



PATIENT

Charlie Goff

SPECIES

Canine

BREED

Mixed

SEX

Neutered male

AGE

15 years

WEIGHT

58.7 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ertunc

HOSPITAL NAME

Healing Spirit Animal
Wellness

REFERRING VET

Dr. Ertunc

INVOICE

32054

DATE

7/28/22

PRESENTING CLINICAL SIGNS

History: 10 day history of hyporexia and lethargy. Had transient diarrhea, now soft formed stool. No vomiting. No PU/PD

Abnormal PE/Chem/CBC/UA Results: PE= Tensing with abdominal palpation, otherwise WNL. CBC: Lym= 0.38 (1-4.8), MCHC= 30.8 (31-39), otherwise WNL. Chem/T4 all WNL.

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 measured 1.0 cm.

The **left kidney** 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 6.0 cm. The right kidney was not visualized.

Adrenal Glands

The left **adrenal gland** was visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The left adrenal gland measured 1.96 x 0.92 cm at the cranial pole and 0.77 cm at the caudal pole. The right adrenal gland was not visualized.

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 submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. A slight amount of gallbladder sand was noted.



PATIENT

Gastrointestinal

Charlie Goff

Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Minor transit of medication or similar is noted in the small intestine. 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.

SPECIES

Canine

BREED

Pancreas

Mixed

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

Structurally unremarkable abdomen.

15 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

58.7 lbs

There was no evidence of significant disease from an abdominal standpoint. The changes are expected for this age patient. Further evaluation of the chest, CNS and orthopedic status is all indicated. Further imaging of the right kidney and right adrenal is warranted possibly under sedation to ensure that occult disease is not present as it may be influencing the current status.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

IMAGING PERFORMED BY

Dr. Ertunc

HOSPITAL NAME

Healing Spirit Animal
Wellness

REFERRING VET

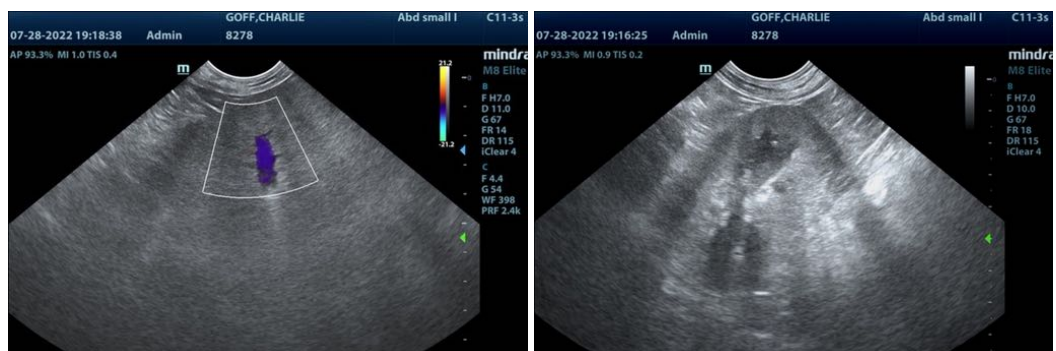
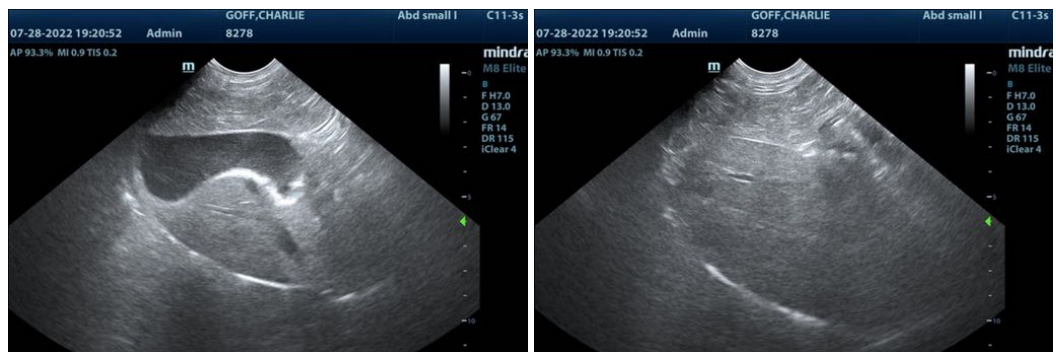
Dr. Ertunc

INVOICE

32054

DATE

7/28/22





PATIENT

Charlie Goff

SPECIES

Canine

BREED

Mixed

SEX

Neutered male

AGE

15 years

WEIGHT

58.7 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ertunc

HOSPITAL NAME

Healing Spirit Animal
Wellness

REFERRING VET

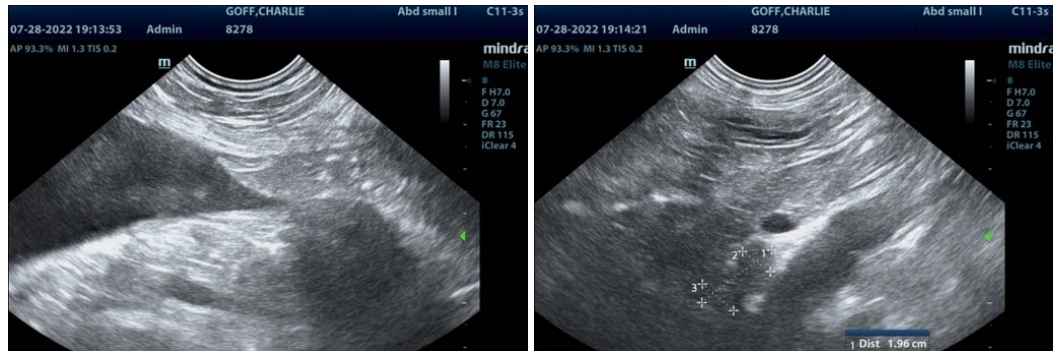
Dr. Ertunc

INVOICE

32054

DATE

7/28/22



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