



PATIENT PRESENTING CLINICAL SIGNS

Louise Grote Hx of being a breeding dog
Abnormal PE/Chem/CBC/UA Results: PE unremarkable

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

Golden Retriever

SEX

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 right kidney measured 7.33 cm. The left kidney measured 6.84 cm.

Female

AGE

8

WEIGHT

82

Adrenal Glands

INTERPRETED BY

Both **adrenal glands** were 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 2.86 cm x 0.41 cm at the cranial pole and 0.36 cm at the caudal pole. The right adrenal gland measured 2.71 cm x 0.52 cm at the cranial pole and 0.43 cm at the cauda pole.

Eric Lindquist, DMV

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Spleen

IMAGING PERFORMED BY

The **spleen** presented a focal hypoechoic expansive nodule measuring 1.81 cm x 0.91 cm with disruption of architecture. The remainder of the spleen revealed slight coarse architecture. The spleen was folded upon itself cranially.

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Liver

Torch Lake Vet Clinic

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.

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Dr. Adrienne Waffle

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Gastrointestinal

DATE

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.

8/1/23



PATIENT

Pancreas

Louise Grote

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

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

Golden Retriever

ULTRASONOGRAPHIC FINDINGS

SEX

Female

- Focal splenic nodule – Differentials include emerging round cell neoplasia, hemangiosarcoma, nodular hyperplasia. However, the concerning issue is that the splenic nodule has disrupted architecture and expands upon the splenic capsule.
- Age related renal changes

AGE

8

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the splenic nodule or direct splenectomy would be advised in this patient, given the breed predisposition to splenic pathology.

WEIGHT

82

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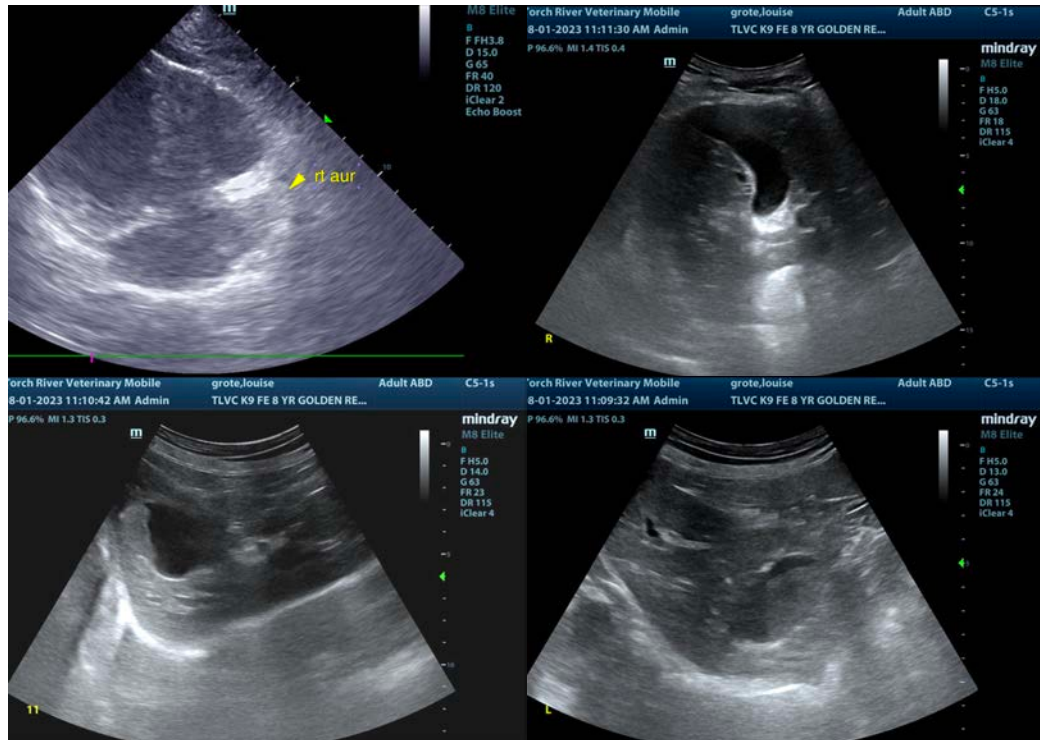
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PATIENT

Louise Grote

SPECIES

Canine

BREED

Golden Retriever

SEX

Female

AGE

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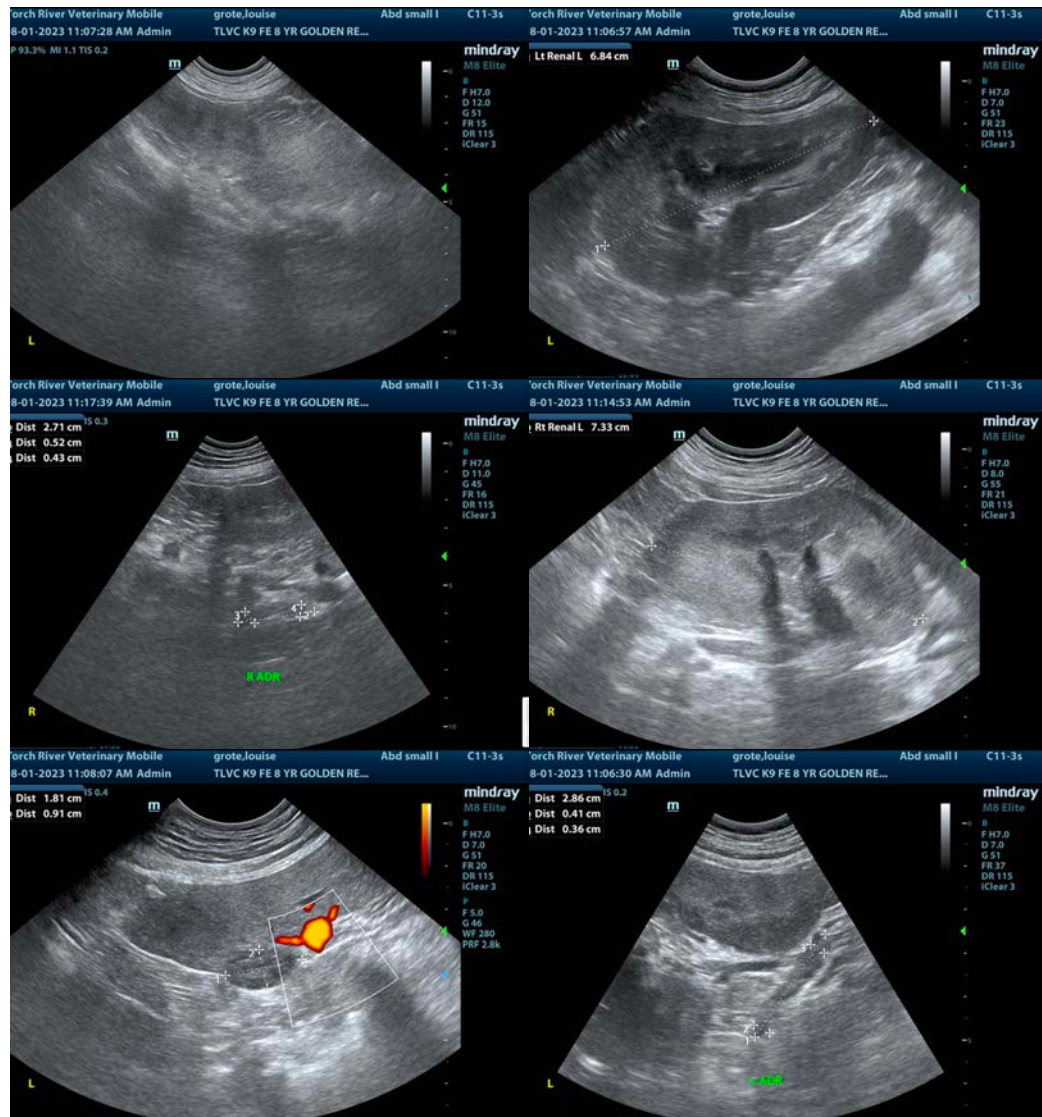
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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