



**PATIENT**

Napoleon Check  
Ferreira

**SPECIES**

Canine

**BREED**

Papillon

**SEX**

Neutered Male

**AGE**

11 Years 10 Months

**WEIGHT**

17 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**HOSPITAL NAME**

Greenwood Lake AH

**REFERRING VET**

Dr. Lover

**INVOICE**

12552

**DATE**

8/17/21

**PRESENTING CLINICAL SIGNS**

History: Urinary Accidents, Hx of Calcium oxalate urolith 2013

Abnormal CBC/Chem Findings: BUN 30, Creat 1.9 (5/2021)

Abnormal U/A Findings: Protein Neg (5/2021)

Urine Spec Gravity: 1.016

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** revealed 3.7 cm of sand accumulation, non-obstructive at the time of the sonogram. Minor bladder wall thickening was noted. The residual prostate was uniform, measuring 0.8 cm. Post prostatic urethra was unremarkable. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction. Iliac trifurcation was unremarkable.

The **kidneys** presented significant degenerative changes with pelvic and corticomedullary calculi, cortical cysts, and remodeling with infarcts. The left kidney measured 4.87 cm. The right kidney revealed similar changes to the left with pyelectasia. The right kidney measured 3.85 cm. Pelvic calculus in the right kidney measured 1.7 cm. Cortical infarcts noted in the right kidney.

**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 left adrenal gland measured 2.15 cm x 0.63 cm. The right adrenal gland measured 0.86 cm x 2.0 cm.

**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 were noted.

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

**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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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**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.

**BREED**

Papillon

**ULTRASONOGRAPHIC FINDINGS**

- Moderate degenerative renal changes with cortical infarcts, remodeling and non-obstructive calculi
- Bladder sand, non-obstructive
- Age-related hepatic changes

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Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

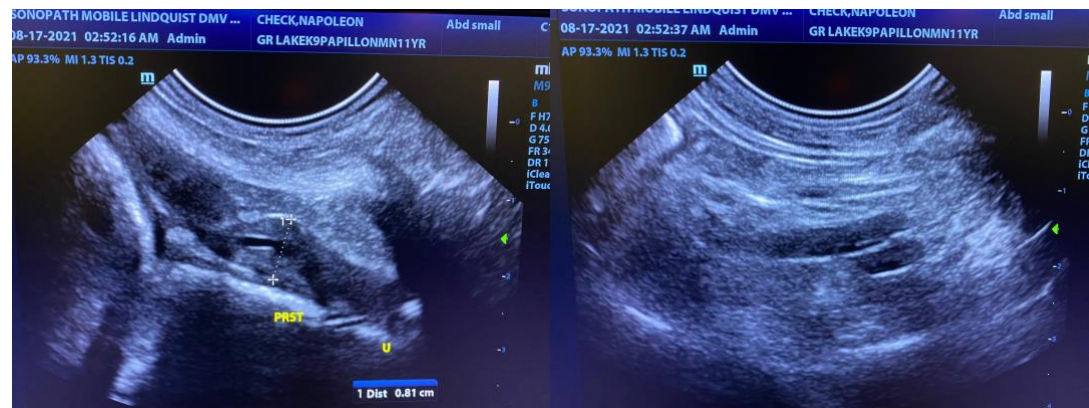
Cystostomy, sand analysis, culture and blood pressures all indicated.

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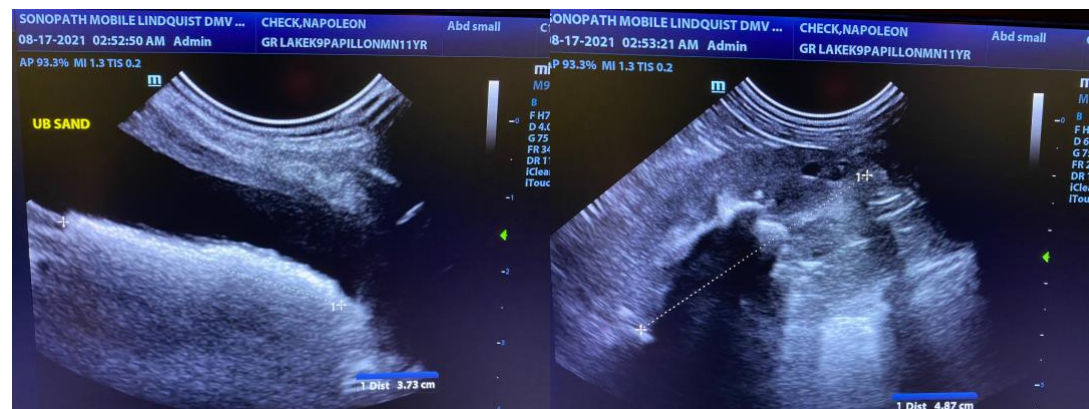


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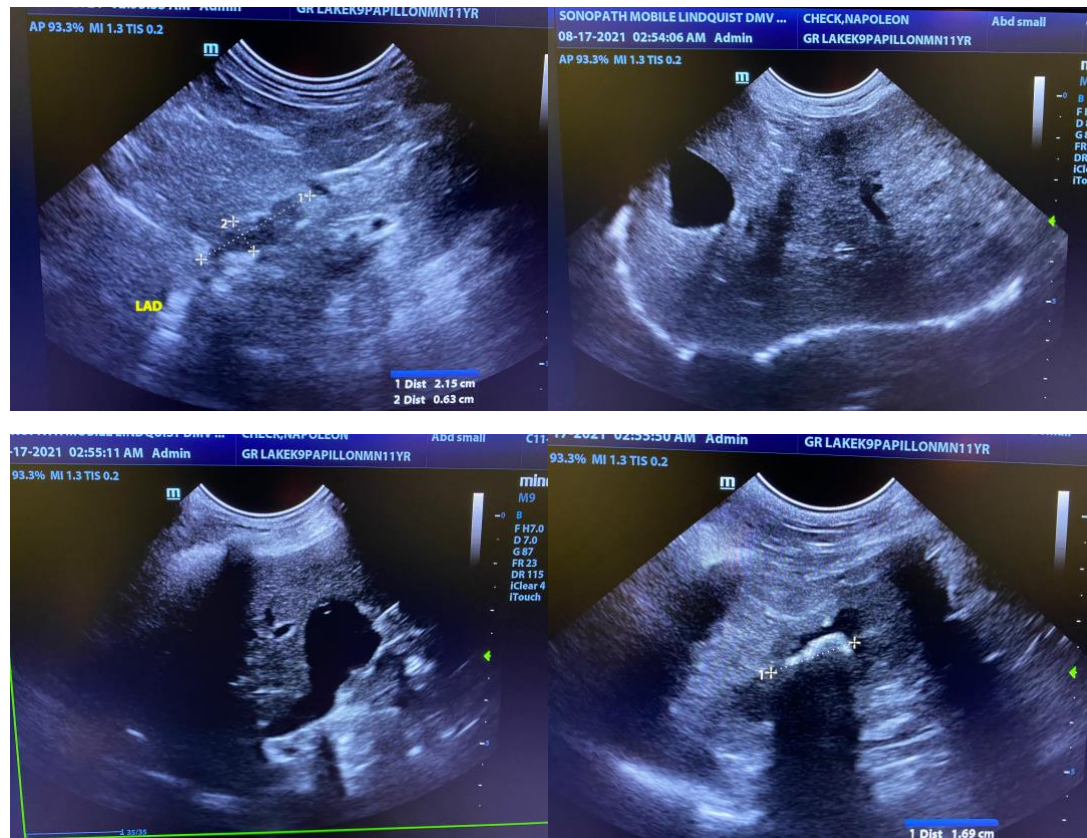
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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