



PATIENT PRESENTING CLINICAL SIGNS

Django Lee No clinical signs.
Abnormal PE/Chem/CBC/UA Results: ALP 3545, ALT 145, Chol 378, TG 1016, PSL 210, Urine SG 1.036, pH= 6, 21-50 CaOxcrystals

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Mixed

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

SEX

Neutered Male

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 5.23 cm. The right kidney measured 6.0 cm. An anechoic cyst (0.73 cm) was noted in the medial cortex of the left kidney.

AGE

9 Years

WEIGHT

57.5 Pounds

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV

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 left adrenal gland measured 0.45 cm. The right adrenal gland measured 2.29 cm x 1.23 cm at the cranial pole and 1.45 cm at the caudal pole.

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Spleen

Val Shumskaya

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 were noted.

HOSPITAL NAME

Companion Vet Hospital

REFERRING VET

Liver

Dr. Spitz

The **liver** was relatively normal in size with coarse architecture. Multifocal hypoechoic nondisruptive nodular changes were noted. The gallbladder and common bile duct were unremarkable.

INVOICE

Gastrointestinal

23558

DATE

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.

7/21/23



PATIENT *Pancreas*

Django Lee

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

ULTRASONOGRAPHIC FINDINGS

BREED

- Geriatric abdomen
- Left kidney anechoic cyst
- Vacuolar hepatopathy/nodular hyperplasia liver pattern

Mixed

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Neutered Male

FNA of the liver could be considered for further definition +/- bile acid profile yet the changes appear to be subjectively benign. Minimal potential for neoplasia.

AGE

9 Years

WEIGHT

57.5 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Val Shumskaya

HOSPITAL NAME

Companion Vet Hospital

REFERRING VET

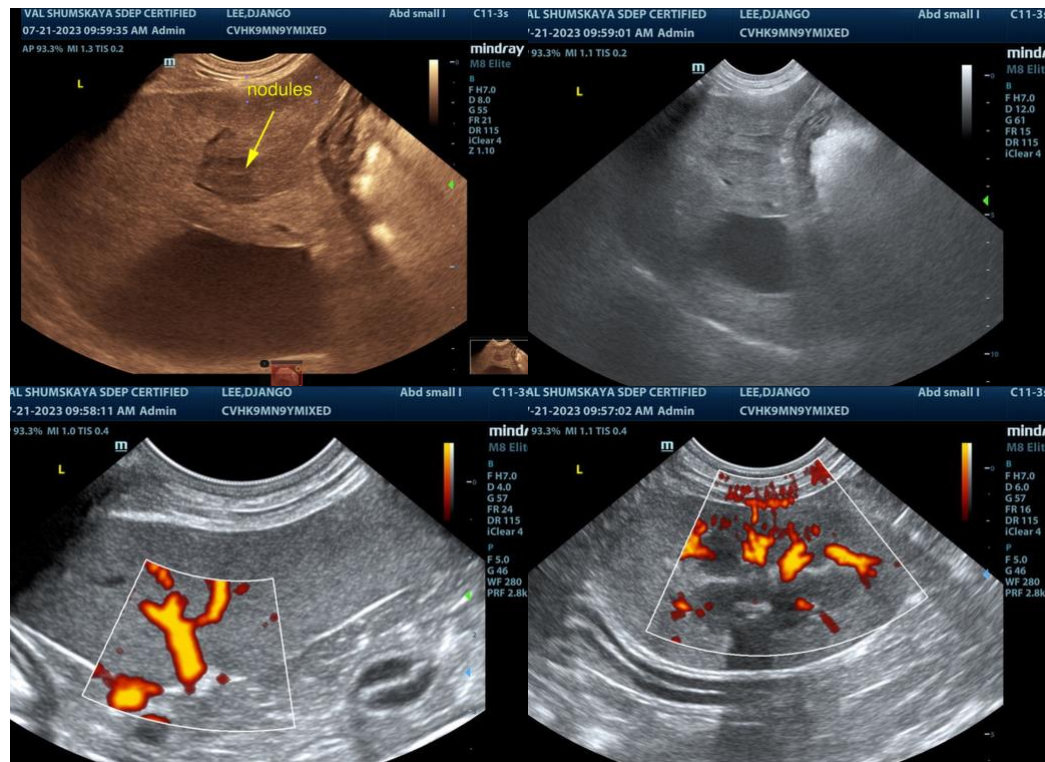
Dr. Spitz

INVOICE

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PATIENT

Django Lee

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

9 Years

WEIGHT

57.5 Pounds

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IMAGING PERFORMED BY

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Companion Vet
Hospital

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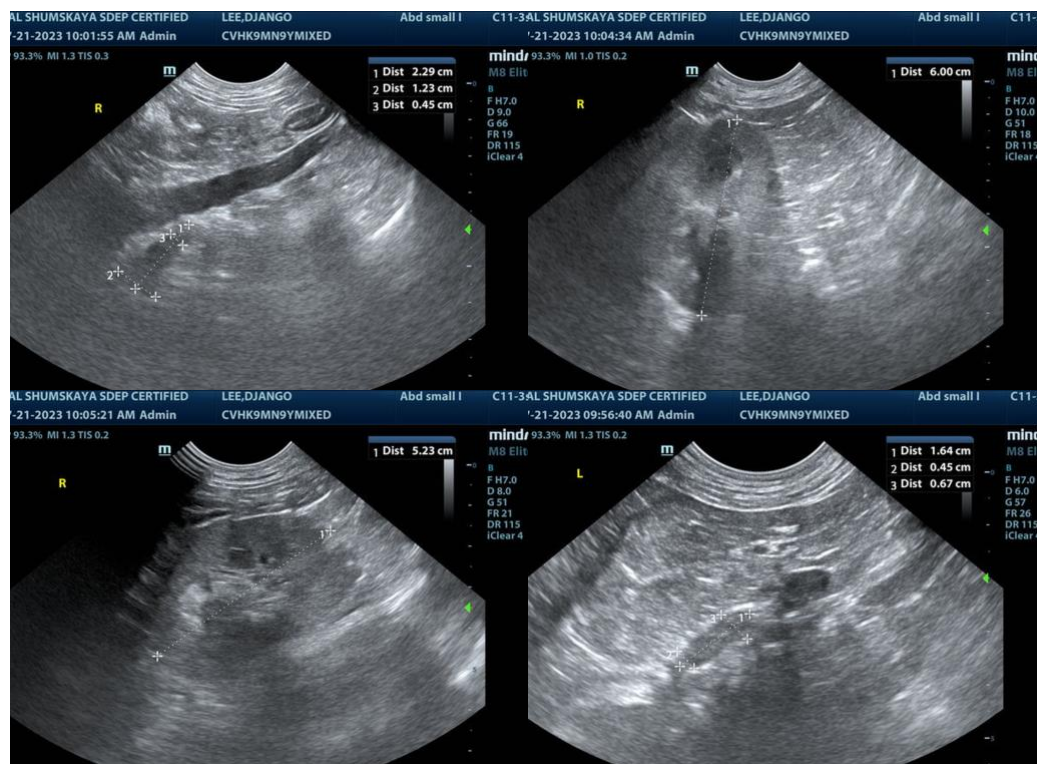
Dr. Spitz

INVOICE

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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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