



PATIENT

Harley Cook

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed Female

AGE

8 Years 10 Months

WEIGHT

30 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Stan GIRA

HOSPITAL NAME

Sabadilla AC

REFERRING VET

Dr. Pytka, Lake
Bonavista AC

INVOICE

23321

DATE

7/13/23

PRESENTING CLINICAL SIGNS

History: Recent weight loss , urinary incontinence /UTI, low USG

Abnormal PE/Chem/CBC/UA Results: NA

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 6.82 cm. The left kidney measured 6.82 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 left adrenal gland measured 0.34 cm at the cranial pole and 0.4 cm at the caudal pole. The right adrenal gland measured 0.54 cm at the cranial pole and 0.43 cm at the caudal 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** was enlarged and hypoechoic to falciform fat. A 2.0 cm x 3.5 cm hypoechoic nodule was noted in the base of the left medial liver, adjacent to the pylorus. The gallbladder and common bile duct were unremarkable. The portal vein was slightly tortuous, normal variant.

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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



PATIENT

Harley Cook

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

- Structurally unremarkable abdomen with minor hepatic enlargement and medial nondisruptive nodule.

BREED

Labrador Retriever Mix

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of weight loss is unclear. Screening FNA of the spleen and liver could be considered to assess for occult disease, including liver nodule. Otherwise, other sources of weight loss should be investigated. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.

AGE

8 Years 10 Months

WEIGHT

30 kg

INTERPRETED BY

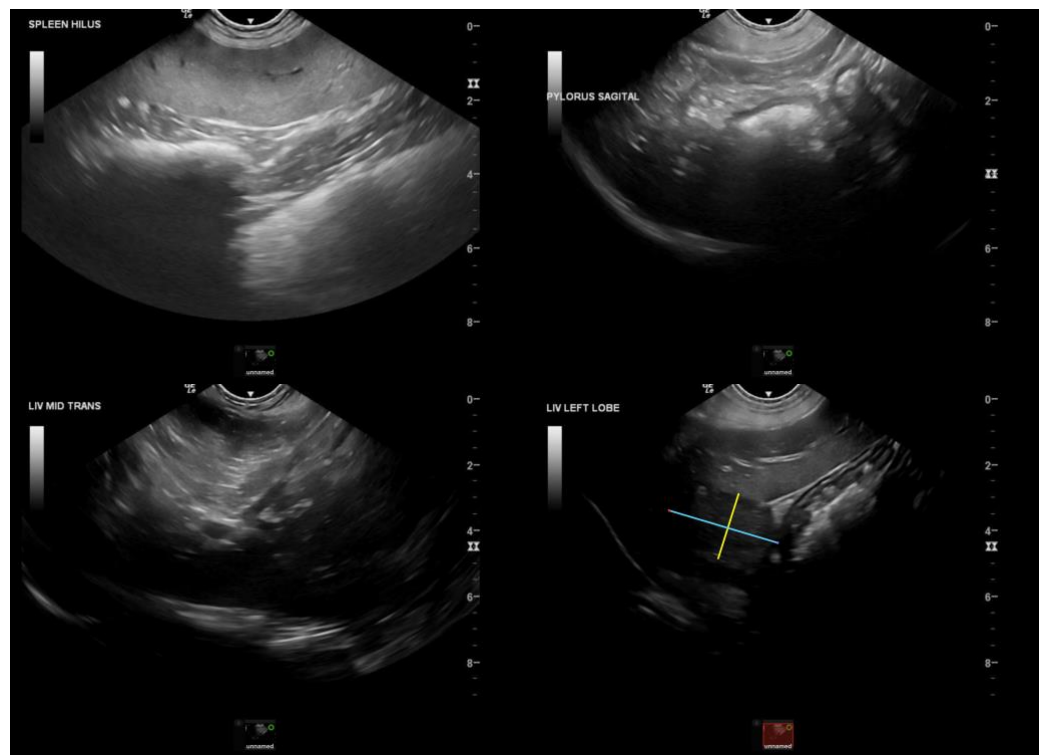
Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Stan GIRA

HOSPITAL NAME

Sabadilla AC



REFERRING VET

Dr. Pytka, Lake
Bonavista AC

INVOICE

23321

DATE

7/13/23



PATIENT

Harley Cook

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Spayed Female

AGE

8 Years 10 Months

WEIGHT

30 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Stan GIRA

HOSPITAL NAME

Sabadilla AC

REFERRING VET

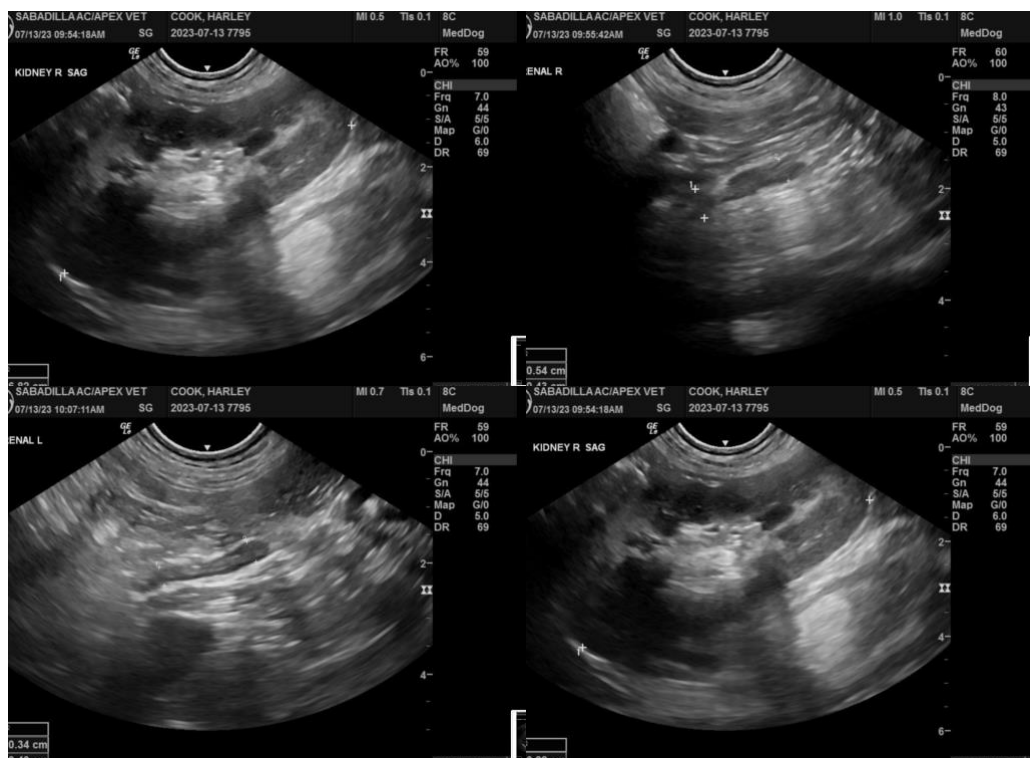
Dr. Pytka, Lake
Bonavista AC

INVOICE

23321

DATE

7/13/23



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