



**PATIENT PRESENTING CLINICAL SIGNS**

Bauer VanAusdall

Acute onset of inappetence, lethargy, and gagging/vomiting in the last 24 hours. Historically has been hacking with terminal retch for the last 6-7 months. In June presented for diarrhea and lethargy where ALT/ALP were noted to be elevated on labwork (ALT 143, ALP 506). Liver values rechecked 2 weeks ago and revealed slightly improved liver values (ALT 133, ALP 416).

**SPECIES**

Canine

**BREED**

Labrador Retriever

Abnormal PE/Chem/CBC/UA Results: PE - T: 103.8 F; P: 150 - clear, no murmurs/arrhythmias; R: 60/pant Tense abdomen on palpation, yellow diarrhea noted on rectal exam. CBC/Chem/T4/UA pending at Antech today.

**SEX**

Neutered Male

**AGE**

10 Years 1 Month

**WEIGHT**

68 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**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 were noted. Ureteral papillae were normal.

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 6.9 cm. The right kidney measured 7.2 cm. Slight pinpoint mineralizations noted.

**Adrenal Glands**

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 0.50 cm at the cranial pole and 0.51 cm at the caudal pole.

The region of the **right adrenal gland** was unremarkable.

**Spleen**

The **spleen** presented multifocal hypoechoic nodular changes up to 0.77 cm. FNA strongly encouraged.

**Liver**

The **liver** presented coarse architecture and increased portal markings. Hypoechoic nodular changes noted. Consistent with chronic inflammatory hepatopathy/chronic fibrosing cholangitis. The gallbladder was 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.

**INVOICE**

44498

**DATE**

7/30/23

**HOSPITAL NAME**

Craig Road AH

**REFERRING VET**

Dr. Sarah Jansen

Dr. Cathleen Whitcraft



**PATIENT**

**Pancreas**

Bauer VanAusdall

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**

Labrador Retriever

Reactive mesenteric lymph nodes noted, measuring up to 2.0 cm x 1.0 cm.

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

**SEX**

Neutered Male

**ULTRASONOGRAPHIC FINDINGS**

- Splenic nodules – differentials include splenitis (possibly suppurative), round cell neoplasia, emerging hemangiosarcoma less likely. Hyperplasia is a strong potential.
- Chronic fibrosing cholangitis/cholangiohepatitis liver pattern
- Age related renal changes with mineralization.

**AGE**

10 Years 1 Month

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

68 Pounds

Bile acid profile and core liver biopsy warranted. FNA of the spleen warranted with cytology and culture. Core liver biopsy would be ideal. FNA may provide preliminary inflammation. Prognosis is guarded depending upon cytology and histopathology results. Leptospirosis titers warranted regarding the hepatic presentation.

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**IMAGING PERFORMED BY**

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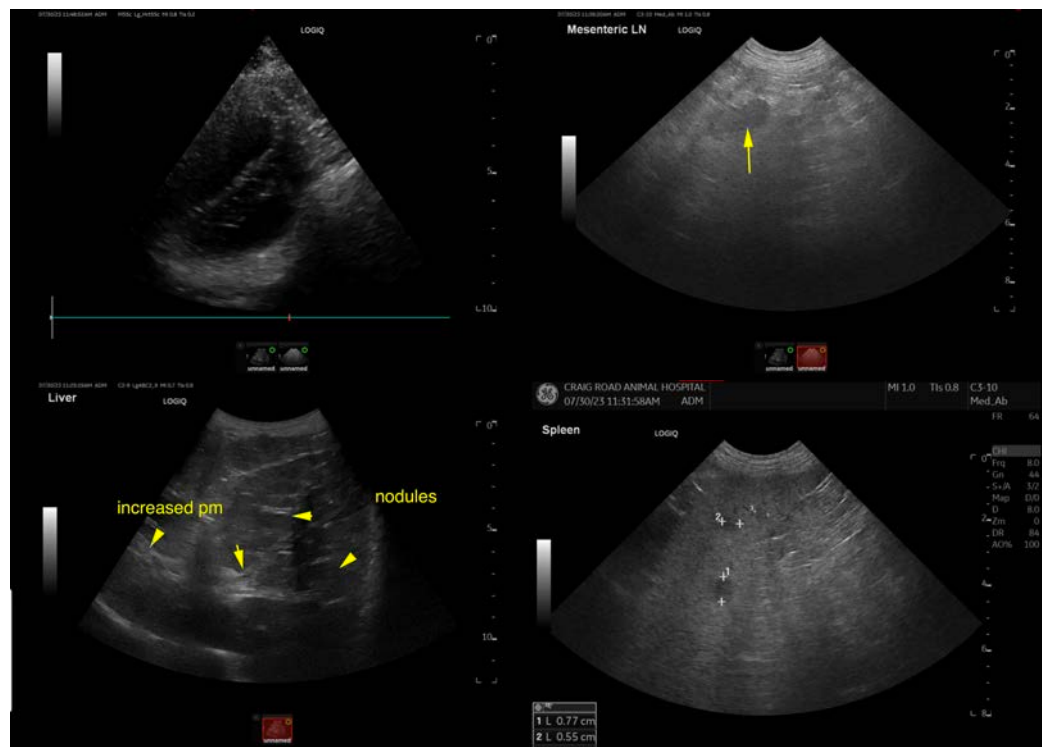
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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