



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Chappy Dellechiaia	History: Elevated liver enzymes, painful abdomen at exam. Current meds: Apoquel, Optimune, Rejensa joint supplement, Tacrolimus, HG.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: U/A: Protein 100mg/dl, BLD 50 Ery/UL, USG 1.010.
Canine	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>	<b>Urinary System</b>
Golden Retriever	The <b>urinary bladder</b> , 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 residual prostate measured 0.9 cm.
<b>SEX</b>	
Neutered Male	The <b>kidneys</b> 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 7.15 cm. The right kidney measured 5.5 cm.
<b>AGE</b>	
8 Years	<b>Adrenal Glands</b>
<b>WEIGHT</b>	The <b>right adrenal gland</b> 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 right adrenal gland measured 3.03 cm x 0.93 cm at the cranial pole and 0.8 cm at the caudal pole.
N/A	The <b>left adrenal gland</b> was slightly enlarged. The left adrenal gland measured 3.62 cm x 0.74 cm at the caudal pole and 0.98 cm at the cranial pole.
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>spleen</b> revealed a hypoechoic nodule measuring 0.63 cm x 0.33 cm.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Kelly Vazquez	The <b>liver</b> was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia. This is a mild change. Minor polypoid changes were noted in the gallbladder.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Well Pet AH	Examination of the <b>gastrointestinal tract</b> 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.
<b>REFERRING VET</b>	<b>Pancreas</b>
Dr. Wellington	
<b>INVOICE</b>	
23345	
<b>DATE</b>	
7/13/23	



**PATIENT**

Chappy Dellechiaie

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.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

- Benign hepatopathy with minor gallbladder debris and polyps
- Slight splenic nodule
- Slightly enlarged left adrenal gland
- Structurally unremarkable abdomen otherwise

**BREED**

Golden Retriever

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

Neutered Male

The cause of abdominal pain is not evident in this patient. Assessment for referred back pain is warranted. Justification to ursodiol therapy is also present over the next 6-8 weeks and recheck sonogram, it is debatable on whether or not this is absolutely necessary at this point. The liver, subjectively, appears benign yet splenic and hepatic FNA could be considered. The recheck sonogram of the abdomen after 6-8 weeks would also allow for assessment of the splenic nodule, for any splenic nodule growth, as well as hepatic progression to ensure gallbladder emptying.

**AGE**

8 Years

**WEIGHT**

N/A

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kelly Vazquez

**HOSPITAL NAME**

Well Pet AH

**REFERRING VET**

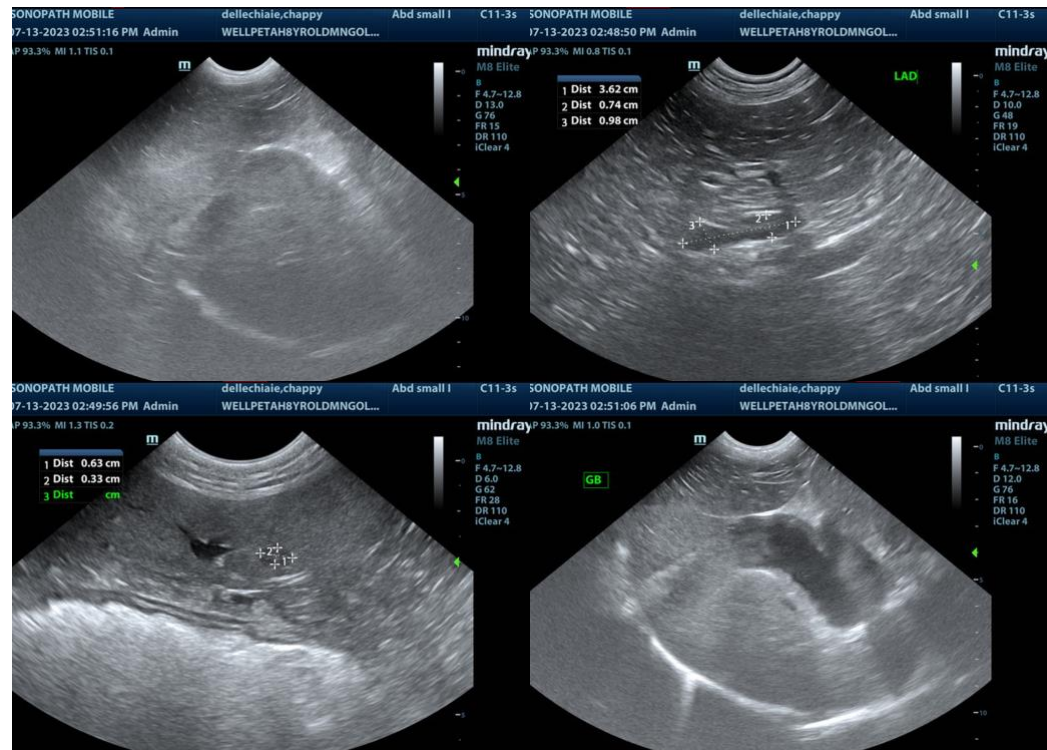
Dr. Wellington

**INVOICE**

23345

**DATE**

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**PATIENT**

Chappy Dellechiaie

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Neutered Male

**AGE**

8 Years

**WEIGHT**

N/A

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kelly Vazquez

**HOSPITAL NAME**

Well Pet AH

**REFERRING VET**

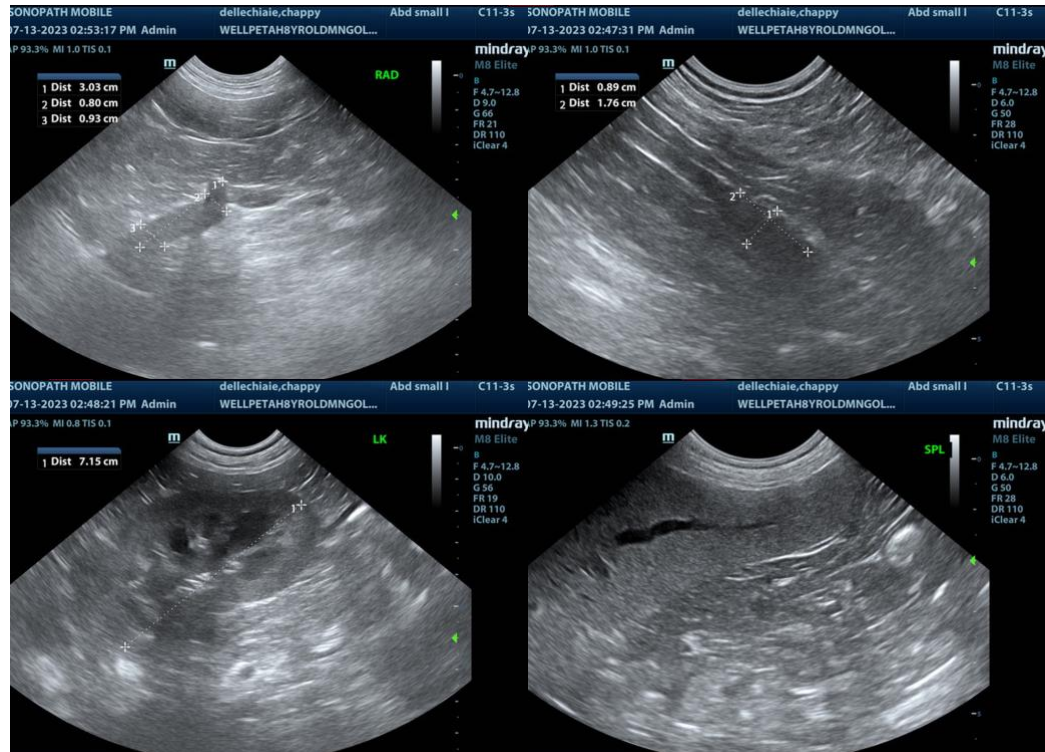
Dr. Wellington

**INVOICE**

23345

**DATE**

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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