

PATIENT PRESENTING CLINICAL SIGNS

Cosmo Rucki
 History: Hyporexia, weight loss, weakness in hind legs. Vomited on July 3rd and 4th - rusty colored paste: blood? On bland diet, appetite improved and no further vomiting. Eating well on mix w/kibble. Intermittent soft stool. Rectal: dark, soft stool. Unremarkable abdominal radiographs - no evidence small intestinal obstruction; however, nonspecific enteritis, intestinal ulceration, pancreatitis, neoplasia or other disease (eg. hepatobiliary disease cannot be ruled out. On Omeprazole *Sedated with butorphanol, alfaxalone, dexdomitor

SPECIES

Canine

BREED

Labrador Retriever

Abnormal PE/Chem/CBC/UA Results: HCT 34.4; HGB 11.7; lymph 1.032; BUN 34.5; ALP 483

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

Neutered Male

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 residual prostate was uniform, measuring 1.5 cm.

AGE

13 Years

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild to 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. Pyelectasia was noted in the right kidney, measuring 0.39 cm. An anechoic cyst was present, measuring 0.7 cm x 0.42 cm. The right kidney measured 6.5 cm in length. The left kidney revealed slight irregular contour, likely owing to cortical infarcts. The left kidney measured 6.58 cm.

WEIGHT

95.2 Pounds

INTERPRETED BY

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

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 right adrenal gland measured 0.68 cm at the cranial pole and 0.74 cm at the caudal pole. The left adrenal gland measured 0.79 cm at the caudal pole and 0.62 cm at the cranial pole.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Spleen

HOSPITAL NAME

Falmouth AH

The **spleen** revealed multifocal hyperechoic lipogranulomatous nodules, measuring up to 1.06 cm, non-disruptive. The nodules appear subjectively passive.

Liver

REFERRING VET

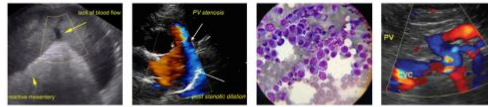
Lilan Hauser, DVM

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor 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 presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or

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16687

DATE



PATIENT

Cosmo Rucki

past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

SPECIES

Canine

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.

BREED

Labrador Retriever

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.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

AGE

13 Years

- Subjectively benign splenic nodular changes consistent with lipogranulomatous changes. FNA warranted to confirm.
- Irregular renal contour with slight pyelectasia
- Age-related hepatic changes

WEIGHT

95.2 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Assessment for underlying UTI is indicated. The cause of weight loss is unclear. As a precaution, splenic FNA is indicated to ensure more significant disease, other than lipogranulomatous changes are present. The cause of anemia is unclear. Kidneys appear subjectively 50% compromised. The cause of weight loss elsewhere, such as the chest and CNS should be considered.

Empirical treatment with Zithromax at 10 mg/kg s.i.d. for 5 days and then every other day up to 14-21 (if Bartonella +) days and B12 injections twice a week, hydrolyzed diet +/- Prednisolone therapy would be recommended at the minimal necessary dose to control symptoms.

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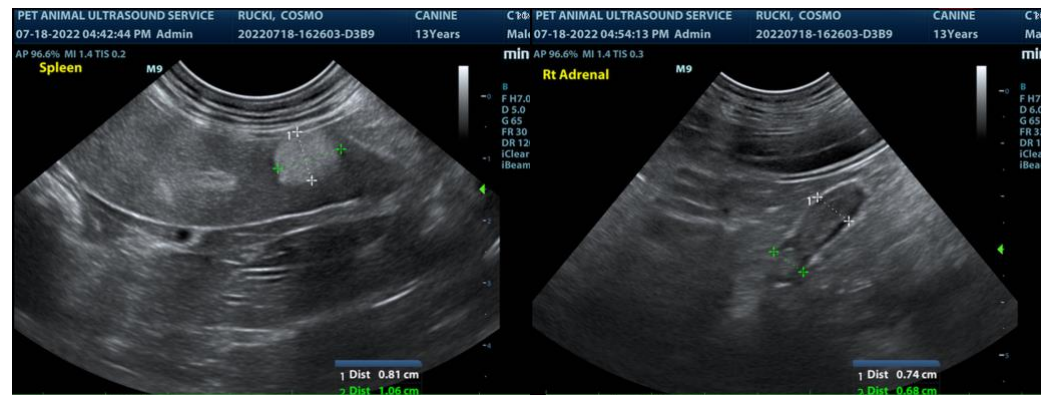
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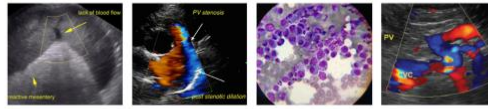
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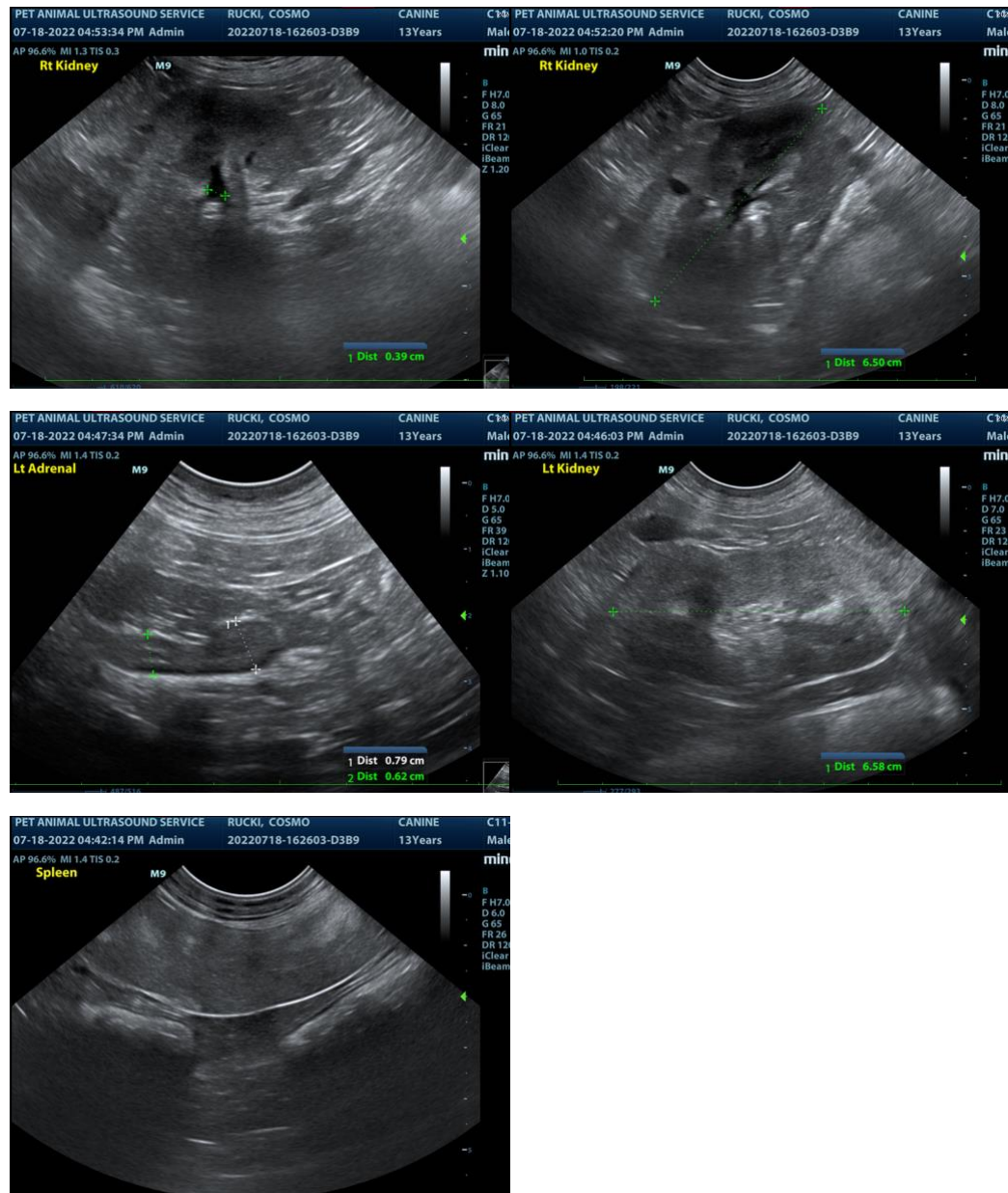
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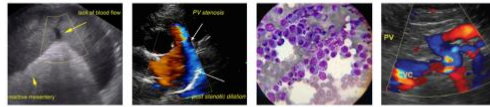


The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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