



PATIENT PRESENTING CLINICAL SIGNS

Lacie Coren
SPECIES Canine
BREED Labrador Retriever Mix
SEX Spayed female
AGE 13 years
WEIGHT 66 lbs

History: We have been monitoring her ALP, which has been in the 400-600 range since 2019. However, in April of this year, the ALP was 1095, with an ALT of 192. Denamarin started as well as Hill's L/D food. Rechecked bloodwork a few weeks ago, and the ALP was 2010, and the ALT was 241. Low dose dexamethasone suppression test performed last week, and did not support hyperadrenocorticism. The owners have noted she is fairly PU/PD recently. Noted today that she will occasionally seem to have a little dysuria after she has urinated. Primarily performing ultrasound to try to rule out a tumor, abdominal fluid, etc. Wanting to also get a better idea if can begin an anti-inflammatory pain rx such as Galliprant, since she seems more uncomfortable lately with some likely arthritis.
Abnormal PE/Chem/CBC/UA Results: Recent doubling of ALP, and ALT a little elevated as well.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed apical ventral and apical dorsal bladder wall thickening with minor polypoid changes. This is most consistent with chronic cystitis and mural hypertrophy. There is a minor potential for carcinoma. BRAF testing would be appropriate. This is most consistent with cystitis.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.85 cm. The right kidney measured 6.9 cm.

Adrenal Glands

The left adrenal gland was mildly heterogenous and mildly excessive measuring 2.02 x 0.61 cm at the caudal pole and 0.46 cm at the cranial pole. The right adrenal gland was uniform and measured 2.84 x 0.96 cm at the caudal pole and 0.97 cm at the cranial pole.

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** 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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Murphie

HOSPITAL NAME

Godspeed AC

REFERRING VET

Dr. Murphie

INVOICE

75990

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7/7/23



PATIENT

Gastrointestinal

Lacie Coren

The stomach revealed shadowing luminal structure measuring 3.0 cm. A mild amount of gastric luminal debris was noted. Transit of chyme appeared to be adequate. The small intestine and colon were unremarkable.

SPECIES

Canine

Pancreas

BREED

Labrador Retriever Mix

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

Spayed female

ULTRASONOGRAPHIC FINDINGS

AGE

13 years

Slightly heterogenous left adrenal gland, likely hyperplasia.

Benign hepatopathy.

Chronic cystitis bladder pattern with mural hypertrophy.

Shadowing structure in the pylorus, suspect foreign matter, yet may be oral medication.

WEIGHT

66 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

If any evidence of Cushing's disease is warranted then work-up for PDH is indicated. Oral medication history should be evaluated to assess if this represents residual oral medication. FNA of the liver would be valid. Urine culture and sensitivity is also recommended. If the urine specific gravity is less than 2.020 persistently then work-up for Cushing's is indicated/PDH likely. Blood pressure measurements are also recommended.

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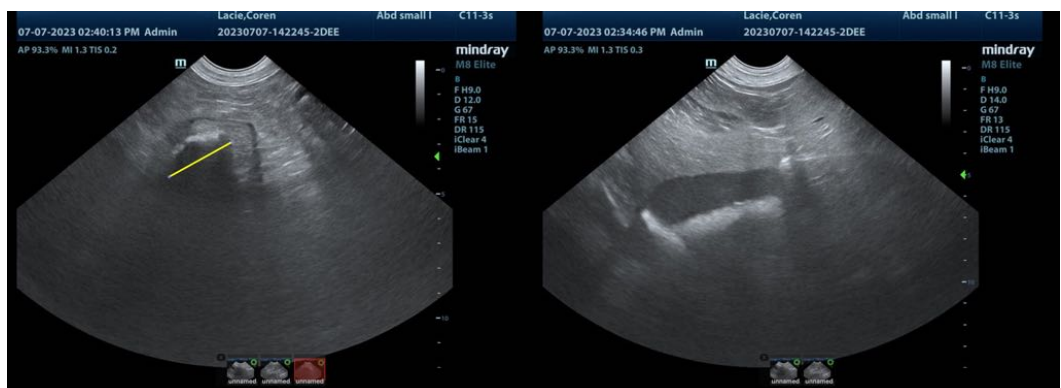
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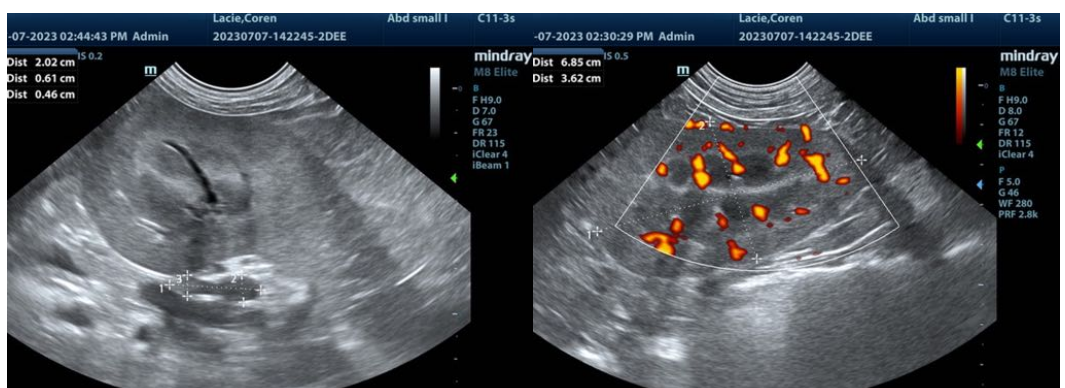
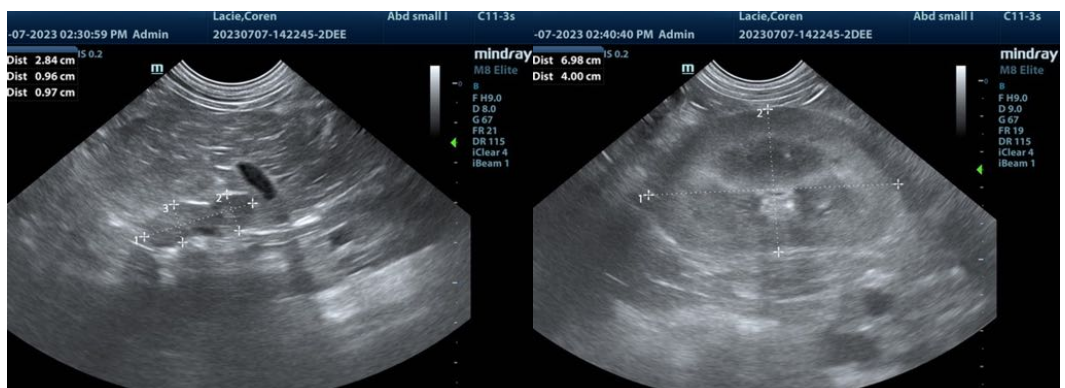
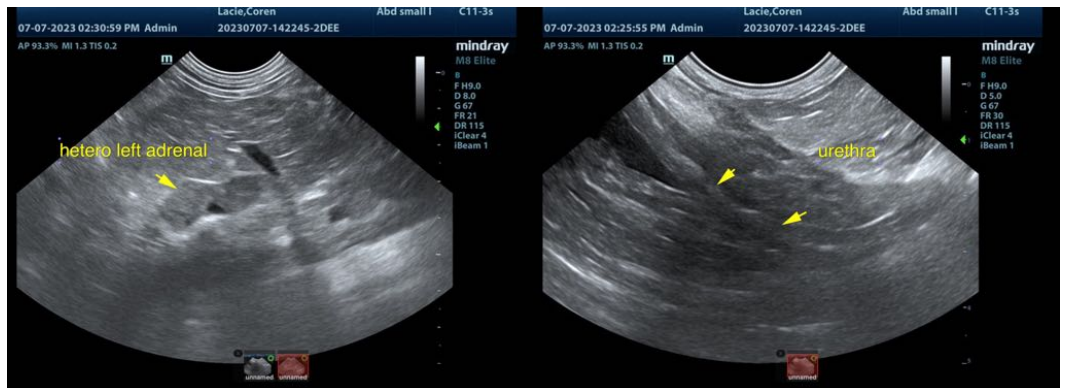
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PATIENT

Lacie Coren

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.

SPECIES

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

Labrador Retriever Mix

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