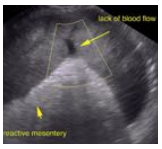

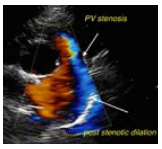

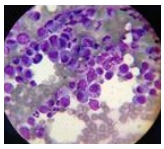
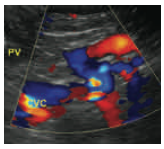

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1-800-838-4268 info@sonopath.com

PATIENT

Dalai Lama Stauch

SPECIES

Canine

BREED

Bichon

SEX

Neutered male

AGE

11 years

WEIGHT

12.8 kg

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Nelson

INVOICE

31161

DATE

6/22/22

PRESENTING CLINICAL SIGNS

History: Presented at our hospital for AUS. Over the past 6-8 mo pet started gaining weight, took to rdvm, rec AUS. Suspect cushings. Previous Health Concerns: Narrow airway Current Medications: Carprofen, Gabapentin, Methocarbamol, Tramadol, Theophylline
Abnormal PE/Chem/CBC/UA Results: Rdvm: Neg HELA; 6/17/22 Chem wnl; CBC: ReticHemo 23.3; PLT 469; T4 normal 1.6

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 was 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 5.76 cm. The left kidney measured 5.04 cm.

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 left adrenal gland measured 1.82 x 0.51 cm at the cranial pole and 0.66 cm at the caudal pole. The right adrenal gland measured 3.12 x 0.42 cm at the cranial pole and 0.66 cm at the caudal pole.

Spleen

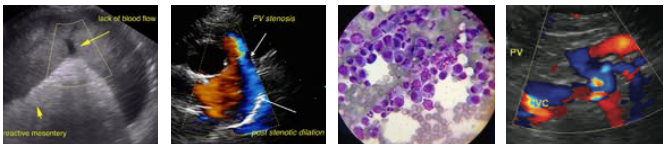
The **spleen** was largely normal with a focal, hypoechoic nodule. The nodule measured 0.5 cm.

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

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



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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. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

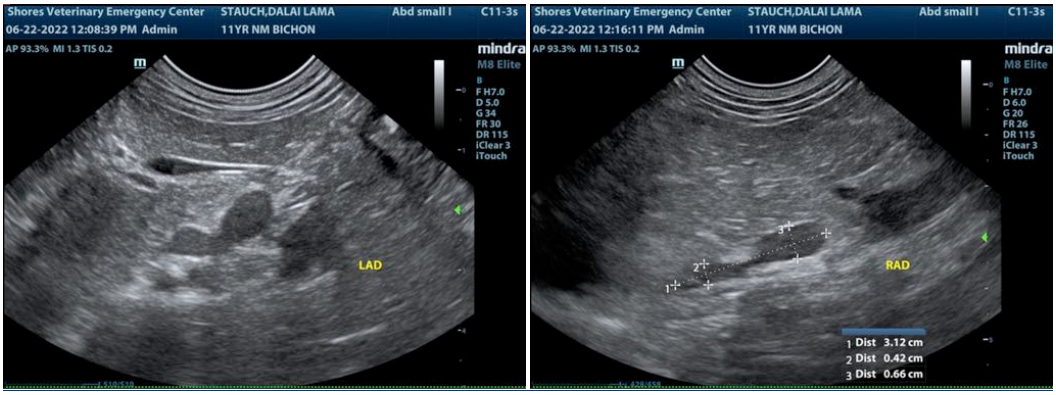
ULTRASONOGRAPHIC FINDINGS

Focal splenic nodule.

Otherwise, benign abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of significant pathology. The changes are expected for this age patient with benign hepatopathy. FNA of the splenic nodule is indicated. Hyperplasia, abscessation, benign hyperplasia and very early hemangiosarcoma are all technically possible, yet subjectively appears benign. This should be monitored for any growth over the next 3-5 weeks. Structurally the adrenal glands appear normal; however, early PDH cannot be completely ruled out.



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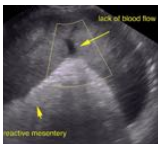
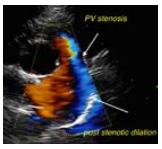
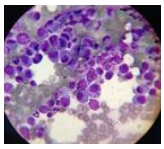
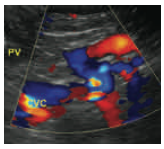

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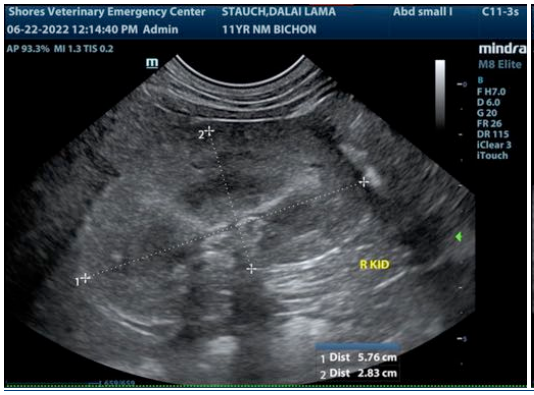

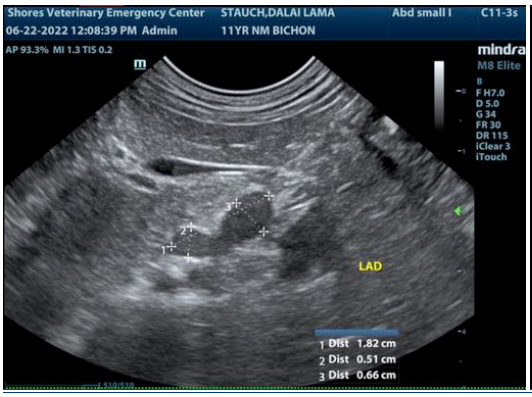

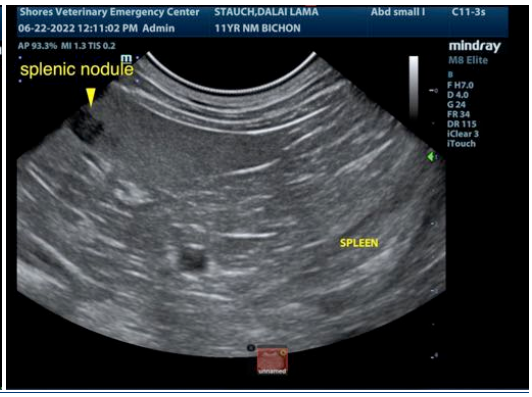

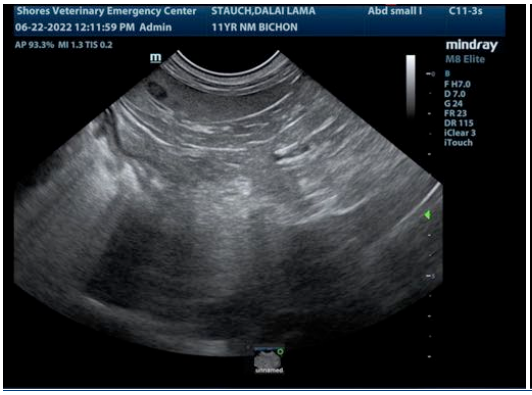

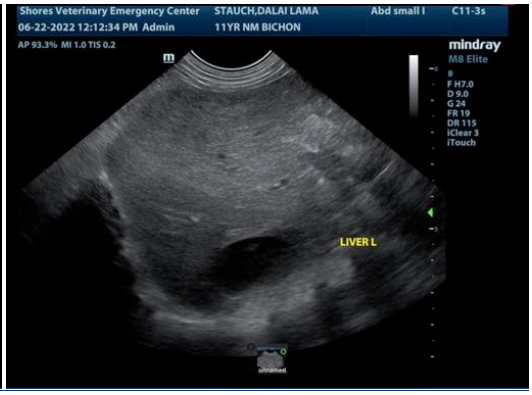

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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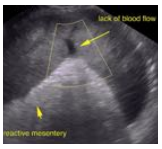

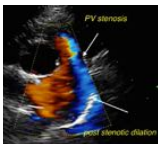

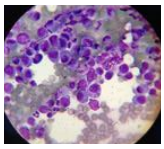
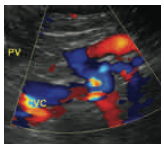

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