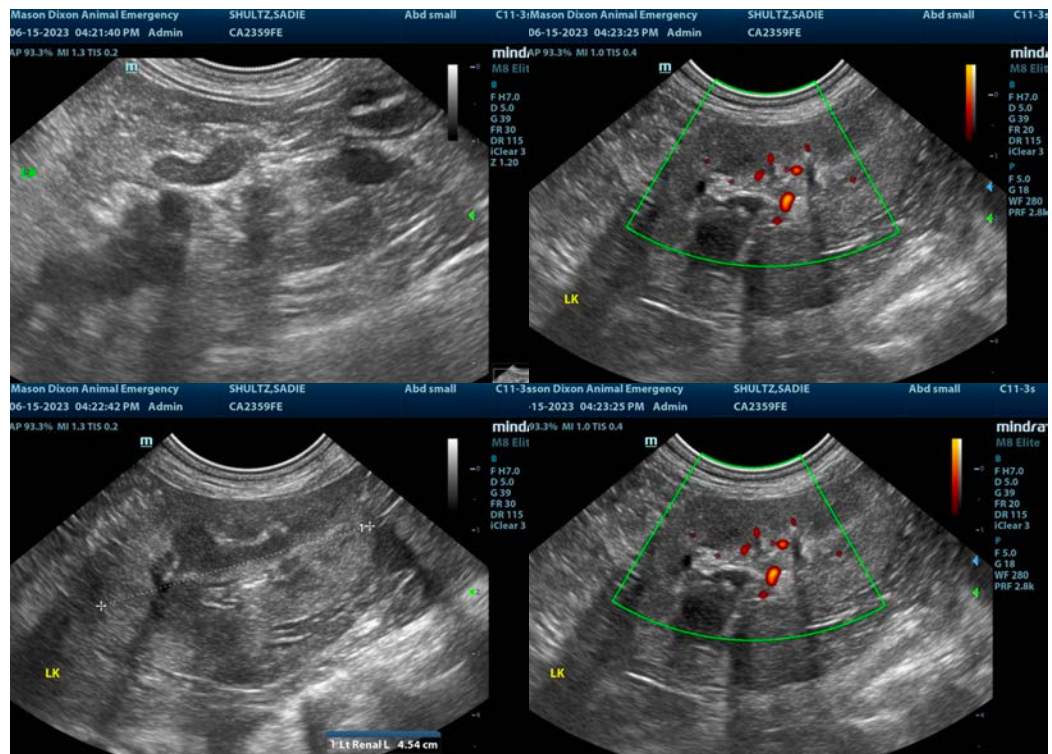
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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