



**PATIENT**

Greycie Bates

**SPECIES**

Canine

**BREED**

Boxer

**SEX**

Spayed Female

**AGE**

6 Months

**WEIGHT**

35 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Harold Mike Beard

**HOSPITAL NAME**

Animal Care Vet  
Center

**REFERRING VET**

Dr. Chris Ward

**INVOICE**

39260

**DATE**

7/7/22

**PRESENTING CLINICAL SIGNS**

Polyuria, polydipsia, capricious appetite. Smallest dog in litter, very active but poor eater. RDVM is suspicious of congenital renal dz.

Abnormal PE/Chem/CBC/UA Results: Thin puppy. CBC normal. Chemistry increased creatinine, BUN, Phos, T Protein, amylase.

**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 **left kidney** presented significantly disruptive architecture with thickened irregular cortices and irregular renal pelvises as well as cortical cysts. Blood flow was subnormal with irregular vascular contour. The left kidney measured 3.0 cm.

The **right kidney** presented similar changes to the left, measuring 4.8 cm. The left kidney appeared to be more dramatically affected than the right. However, both revealed disrupted architecture.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**Spleen**

The **spleen** presented subtle micronodular changes with normal size and contour otherwise. Reactive state or splenitis suspected.

**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. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

**Gastrointestinal**

A minor amount of non-shadowing, non-obstructive ingesta was noted in the **stomach**. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

**Pancreas**

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.



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**PRIMARY FINDINGS**

- Strong concern for primary renal dysplasia – moderate on the left, mild to moderate on the right

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**SECONDARY FINDINGS**

- Micronodular spleen
- Gastric ingesta

**BREED**

Boxer

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Renal biopsy would be necessary for further definition. Screening for congenital Addison's would also be valid.

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Spayed Female



**AGE**

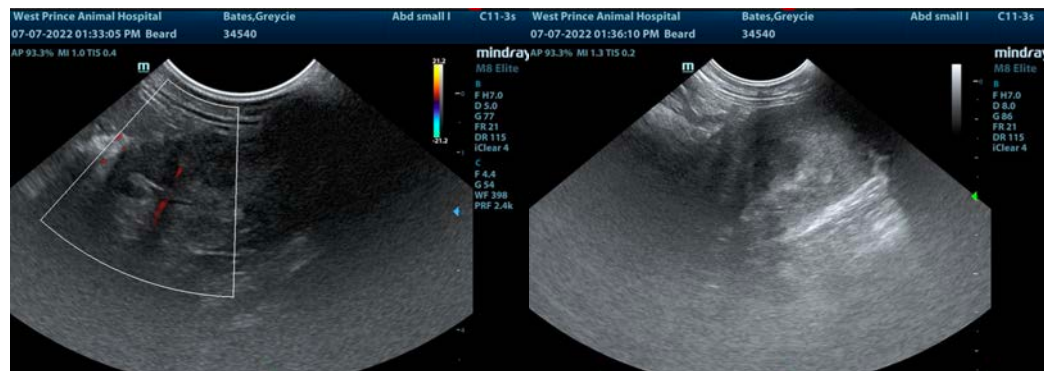
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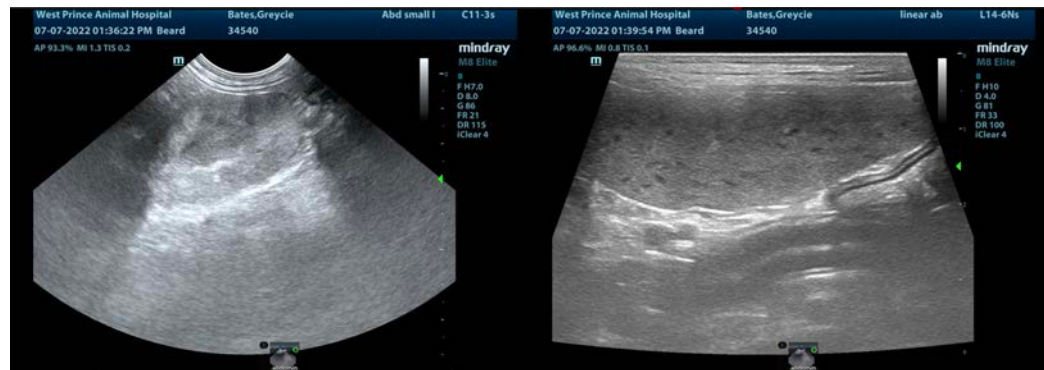


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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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Canine

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.

## BREED

Boxer

**Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com**

[info@SonoPath.com](mailto:info@SonoPath.com)

## SEX

Spayed Female

## AGE

6 Months

## WEIGHT

35 Pounds

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