



**PATIENT**

Owen Schroeder

**SPECIES**

Canine

**BREED**

Yorkie

**SEX**

Spayed Female

**AGE**

14 Years

**WEIGHT**

5.1 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Freson

**HOSPITAL NAME**

Kings Vet Hospital

**REFERRING VET**

Dr. Freson

**INVOICE**

43852

**DATE**

7/13/23

**PRESENTING CLINICAL SIGNS**

PU/PD, dilute urine decreased WBC's lymphopenia ALP 552

**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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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. The left kidney measured 4.0 cm. The right kidney measured 4.0 cm, visualized obliquely.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**Spleen**

The **spleen** presented minor heterogeneous changes with minor irregular swelling.

**Liver**

The **liver** was swollen with coalescing hypoechoic micronodular changes. The gallbladder was unremarkable.

**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**

- Nodular hyperplasia/vacuolar hepatopathy liver pattern
- Minor heterogeneous splenic changes
- Age related renal changes



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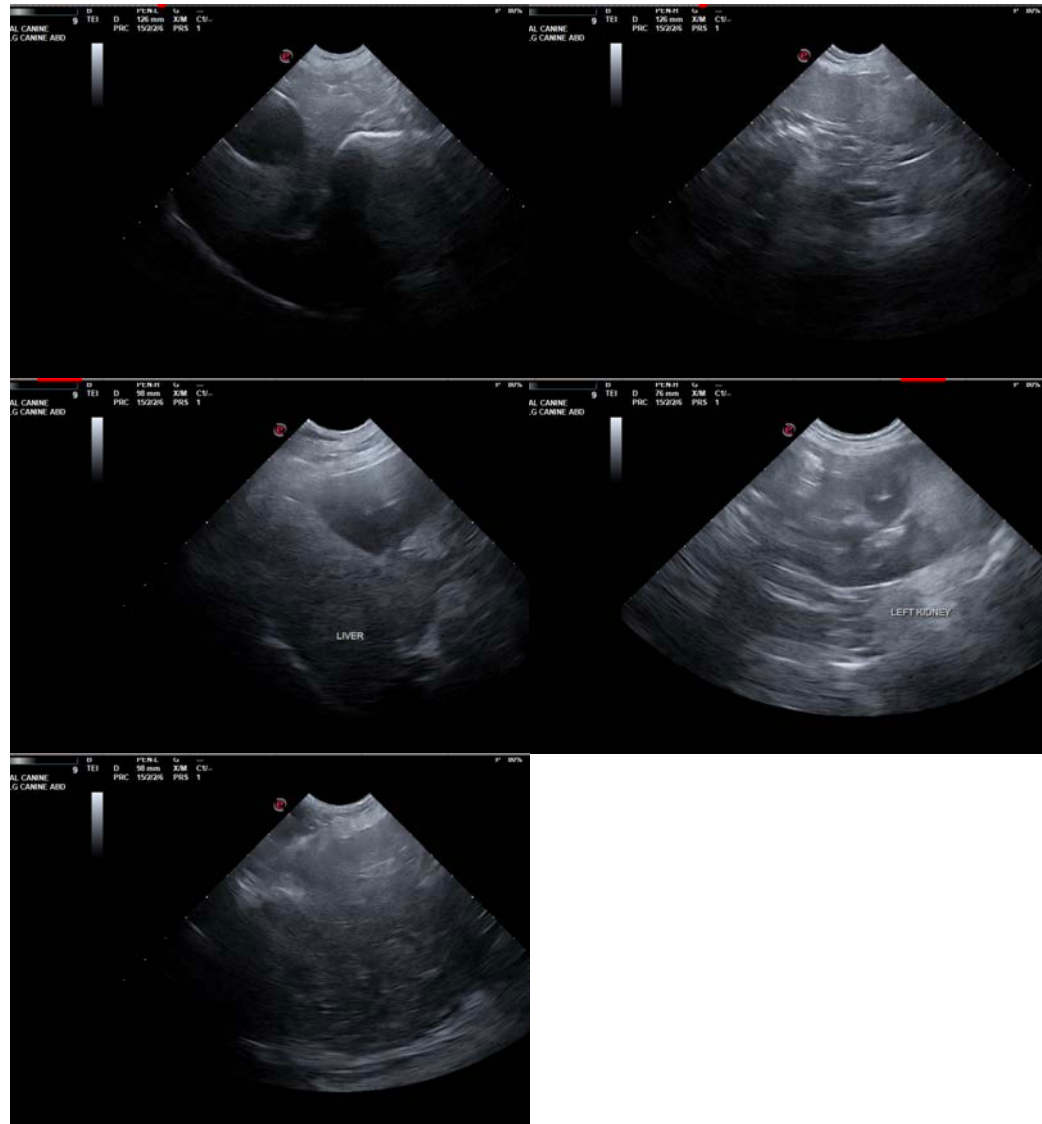
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

If adrenal disease is suspected, further imaging with deeper resolution recommended, as the adrenal glands were not visible.



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.

**Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com**

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