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Clinical Sonography & Telecytology
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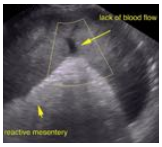
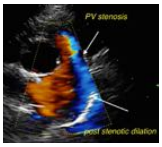
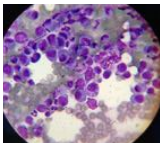
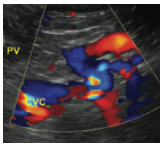





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Yankee Savelkoul

SPECIES
Canine

BREED
Brittany Spaniel

SEX
Neutered male

AGE
12 years

WEIGHT
60 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Dr. Ebersole

HOSPITAL NAME
Scanvet

REFERRING VET
Dr. Kaltsas

INVOICE
31851

DATE
7/20/22

PRESENTING CLINICAL SIGNS

History: Inappropriate urine SG, 1.008 and elevated ALP. DDx renal, liver, HAC. Sedated with Butorphanol IV.
Abnormal PE/Chem/CBC/UA Results: PE: BCS 7/9 ALP 1,580 USG 1.008 Previous AUS, report attached (3/10/2020): suspect chronic degenerative renal disease as cause of low urine SG.

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 was noted. Ureteral papillae were normal.

The residual prostate was uniform and measured 1.64 cm.

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 5.33 cm. The right kidney measured 5.4 cm.

Adrenal Glands

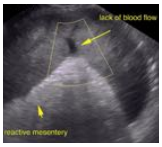
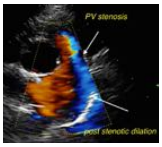
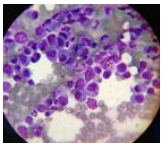
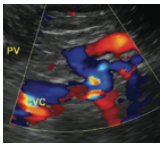
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 2.91 x 1.81 cm at the cranial pole and 0.68 cm at the caudal pole. The left adrenal gland measured 2.35 x 0.72 cm at the cranial pole and 0.65 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 was noted.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Multi-focal, hypoechoic nodular changes were noted throughout the liver. 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

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was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were 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

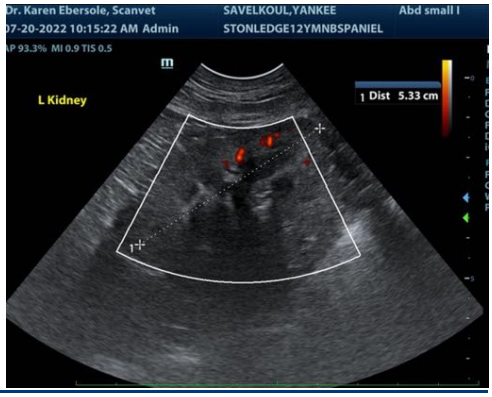
Moderate degenerative renal changes, non-specific.

Age related hepatic changes with remodeling and micronodular changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are largely expected for this age patient. Bile acid profile can be considered. Subjectively the kidneys do not appear end stage. Partial water deprivation test is warranted to assess the ability to concentrate. The adrenal glands are structurally unremarkable. There is a potential for emerging renal failure. Therefore, BUN and creatinine should be monitored carefully as well as inflammatory sediment.

Bile acid profile is warranted to assess if isosthenuria is related to emerging hepatic failure given the diffuse changes. Subjectively the kidneys appear to have further degenerative changes compared to the prior sonogram.



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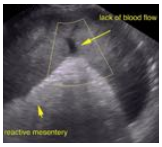
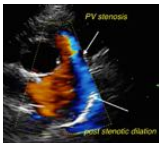
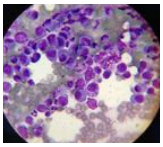
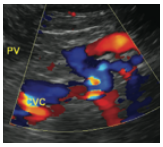

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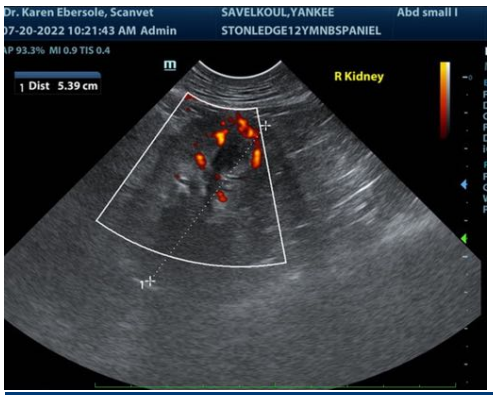

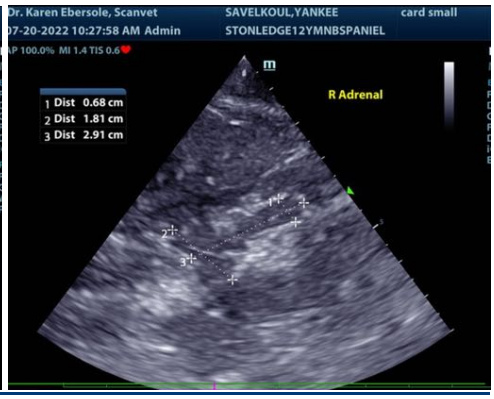

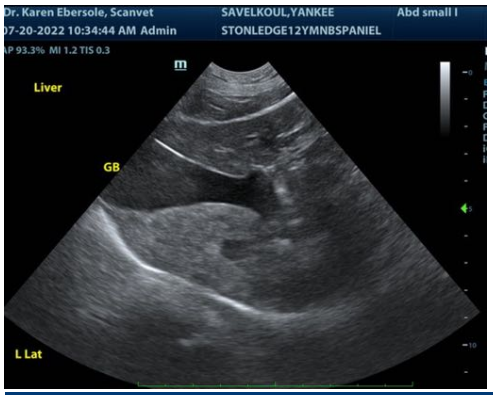

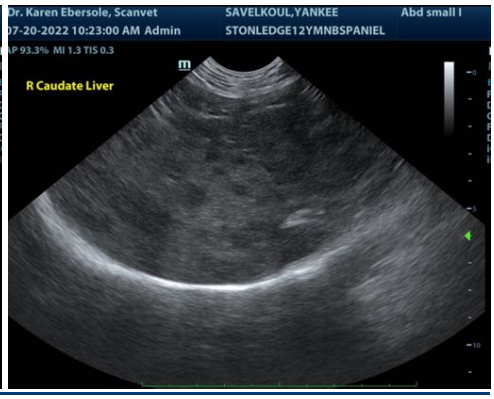

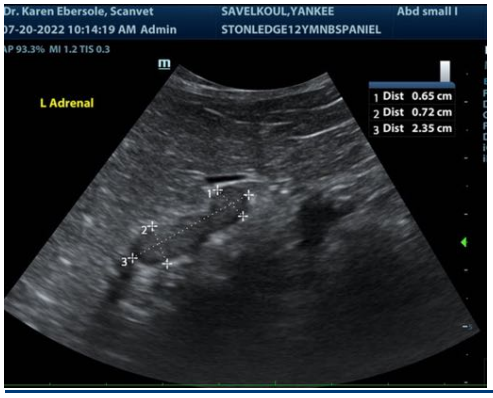

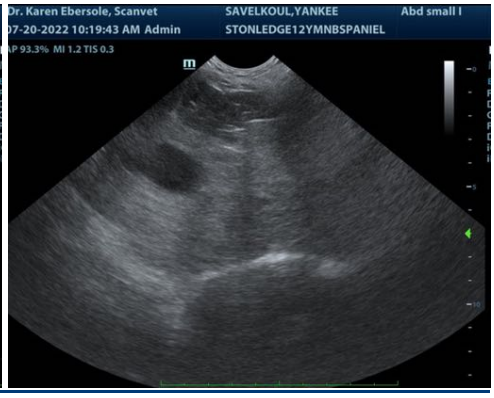

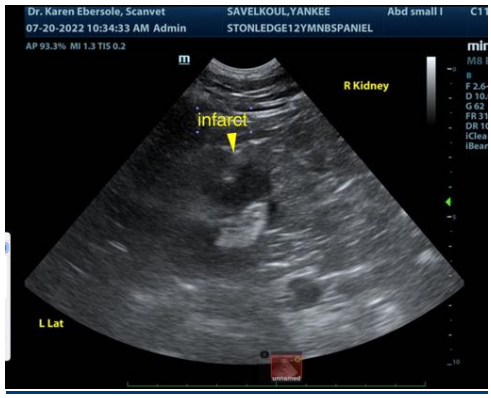

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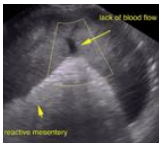

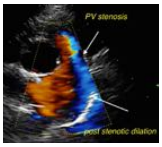

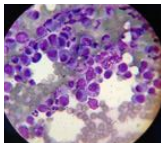
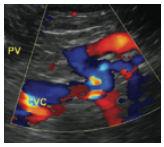

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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