



PATIENT PRESENTING CLINICAL SIGNS

Gracie Burgener Persistent hematuria Had trazodone this AM for light sedation - is a high anxiety patient

SPECIES Abnormal PE/Chem/CBC/UA Results: ALT (sgpt) - 124 (hi) , Alk Phos - 235 (hi), UREA nit- 36(hi), BUN/creat - 28(hi), cholesterol - 514(hi), PrecisionPSL - 189(hi) u/a +4 hematuria, +2 protein, RBC - TNTC

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Hound X **Urinary System**

SEX The **urinary bladder** revealed a dorsal wall mass measuring 2.6 cm. The mass appears pedunculated. Concurrent bladder sand and calculi noted. The pelvic urethra was not visualized.

Spayed Female

AGE 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. Mineralization noted in both kidneys. The left kidney measured 6.43 cm. Cortical infarct noted in the cranial pole of the left kidney. The right kidney also presented cortical infarct. The right kidney measured 6.0 cm.

10 Years

WEIGHT
48.6

Adrenal Glands

INTERPRETED BY

The **left adrenal gland** was 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 0.40 cm.

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The **right adrenal gland** was not visualized.

IMAGING PERFORMED BY

Spleen

Heather

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

ACC Flanders

REFERRING VET

Liver

Dr. Hallihan

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia. Occasional hypoechoic nodule and cyst noted, non-disruptive.

INVOICE

43700

DATE

7/3/23

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.



PATIENT *Pancreas*

Gracie Burgener

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

Hound X

- Dorsal bladder mass and concurrent sand
- Moderate degenerative renal changes with corticomedullary mineralization, non-obstructive, and cortical infarcts.
- Benign hepatopathy

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

10 Years

The mass appears to be resectable. However, I cannot rule out micrometastasis in the deep pelvic urethra. Further imaging of the urethra would be ideal. Chest radiographs warranted to assess for metastatic disease followed by dorsal bladder wall resection and sand removal. Likely carcinoma, possibility of polypoid hyperplasia.

WEIGHT

48.6

INTERPRETED BY

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IMAGING PERFORMED BY

Heather

HOSPITAL NAME

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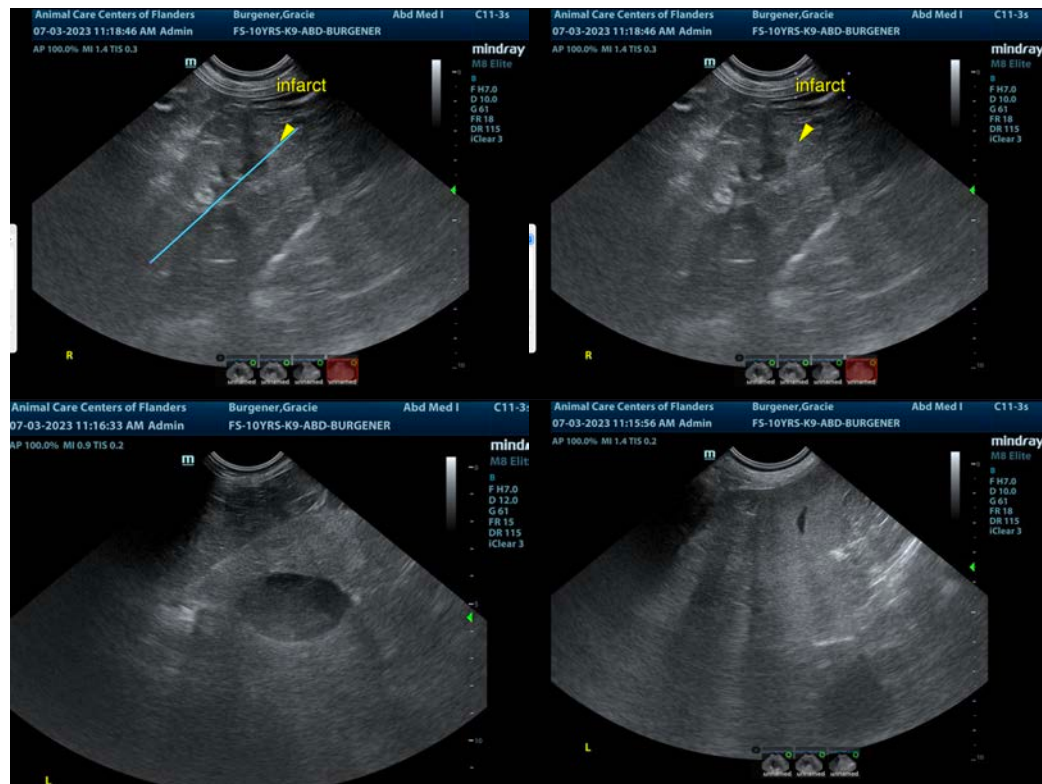
Dr. Hallihan

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PATIENT

Gracie Burgener

SPECIES

Canine

BREED

Hound X

SEX

Spayed Female

AGE

10 Years

WEIGHT

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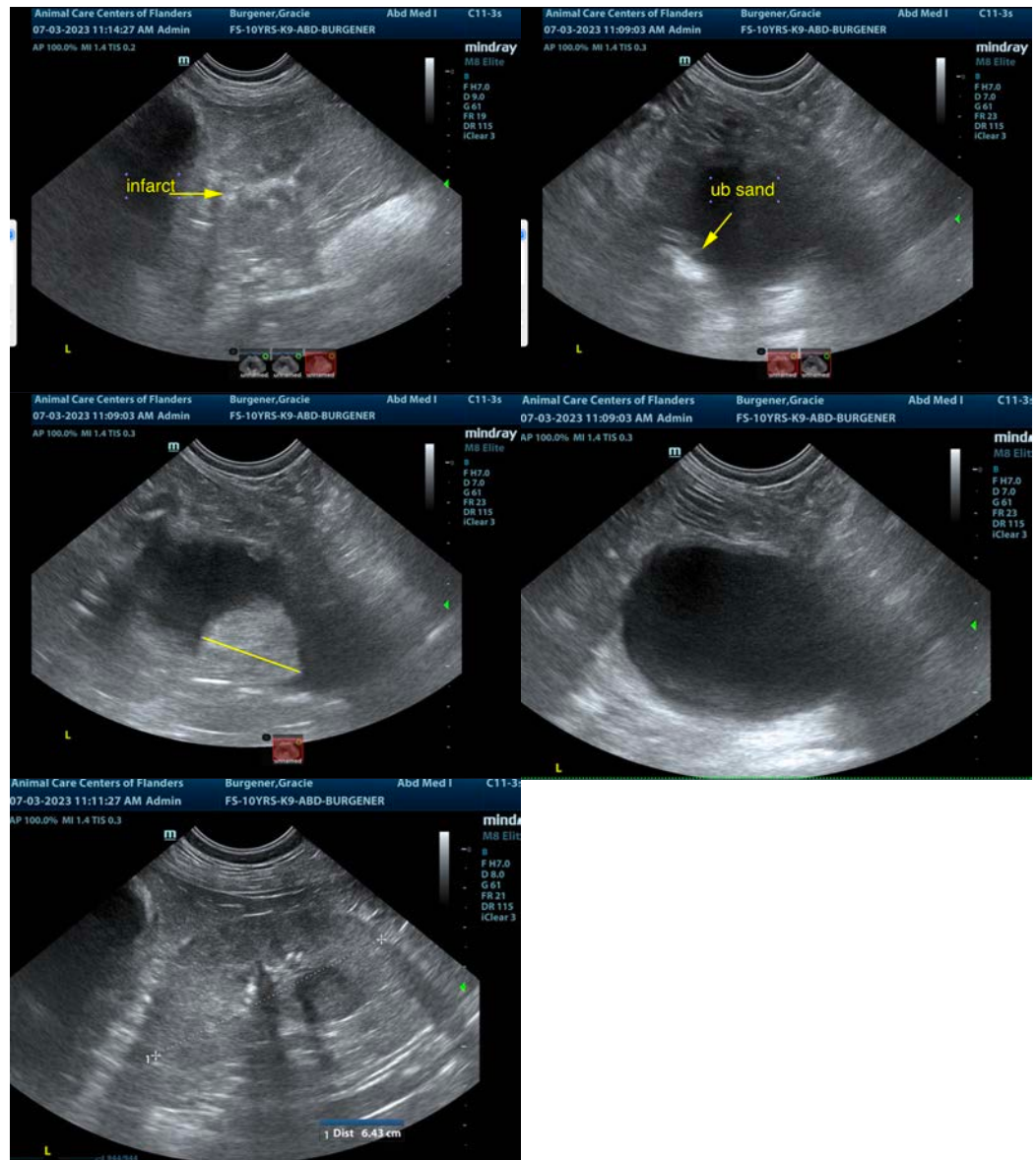
Dr. Hallihan

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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.

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