



PATIENT

Dozer Burke

PRESENTING CLINICAL SIGNS

History: Recheck abdominal U/S. Previous adrenal nodule, bladder thickening and mildly enlarged prostate.
Abnormal PE/Chem/CBC/UA Results: Chem, cbc, UA and stool pending. NuQ pending. BP= 149/80.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Golden Retriever

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 was noted. Ureteral papillae were normal.

SEX

Intact male

The prostate measured 2.7 cm and was similar in size compared to the prior sonogram. Slight, heterogenous parenchymal changes without edema striations.

AGE

10 years

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 right kidney measured 6.74 cm. The left kidney measured 7.04 cm.

WEIGHT

77 lbs

Adrenal Glands

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 2.6 x 1.52 cm at the cranial pole and 0.87 cm at the caudal pole. The left adrenal gland measured 2.46x 0.47 cm at the cranial pole and 0.53 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Christensen

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.

HOSPITAL NAME

Tranquility VC

REFERRING VET

Dr. Christensen

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.

INVOICE

46649

DATE

8/16/23



PATIENT

Dozer Burke

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact male

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Christensen

HOSPITAL NAME

Tranquility VC

REFERRING VET

Dr. Christensen

INVOICE

46649

DATE

8/16/23

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. No associated abnormal lymphatic activity was noted.

Pancreas

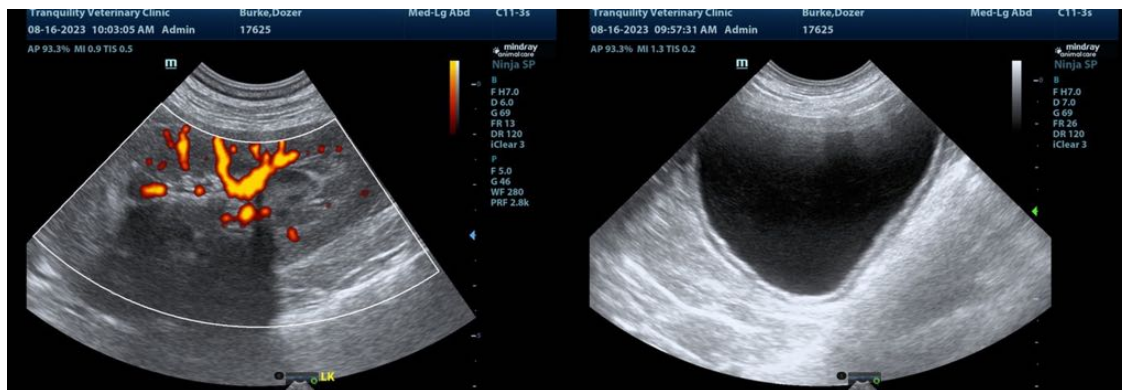
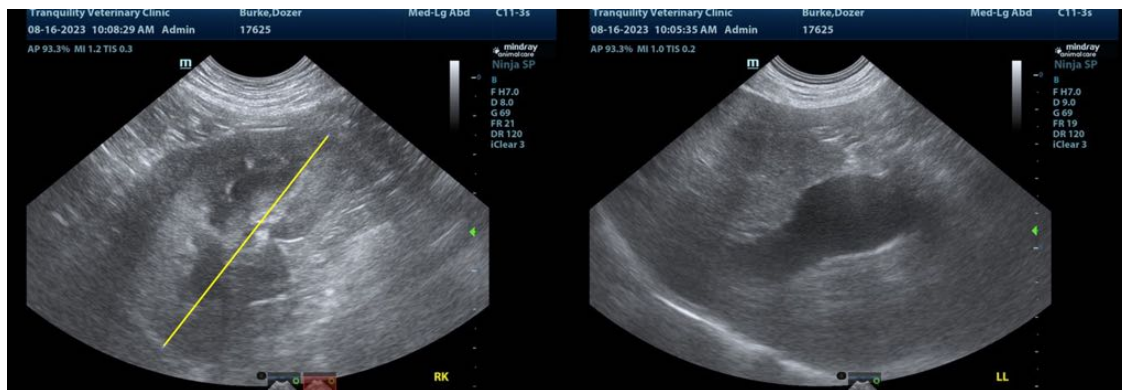
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Resolved prostate, no evidence of inflammation, minor BPH pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No adrenal gland nodules were noted in this patient. Superimposition of fat or resorbing nodular changes can create a nodular appearance on adrenal and other organs. There was no evidence of residual pathology. I recommend continuation of current protocol. If any inflammatory sediment is present in the urine then culture is indicated. If prostatic signs return then a recheck sonogram is indicated.





PATIENT

Dozer Burke

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact male

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Christensen

HOSPITAL NAME

Tranquility VC

REFERRING VET

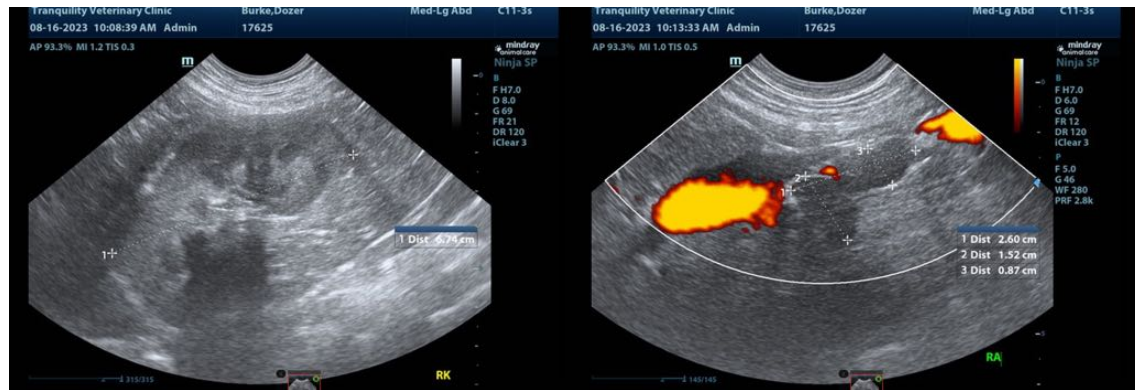
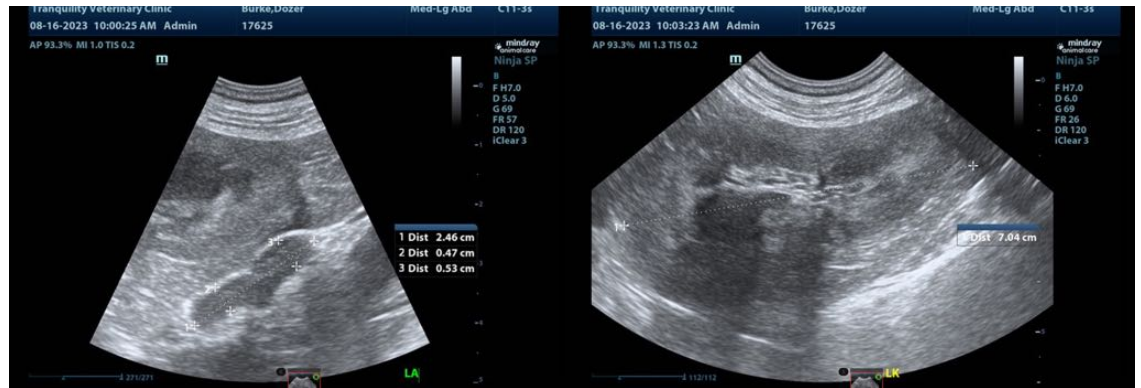
Dr. Christensen

INVOICE

46649

DATE

8/16/23



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.

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