



**PATIENT**

Raven Amend

**PRESENTING CLINICAL SIGNS**

P was presented today for eating toy ball, p did vomit some up during visit. P showed some discomfort on right side of abd despite .8mL of torb on board p did growl.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

German Shepherd X

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.

**SEX**

Spayed Female

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 6.32 cm. The right kidney measured 6.22 cm.

**AGE**

2 Years

**Adrenal Glands**

**WEIGHT**

66.6 Pounds

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 right adrenal gland measured 2.14 cm x 0.48 cm at the cranial pole and 0.45 cm at the caudal pole. The left adrenal gland measured 2.27 cm x 0.44 cm at the caudal pole and 0.70 cm at the cranial pole.

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**Spleen**

The **spleen** was uniformly enlarged with relatively uniform parenchyma without evidence of masses. The capsule was mildly swollen. This is most consistent with hypersplenism and reactive hyperplasia deriving from splenic white or red pulp. Typical for the breed. May be palpating thick on clinical exam. However, early infiltrative disease, such as lymphoma or mast cell neoplasia can, at times, present in this manner but not suspected. 25g US-guided FNA would be best in order to ensure only reactive hyperplasia is present. If clinical signs fit with potential neoplasia or mast cell disease, then Benadryl injection (1 mg/pound IM) 15 minutes prior to FNA would be recommended.

**IMAGING PERFORMED BY**

Marco Litchfield

**Liver**

**HOSPITAL NAME**

Sova Animal Hospital

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.

**REFERRING VET**

Dr. Robert Sova

**Gastrointestinal**

**INVOICE**

40276

The upper **gastrointestinal tract** was empty. A minor amount of stool content noted in the colon. No obstructive pattern noted. Cannot rule out passage of foreign matter into the colon. However, the upper gastrointestinal tract was unremarkable.

**DATE**

8/10/22



**PATIENT**

**Pancreas**

Raven Amend

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**

- Hypersplenism pattern – typical for this breed.

**BREED**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

German Shepherd X

No evidence of significant disease.

**SEX**

Spayed Female



**AGE**

2 Years

**WEIGHT**

66.6 Pounds



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Marco Litchfield

**HOSPITAL NAME**

Sova Animal Hospital



**REFERRING VET**

Dr. Robert Sova

**INVOICE**

40276

**DATE**

8/10/22



**PATIENT**

Raven Amend

**SPECIES**

Canine

**BREED**

German Shepherd X



**SEX**

Spayed Female

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.

**AGE**

2 Years

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.

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

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

**WEIGHT**

66.6 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Marco Litchfield

**HOSPITAL NAME**

Sova Animal Hospital

**REFERRING VET**

Dr. Robert Sova

**INVOICE**

40276

**DATE**

8/10/22