



PATIENT

Chewy Rigsby

SPECIES

Canine

BREED

Shih Tzu

SEX

Neutered Male

AGE

14 Years 3 Months

WEIGHT

14.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Mack

HOSPITAL NAME

Northside VC

REFERRING VET

Dr. Mack

INVOICE

16290

DATE

6/24/22

PRESENTING CLINICAL SIGNS

History: Seizure patient with increased seizure over the last few weeks

Abnormal PE/Chem/CBC/UA Results: Elevated liver values

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 left kidney measured 4.0 cm. The right kidney measured 4.0 cm.

Adrenal Glands

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 was visualized obliquely, measuring 5.0 mm at the caudal pole and 4.0 mm at the cranial pole.

The **right adrenal gland** was slightly heterogeneous yet encapsulated. The right adrenal gland measured 0.8 cm.

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 were noted.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.



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Gastrointestinal

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The **stomach** revealed minor echogenic mucosal remodeling and fluid filled lumen, suggestive for low-grade gastric irritation. The small intestine and colon were unremarkable. Assessment for history of upper GI signs recommended.

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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.

BREED

Shih Tzu

ULTRASONOGRAPHIC FINDINGS

SEX

- Minor nonspecific hepatic remodeling, largely age-related changes
- Minor gastritis presentation
- Age-related renal changes
- Slight heterogeneous right adrenal gland

Neutered Male

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

14 Years 3 Months

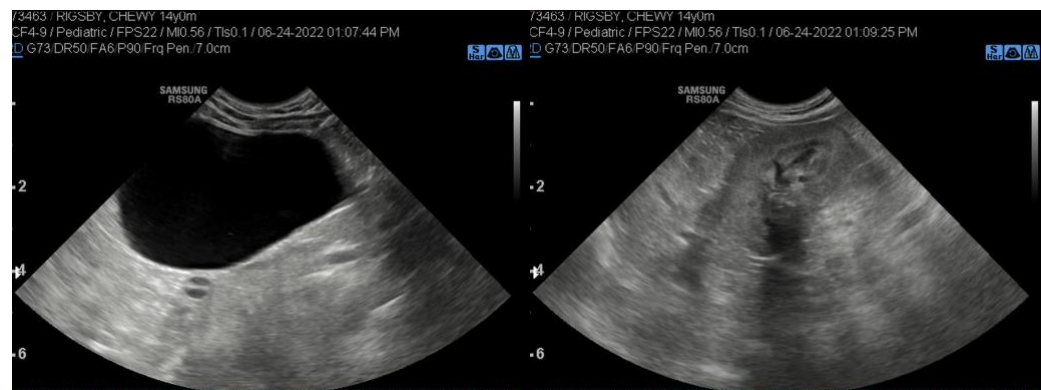
FNA of the liver could be considered for further definition. Likely chronic reactive hepatopathy or nonspecific inflammatory hepatopathy. Diet change to hydrolyzed diet may be effective in this patient, 10 days amoxicillin and reassessment of the clinical signs to empirically treat an underlying reactive hepatopathy owing to antigen surveillance phenomenon from the GI, especially given the minor gastritis presentation. The cause of seizure activity is likely unrelated to the abdominal pathology. CT of the skull with contrast would be indicated to assess for primary disease.

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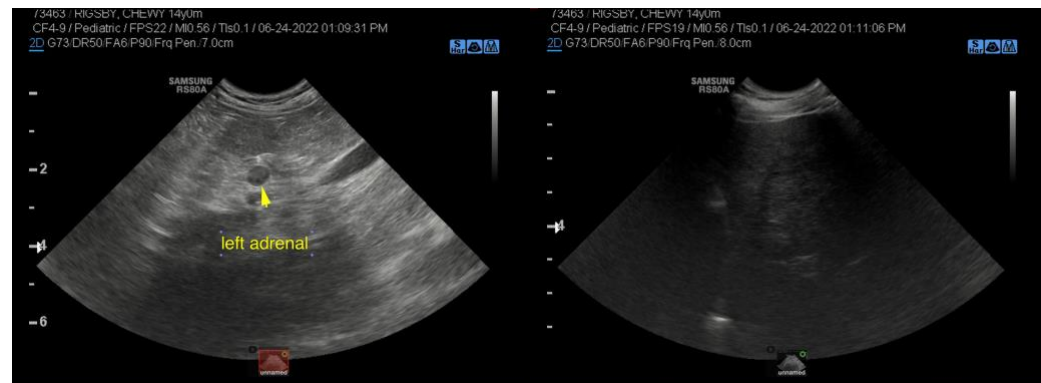


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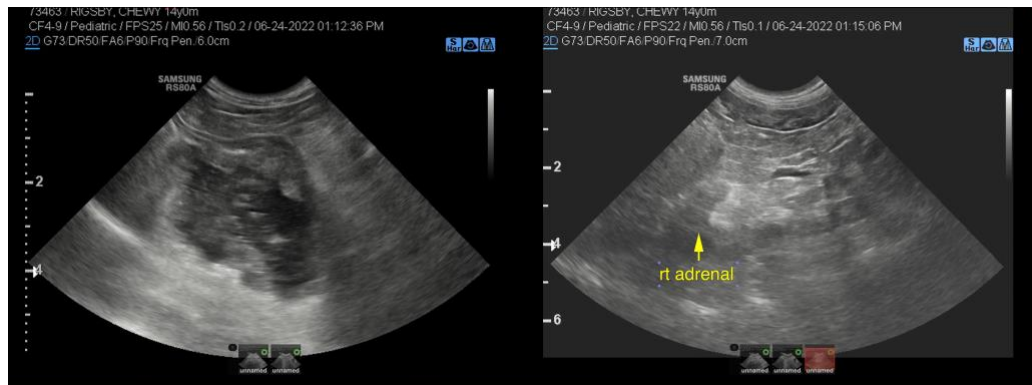
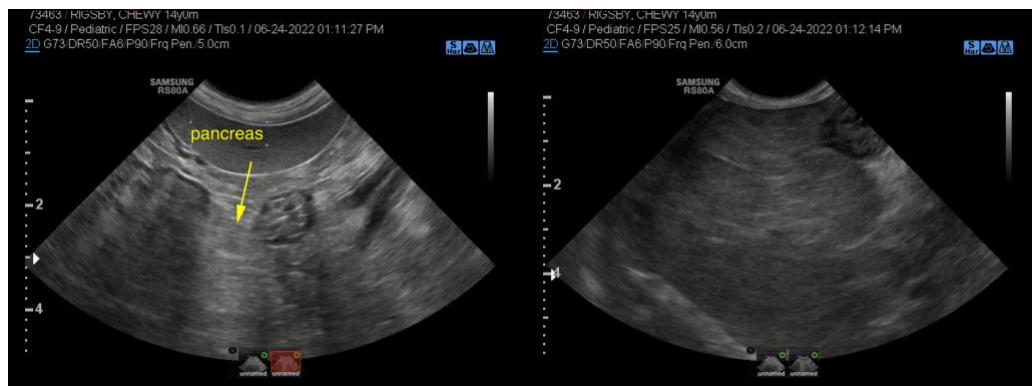
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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