



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Guinness Florio	Had seizure like episode for first time the other day. Anemic on bloodwork. Want to r/o neoplasia. Abnormal PE/Chem/CBC/UA Results: Mild anemia and increase Creat. BW included.
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The <b>urinary bladder</b> , 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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.
Lab X	
<b>SEX</b>	The <b>kidneys</b> 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 right kidney measured 5.6 cm. The left kidney measured 6.0 cm.
Neutered Male	
<b>AGE</b>	
7	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
86	Both <b>adrenal glands</b> 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 1.09 cm x 0.33 cm at the cranial pole and 0.32 cm at the caudal pole. The right adrenal gland measured 2.08 cm x 0.55 cm at the cranial pole and 0.47 cm at the caudal pole.
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV	The <b>spleen</b> was folded upon itself caudally and 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.
DABVP, Cert. IVUSS	
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Dr. Christensen	The <b>liver</b> presented slight increased portal markings. Normal hepatic size. No evidence of significant disease. The gallbladder and common bile duct were unremarkable.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Tranquility Vet Clinic	The <b>gastrointestinal</b> presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropy" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. No evidence of obstruction was present. Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.
<b>REFERRING VET</b>	
Dr. Christensen	
<b>INVOICE</b>	
44209	
<b>DATE</b>	
7/20/23	



**PATIENT** *Pancreas*

Guinness Florio

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

**Free Abdomen**

**BREED**

Lab X

Rapid view of the heart revealed no evident pathology in the right auricle or pericardium.

**SEX**

Neutered Male

**ULTRASONOGRAPHIC FINDINGS**

- Minor hepatic remodeling – history of cholangitis likely, yet changes were subtle.
- Minor intestinal thickening
- Age related renal changes
- Folded spleen

**AGE**

7

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of predisposing issues that would be responsible for the seizure activity. Skull CT with contrast recommended.

**WEIGHT**

86

**SonoPath CT Services** are offered at the SonoPath Imaging and Veterinary Education Center, 141 Main St (rt 206), Andover, New Jersey, a 20-minute drive west on route 80/206 North from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at

**INTERPRETED BY**

Eric Lindquist, DMV

<https://sonopath.com/services/vetimaging/>

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Christensen

**HOSPITAL NAME**

Tranquility Vet Clinic

**REFERRING VET**

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7/20/23





**PATIENT**

Guinness Florio

**SPECIES**

Canine

**BREED**

Lab X

**SEX**

Neutered Male

**AGE**

7

**WEIGHT**

86

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**HOSPITAL NAME**

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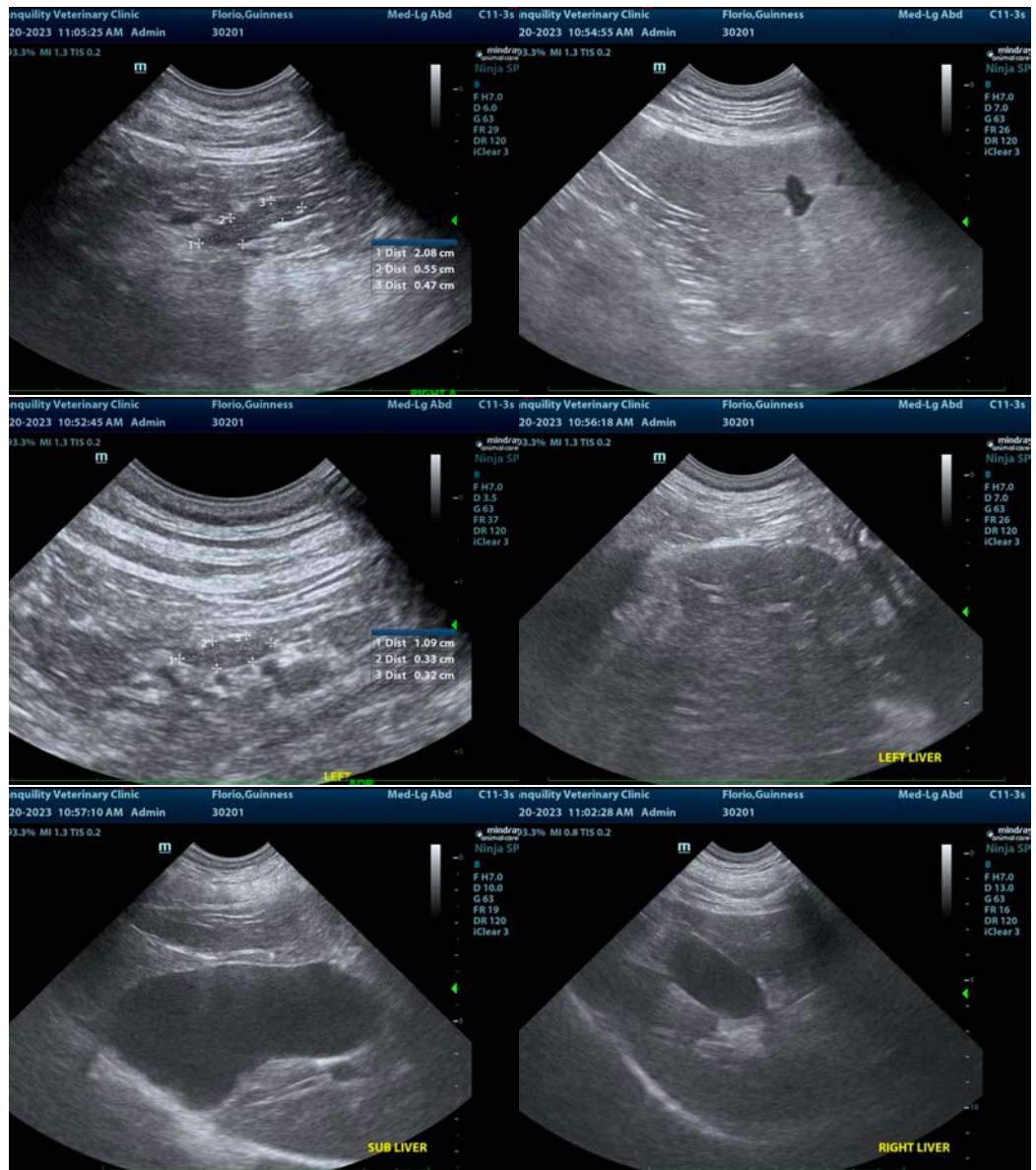
Dr. Christensen

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**PATIENT**

Guinness Florio

**SPECIES**

Canine

**BREED**

Lab X

**SEX**

Neutered Male

**AGE**

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**WEIGHT**

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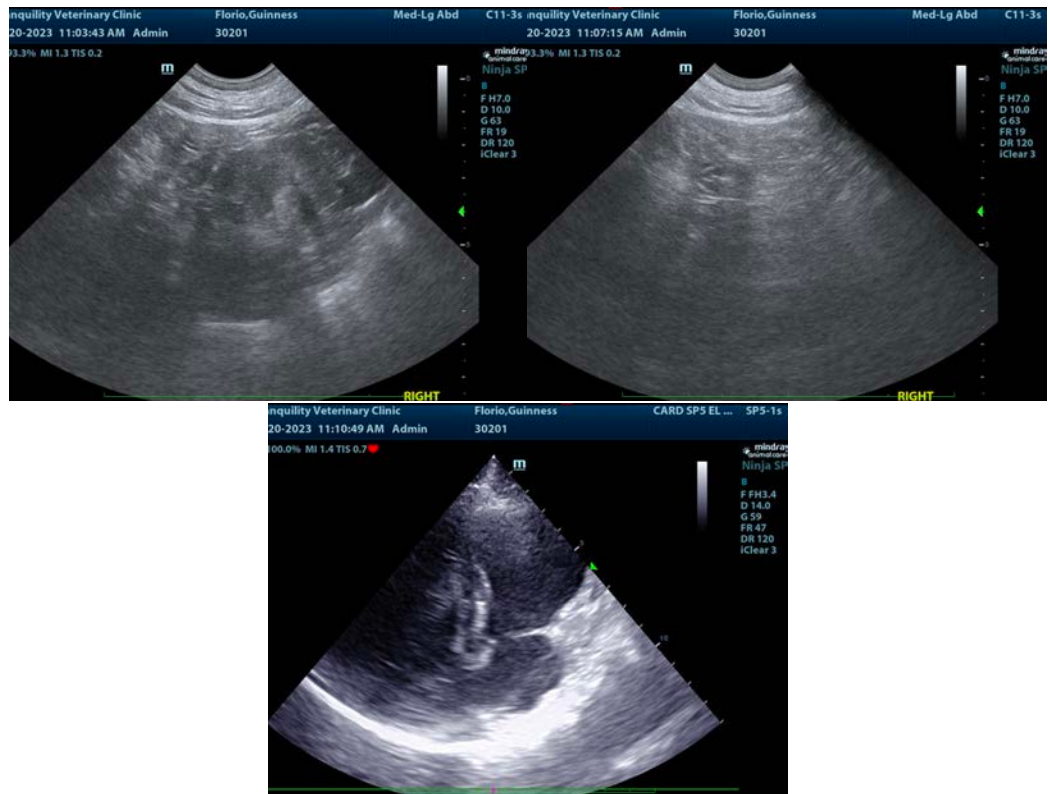
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**DATE**

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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**

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