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DATE

6/3/22

PATIENT

Riley Weber

SPECIES

Canine

BREED

Labrador

SEX

Spayed Female

AGE

9/29/09

WEIGHT

81.8 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Rachel Brilhart RDMS

HOSPITAL NAME

Animal Emergency
Hospital

REFERRING VET

Dr. Willer

INVOICE

38388

PRESENTING CLINICAL SIGNS

Diarrhea for the past 4 days- increased need to go out; did eat last night- then suddenly last night-lethargic, did not want to walk- when did get up- hard time getting up in the back end and did not want to go up the stairs seemed out of it. last night is eating, drinking water decreased does get people food and did get chipped beef on Sunday. does eat things out in the yard. history of swollen joints in the hindlimbs ; arthritis, cancerous growth removed from the ear; allergies owner did take a stool sample to RDVM yesterday- waiting on results

Current Medications: none listed.

Lab Results: Alb 4.0, ALP 1931,

Radiographs: Small liver, prominent pylorus vs mass effect. Gas/fluid dilated colon.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

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 **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 right kidney measured 6.51 cm. The left kidney measured 7.0 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 right adrenal gland measured 2.52 cm x 1.33 cm at the cranial pole and 0.81 cm at the caudal pole. The left adrenal gland measured 2.6 cm x 0.76 cm at the caudal pole and 0.84 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 were noted.

Liver

The **liver** presented heterogenous parenchyma with increased portal markings and coarse architecture. Slight undulating capsular contour was noted. The gallbladder and common bile duct were unremarkable. This is consistent with chronic inflammatory hepatopathy.

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

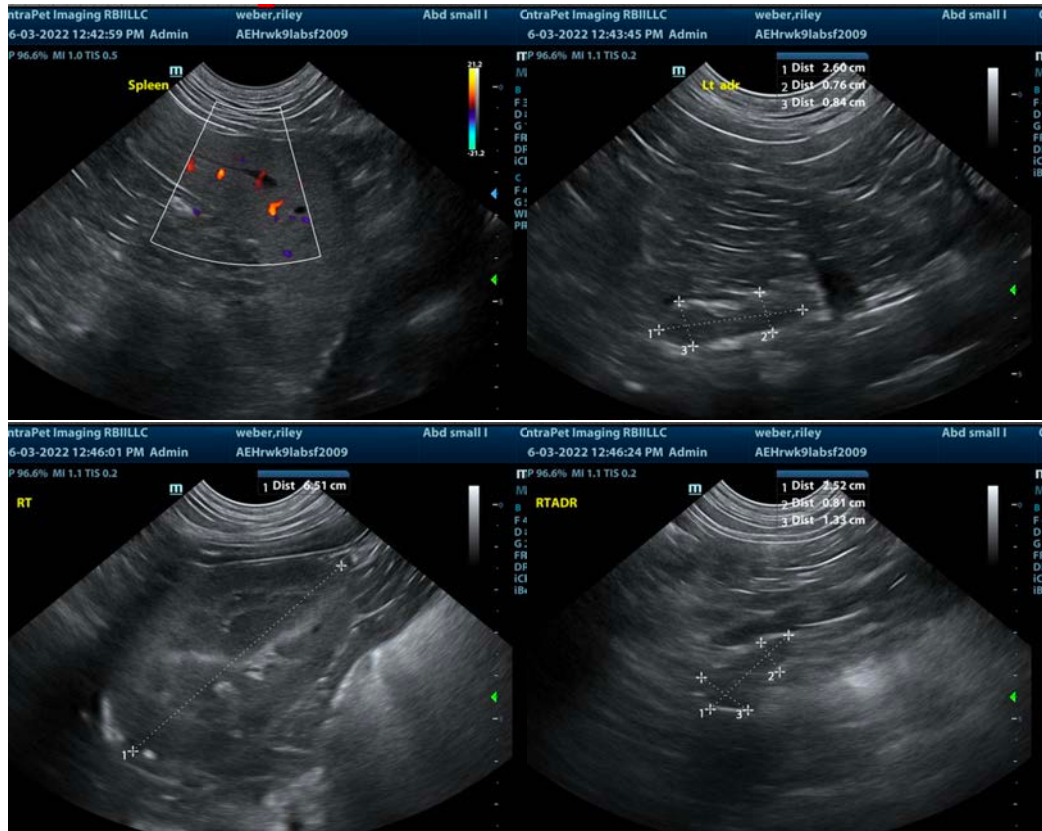
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Moderate chronic hepatic remodeling
- Unremarkable abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bile acid profile warranted. If liver enzyme elevations occur, then FNA indicated. Underlying parasitic disease, food intolerance, enterotoxins all possible. No evidence of significant structural intestinal disease. Bouts of cholangiohepatitis have likely been an issue in this patient in the past, yet appears structurally stable at this time. Clinical significance would be based on bile acid profile.





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.

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