



**PATIENT**

Leo Miguel

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Male

**AGE**

1.5 Years

**WEIGHT**

61.5 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Amy Priest

**HOSPITAL NAME**

Long Valley AH

**REFERRING VET**

Dr. Russell Earl

**INVOICE**

23120

**DATE**

6/29/23

**PRESENTING CLINICAL SIGNS**

History: Anorexia/Vomiting/Diarrhea. Has always been lean/underweight. Current treatments have included fluids, Ondanestron, Cerenia, Metronidazole, Entyce. (but is not responding)

Abnormal PE/Chem/CBC/UA Results: NSF on CBC/Chem (6/21/23) except mild hypokalemia (3.6). 4DX--Neg x 4 Resting Cortisol = 5.1 (N) No evident FB nor obstructive pattern on x-rays. Fluidy fecal matter. Small amount of gas. Recheck CBC/Chem--pending Food Allergy Panel--to lab GI Panel with spec cPL--pending

**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 prostate was uniform, measuring 2.3 cm.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 8.7 cm. The right kidney measured 6.3 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 measured 0.5 cm.

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

**Spleen**

The **spleen** was uniformly enlarged (up to 4.0 cm in width) with relatively uniform parenchyma without evidence of masses. The capsule was mildly swollen. This is most consistent with hypersplenism and reactive hyperplasia deriving from splenic white or red pulp. However, early infiltrative disease, such as lymphoma or mast cell neoplasia can, at times, present in this manner but not suspected. 25g US-guided FNA would be best in order to ensure only reactive hyperplasia is present. If clinical signs fit with potential neoplasia or mast cell disease, then Benadryl injection (1 mg/pound IM) 15 minutes prior to FNA would be recommended.

**Liver**

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.



## PATIENT

### ***Gastrointestinal***

Leo Miguel

The **stomach** was overdistended with fluid. The colon was dilated with fluid.

## SPECIES

### ***Pancreas***

Canine

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

### **ULTRASONOGRAPHIC FINDINGS**

Golden Retriever

- Hypersplenism, likely reactive
- Gastric stasis and colonic fluid- gastritis/colitis is likely- no evidence of foreign bodies.

## SEX

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Male

If weight loss is an issue, then FNA of the spleen is indicated. Palpation is warranted to assess for splenic discomfort. 24hr NPO, IV fluid support, screening for enterotoxins and recheck sonogram in 48-72hrs if clinical signs are not improving.

## AGE

1.5 Years

## WEIGHT

61.5 Pounds

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Amy Priest

## HOSPITAL NAME

Long Valley AH

## REFERRING VET

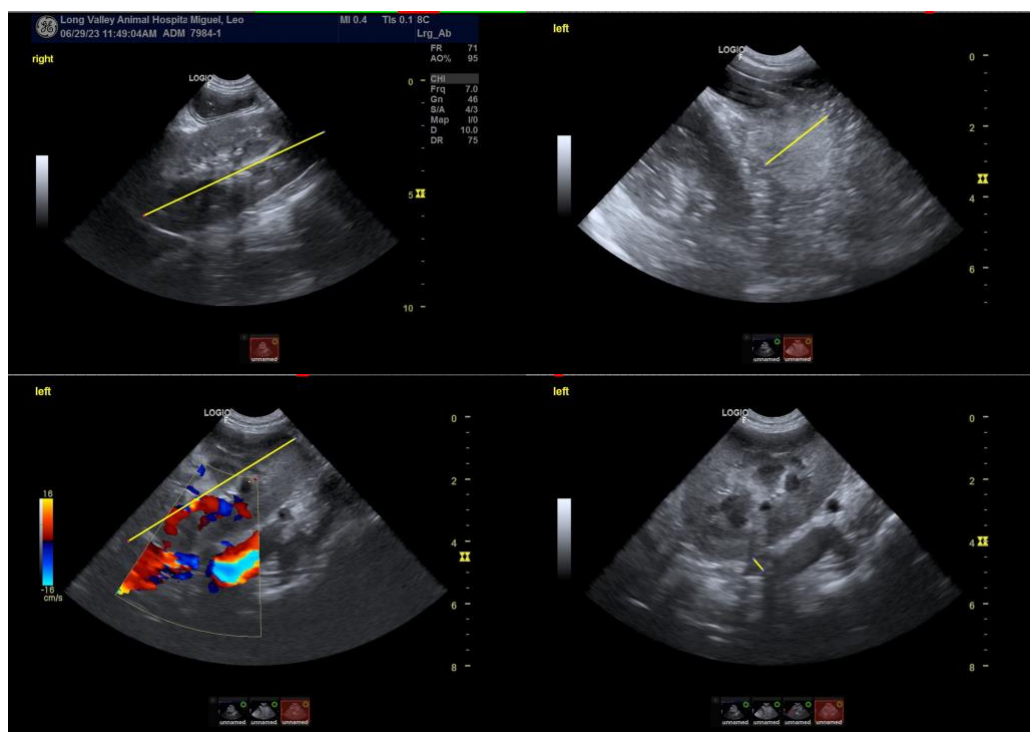
Dr. Russell Earl

## INVOICE

23120

## DATE

6/29/23





**PATIENT**

Leo Miguel

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Male

**AGE**

1.5 Years

**WEIGHT**

61.5 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Amy Priest

**HOSPITAL NAME**

Long Valley AH

**REFERRING VET**

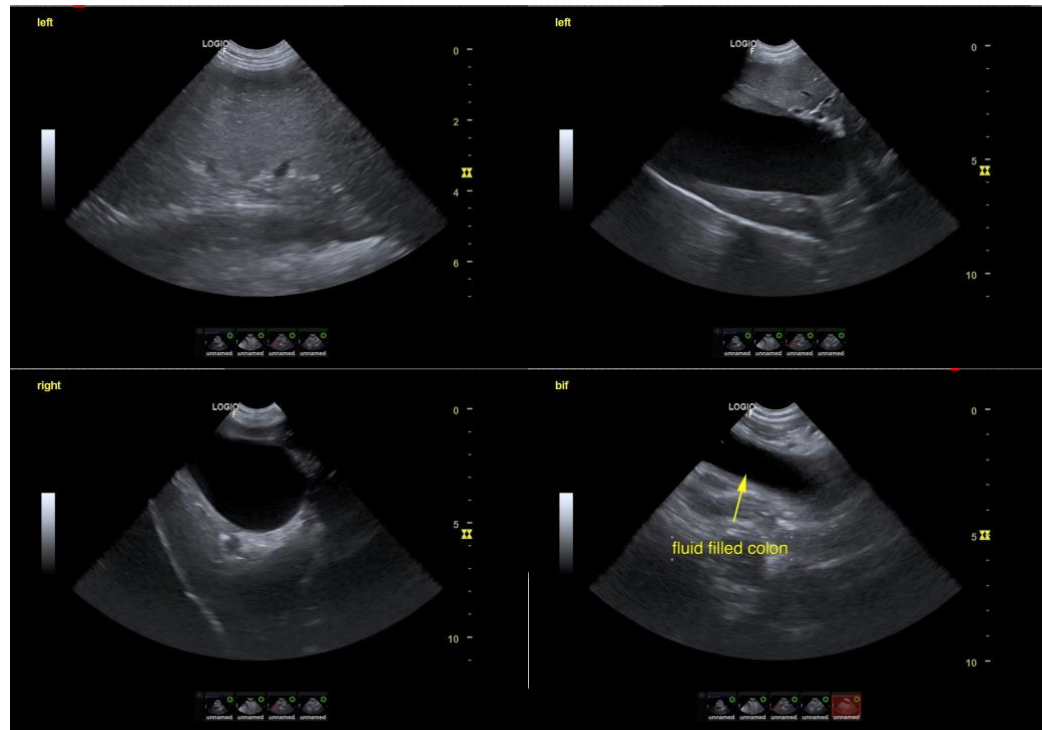
Dr. Russell Earl

**INVOICE**

23120

**DATE**

6/29/23



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