



PATIENT

Lucy Wall

SPECIES

Canine

BREED

Dalmation

SEX

Spayed Female

AGE

10 Years

WEIGHT

82.4 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Harmon

INVOICE

16966

DATE

8/22/22

PRESENTING CLINICAL SIGNS

History: HX: Presented 8/21 for lethargy and anorexia, had vomited 24 hours prior to presentation. P icteric on intake. Blood transfusion performed.

Abnormal PE/Chem/CBC/UA Results: Slide agglutination test = Neg for gross agglutination CBC: Regenerative anemia HCT 16.7%, retic 169.9k, Leukocytosis 30.79k, Neutrophilia 21.36k, suspect bands, Lymphocytosis 7.72k, Monocytosis 1.64k, Eosinopenia 0.05k, PLT 375k (wnl) Chem17: Glu 57, Crea 1.4, BUN 37, ALT 2797 (dilution required), ALKP 385, TBil 4.1, Amyl 1584, EPOC: bicarb 9.0, Crea 1.32, Glu 52, K 3.5, LAC 4.88, BUN 44, HCT 14% UA: USG 1.040, pH 9.0, LEU 100, PRO 500, BIL 1, BLD 250. Sedivue: 4DX SNAP = all neg '1 hr post-transfusion PCV 25%, TS 7.2 g/dl BG = 106 Recheck EPOC: bicarb 8.3, Crea 1.58, Glu 78, K 3.9, LAC 3.94, BUN 60, HCT 21%

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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 left kidney measured 6.5 cm. The right kidney measured 6.5 cm.

Adrenal Glands

The **left adrenal gland** was 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 0.5 cm.

The region of the **right adrenal gland** was imaged and revealed no evident pathology.

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** revealed diffuse remodeling with micro- and macro nodular changes. The gallbladder and common bile duct were unremarkable. No evidence of posthepatic disease. Occasional parenchymal cysts were also noted. This is most consistent with nodular hyperplasia and hepatic remodeling. Acute on chronic liver failure is suspected. Leptospirosis and toxin exposure are potentials. Mild potential for



PATIENT

underlying neoplasia. I recommend ultrasound guided FNA of the general parenchyma and nodular changes.

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Gastrointestinal

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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.

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Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

AGE

- Nodular hyperplasia cholangiohepatitis liver pattern without posthepatic obstruction
- Age-related renal changes
- Unremarkable abdomen otherwise

10 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

Mild potential for underlying neoplasia. Acute on chronic hepatic insult is suspected.

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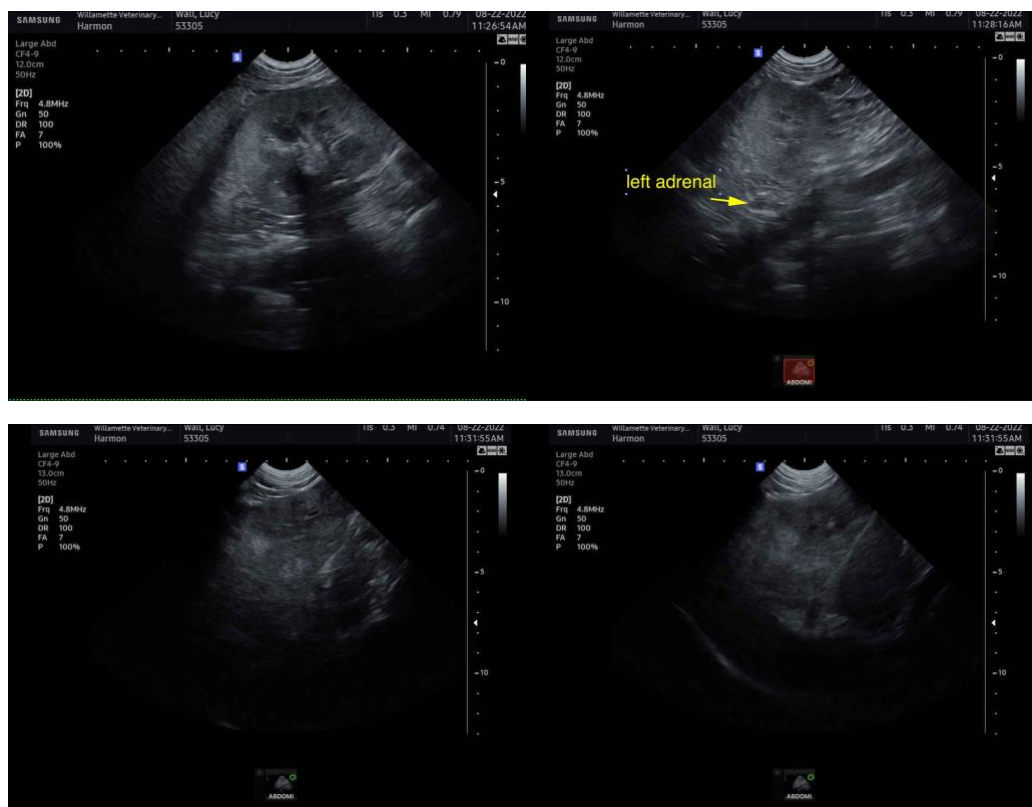
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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DABVP, Cert. IVUSS

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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info@SonoPath.com

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