



PATIENT

Emma Connor

SPECIES

Canine

BREED

Affenpinscher

SEX

Spayed Female

AGE

16 Years 6 Months

WEIGHT

12.5 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Sarah Green

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Sarah Green

INVOICE

39612

DATE

7/16/22

PRESENTING CLINICAL SIGNS

Hyporexia, bilious vomiting, paresis 1 week duration
Abnormal PE/Chem/CBC/UA Results: CBC: WBC=71.72 (6-17) K/uL, monocyte=5.57 (0.2-1.5) K/uL, neutrophil=60.46 (3-12) k/uL CHEMISTRY: albumin=2.4 (2.5-4.4) g/dL, ALP=831 (20-150) U/L, ALT=357 (10-118) U/L, tбили =1.7 (0.1-0.6) mg/dL,

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 **left kidney** presented pyelectasia and irregular contour. A cortical infarct was noted in the dorsal cortex. The left kidney measured 3.0 cm.

The **right kidney** measured 3.5 cm with pyelectasia and cortical infarct.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** was swollen with irregular contour, strongly suggestive for infiltrative pattern. Enhanced surrounding mesentery noted.

Liver

The **liver** was swollen and irregular with enhanced mesentery. 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.

Free Abdomen

Cranial abdominal lymph nodes were enlarged.

ULTRASONOGRAPHIC FINDINGS

- Swollen, irregular spleen and liver
- Renal infarcts and pyelectasia



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA spleen and liver warranted to assess for round cell neoplasia versus splenitis or cholangiohepatitis. Full urinary workup warranted if not already performed with suspicion of pyelonephritis. Guarded prognosis.



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

info@SonoPath.com