



PATIENT

Sadie Sue Gardner

SPECIES

Canine

BREED

Maltese Mix

SEX

Spayed female

AGE

10 years

WEIGHT

25 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

Dr. Engel

INVOICE

45020

DATE

6/28/23

PRESENTING CLINICAL SIGNS

Elevated liver enzymes, Cushingoid, on Vetoryl On Vetoryl 10mg BID. Recent post ACTH cortisol was 8.7ug/dL No increase in water consumption, urination etc. so did not change Vetoryl based on ACTH response test alone. Then got the blood work, and saw that the liver values have further increased. CBC-normal Chemistry- ALT-288, was 236 last year. ALP->2000, was 1750 last year. GGT-41, was 14 last year. All else WNL. Previous ultrasound on 8/31/21 (Sonopath): **ULTRASONOGRAPHIC FINDINGS** Bilateral nodular adrenal glands and enlargement. Mild degenerative renal changes with calculi. Vacuolar hepatopathy. I am questioning whether there is an additional liver/gall bladder issue, or if increasing the Vetoryl is appropriate. Recent post ACTH cortisol was 8.7ug/dL Liver values have further increased. CBC-normal Chemistry- ALT-288, was 236 last year. ALP->2000, was 1750 last year. GGT-41, was 14 last year. All else WNL.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Mineralization was noted in the kidneys and was non-obstructive. The right kidney measured 5.4 cm. The left kidney measured 5.7 cm.

Adrenal Glands

The left **adrenal gland** was enlarged and measured 1.3 cm at the cranial pole and 0.9 cm at the caudal pole. A hyperechoic nodule was noted at the cranial pole. This is consistent with adenoma or hyperplasia. The right adrenal gland measured 0.95 cm at the cranial pole.

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 was noted.



PATIENT

Sadie Sue Gardner

SPECIES

Canine

BREED

Maltese Mix

SEX

Spayed female

AGE

10 years

WEIGHT

25 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

Dr. Engel

INVOICE

45020

DATE

6/28/23

Liver

The **liver** revealed generalized enlargement with heterogenous, hyperechoic nodular changes, likely lipid plaques or nodular hyperplasia. The gallbladder revealed a minor amount of debris, which is physiological. Gallbladder polyps were noted. Uniform, hepatic expansion was present.

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.

ULTRASONOGRAPHIC FINDINGS

Bilateral adrenal hypertrophy with remodeling and left adrenal adenoma.

Subjectively benign hepatopathy with nodular hyperplasia pattern. Some level of inflammatory component is likely.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial blood pressure measurements are warranted. This is likely PDH. If hypertension is present then urine catecholamine is indicated. Hepatic FNA of the liver can be considered for further definition. However, given the patient's history this is largely expected type of hepatic appearance. Bile acid profile is warranted. Full CNS examination is warranted given the probability of PDH to ensure that an expansive pituitary tumor is not an issue.





PATIENT

Sadie Sue Gardner

SPECIES

Canine

BREED

Maltese Mix

SEX

Spayed female

AGE

10 years

WEIGHT

25 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

IMAGING PERFORMED BY

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

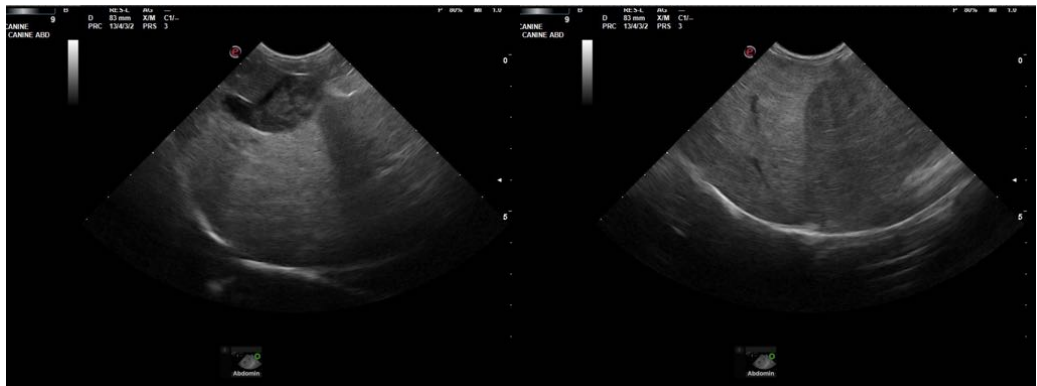
Dr. Engel

INVOICE

45020

DATE

6/28/23





PATIENT

Sadie Sue Gardner

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.

SPECIES

Canine

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.

BREED

Maltese Mix

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

SEX

Spayed female

AGE

10 years

WEIGHT

25 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Chaley Hunt, LVT

HOSPITAL NAME

Columbia AC

REFERRING VET

Dr. Engel

INVOICE

45020

DATE

6/28/23