

**DATE**

8/18/21

PRESENTING CLINICAL SIGNS

History: P has been having accidents in the house. Its more when she is laying down, she's leaking. Not necessarily overnight but when laying and sleeping during the day. Note: Pet seen for allergic rxn 6/19- Gave Dexamethasone and Diphenhydramine. The leakage didn't start until maybe mid-July that O noted.

PATIENT

Piper Gonce

Current Medications: Bravecto 44-88 lbs. (3-mo) chewable tablet-1-tab po q12 weeks year-round. Sentinel 26-50 lbs. (1-m) chewable tablet-1-tab po q4 weeks year round

Lab Results: SDMA16 increased. Creatinine 1.7 Increased. Urine SG was 1.002 and 1.008. Urine culture was negative. Lepto AB an PCR both negative. Have not tested a cortisol yet but a thought to screen for atypical Addison's?

SPECIES

Canine

Radiographs: Not provided by the veterinarian.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: IV utilized for AUS

Stat Report: not requested

BREED

Labrador Retriever

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SEX**

Spayed Female

Urinary System

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.

AGE

5/21/20

The **right kidney** revealed loss of corticomedullary definition. The right kidney revealed pyelectasia measuring 1.36 cm. The right kidney measured 5.4 cm. Blood flow to the right kidney was mildly subnormal on power Doppler assessment. The left kidney was normal in size and contour. The left kidney measured 5.85 cm.

WEIGHT

49.8 lbs

In some views a 0.4 cm anechoic tubular structure was present without positive color flow signals. I am concerned for right ectopic ureter in this patient, but cannot be completely confirmed. CT with contrast or IVP would be warranted.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**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 1.85 x 0.58 cm at the caudal pole and 0.62 cm at the cranial pole. The left adrenal gland measured 1.87 x 0.55 cm at the caudal pole and 0.52 cm at the cranial pole.

HOSPITAL NAME

Rolling Hills AH

REFERRING VET

Dr. Gividen

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.

INVOICE

91344

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.

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. The mesenteric lymph nodes measured 1.79 cm and 1.64 cm. The lymph nodes were reactive.

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.

Free Abdomen

Sublumbar lymph node was reactive and measured 3.7 x 0.85 cm.

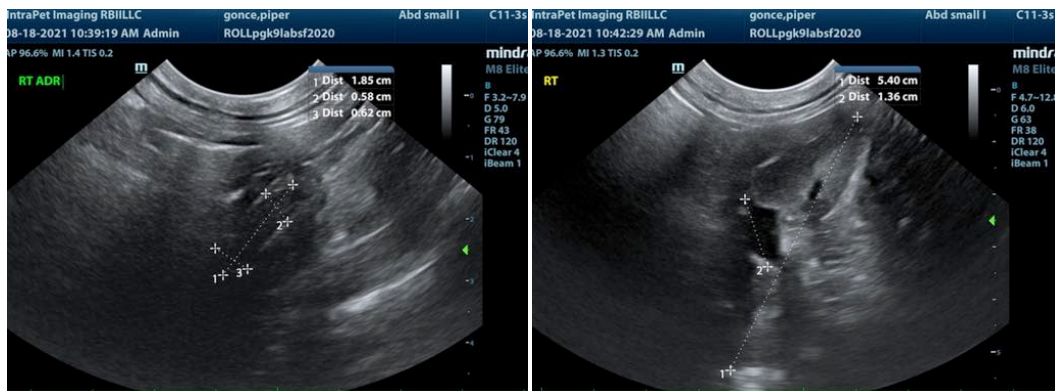
ULTRASONOGRAPHIC FINDINGS

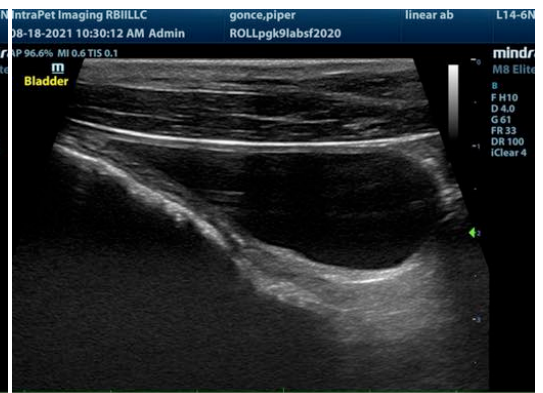
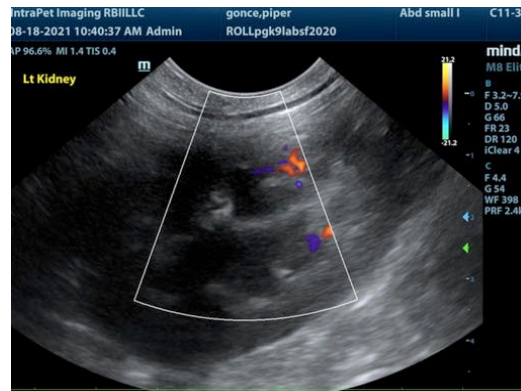
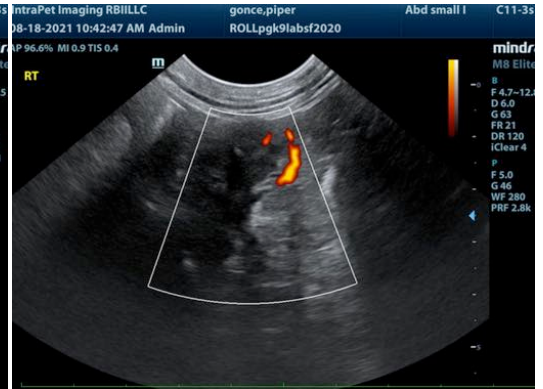
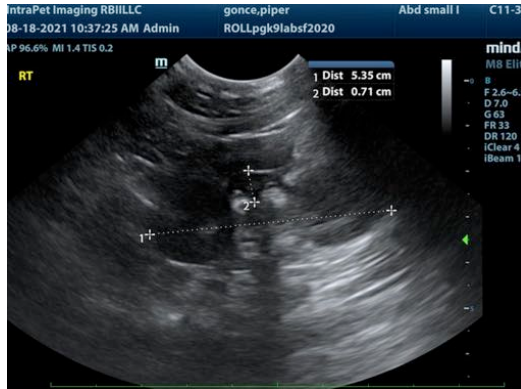
Dysplastic right kidney, likely primary congenital dysplasia with irregular renal pelvis. Possible right ectopic ureter.

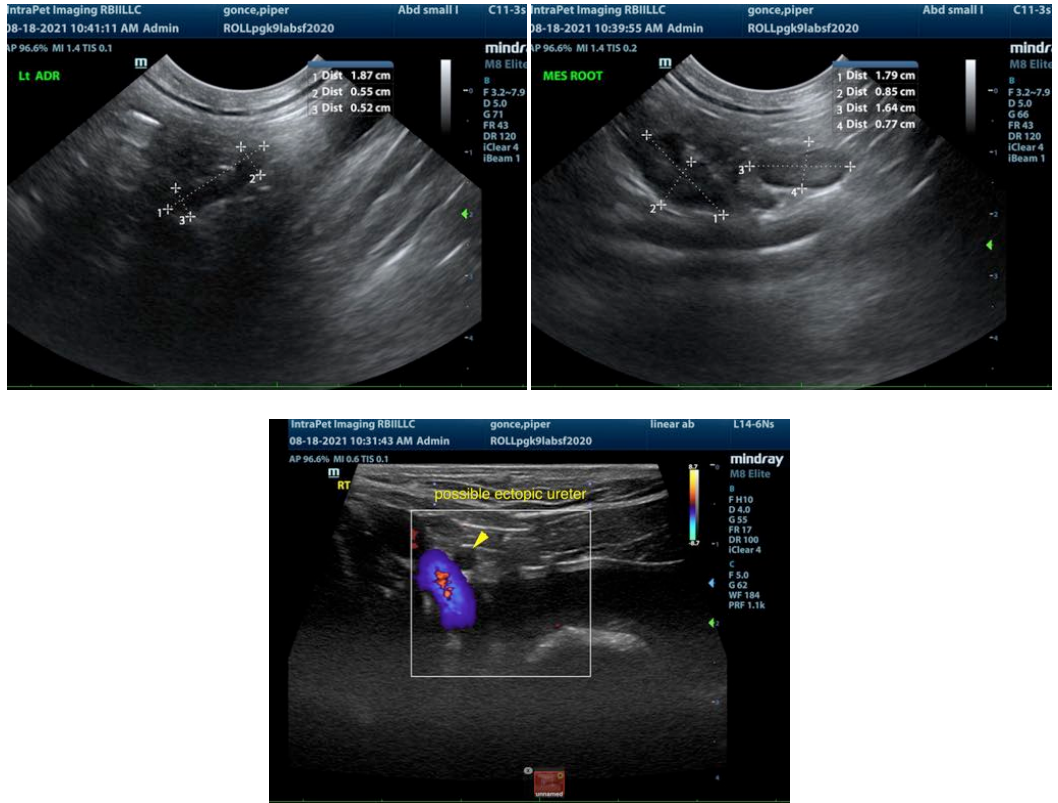
Minor mesenteric and iliac lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT with contrast or IVP is warranted.







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.

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