



**PATIENT**

**PRESENTING CLINICAL SIGNS**

Jacques Cazes

History: Pancreatitis, gall bladder mucucoe, and adrenal mass. decreased appetite and lethargic. on metronidazole liquid - 125mg/ml - 0.5ml SID ursodiol 50mg/ml - 0.5ml BID Denosyl 90 mg- SID took 25mg traz 2 hours prior gave 0.15ml torb iv  
Abnormal PE/Chem/CBC/UA Results: urine specific gravity - 1.030

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Poodle

**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.

**SEX**

MN

The kidneys revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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.

**AGE**

16 years

**WEIGHT**

9.1 pounds

The left kidney measured 3.36 cm in length. The right kidney measured 4.32 cm in length.

**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 0.5 cm in width visualized obliquely.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The right adrenal is visualized with difficult resolution however the right adrenal is enlarged and mildly irregular. No evidence of vascular invasion was observed. The right adrenal gland measured 1.92 cm x 1.42 cm.

**IMAGING PERFORMED BY**

Heather McNemar

**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.

**HOSPITAL NAME**

Animal Care Clinic of  
Flanders

**Liver**

**REFERRING VET**

Dr. Hallihan

The liver images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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 revealed minor excessive dilation and minor dependent suspended debris with minor polyploid changes. The gallbladder declassified to minor excessive sludge, no mucocele formation.

**INVOICE**

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**DATE**

06/06/2022

**Gastrointestinal**



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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**

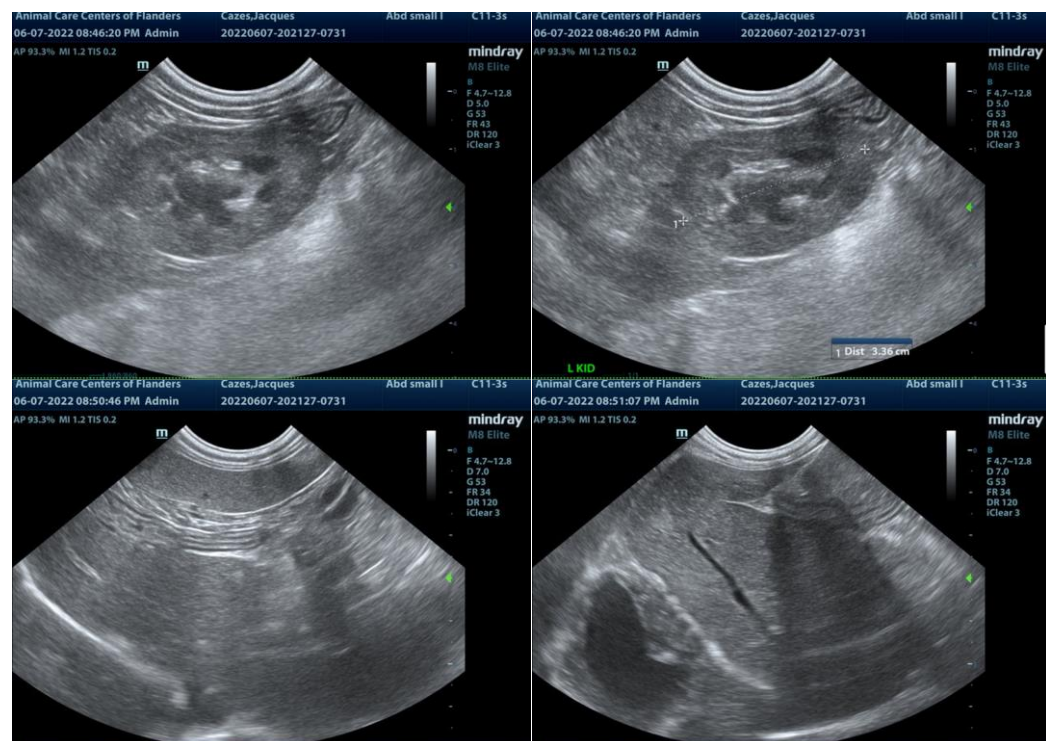
The base and limbs of the pancreas were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**ULTRASONOGRAPHIC FINDINGS**

- Right adrenal gland enlarged and mildly irregular
- Largely a geriatric abdomen with age related changes otherwise

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The exact cause of the clinical signs in this patient is not evident the images. Serial BP are warranted and assessment for other causes of the clinical signs such as orthopedic/spinal disease is indicated.





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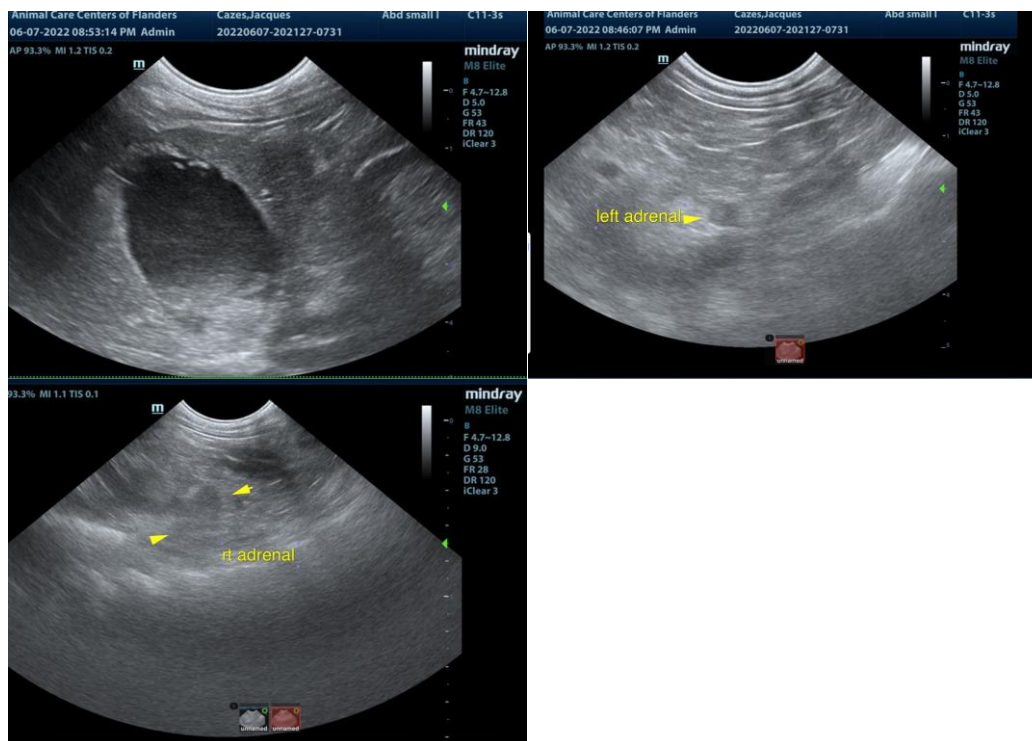
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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