



PATIENT

Pistol Crawford

PRESENTING CLINICAL SIGNS

History of EPI, 4 day history of decreased appetite, soft stool and 1 episode of vomiting. Bloodwork unremarkable. GI panel showed low Cobalamin.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shepherd X

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

SEX

Spayed Female

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 kidneys measured 6.0 cm each.

AGE

10 Years

Adrenal Glands

WEIGHT

39.4 Pounds

The **left 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 left adrenal gland measured 0.50 cm.

INTERPRETED BY

Eric Lindquist, DMV

The **right adrenal gland** was not visualized.

DABVP, Cert. IVUSS

Spleen

IMAGING PERFORMED BY

Dr. Ellen Puthoff

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.

HOSPITAL NAME

Kings Vet Hosital

Liver

The **liver** was uniformly enlarged with mild irregular contour. The gallbladder and common bile duct were unremarkable.

REFERRING VET

Dr. Ellen Puthoff

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.

INVOICE

38820

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.

DATE

6/16/22



PATIENT

Pistol Crawford

PRIMARY FINDINGS

- Mild hepatic enlargement, unremarkable abdomen otherwise

SPECIES

Canine

SECONDARY FINDINGS

- Age related bladder and renal changes

BREED

Shepherd X

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If liver enzymes elevate, FNA would be indicated. No evidence of significant disease.

SEX

Spayed Female



AGE

10 Years

WEIGHT

39.4 Pounds



INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ellen Puthoff

HOSPITAL NAME

Kings Vet Hosital

REFERRING VET

Dr. Ellen Puthoff



INVOICE

38820

DATE

6/16/22



PATIENT

Pistol Crawford

SPECIES

Canine

BREED

Shepherd X



SEX

Spayed Female

AGE

10 Years

WEIGHT

39.4 Pounds

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

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ellen Puthoff

HOSPITAL NAME

Kings Vet Hosital

REFERRING VET

Dr. Ellen Puthoff

INVOICE

38820

DATE

6/16/22