



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Deuce Slate	History: Hx of seizures Cushing's suspect Owner reports doing well at home Current meds Phenobarbital
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The <b>urinary bladder</b> , 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.
Chihuahua	
<b>SEX</b>	The <b>kidneys</b> revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 right kidney measured 4.09 cm. The left kidney measured 4.1 cm.
Neutered male	
<b>AGE</b>	
8 years	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
11.7 lbs	Both <b>adrenal glands</b> 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 2.05 x 0.89 cm at the cranial pole and 0.62 cm at the caudal pole. The left adrenal gland measured 2.0 x 0.5 cm.
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUS	The <b>spleen</b> 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.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Jenn	The <b>liver</b> images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. A hypoechoic nodule was noted in the left liver and measured 0.7 cm and was non-disruptive. Some 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.
<b>HOSPITAL NAME</b>	
Rockaway AH	
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
46727	
<b>DATE</b>	
8/23/23	



## PATIENT

Deuce Slate

## SPECIES

Canine

## BREED

Chihuahua

## SEX

Neutered male

## AGE

8 years

## WEIGHT

11.7 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

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## 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 **pancreas** was mild and hypoechoic with irregular parenchyma in the left limb with enhanced, surrounding mesentery.

## ULTRASONOGRAPHIC FINDINGS

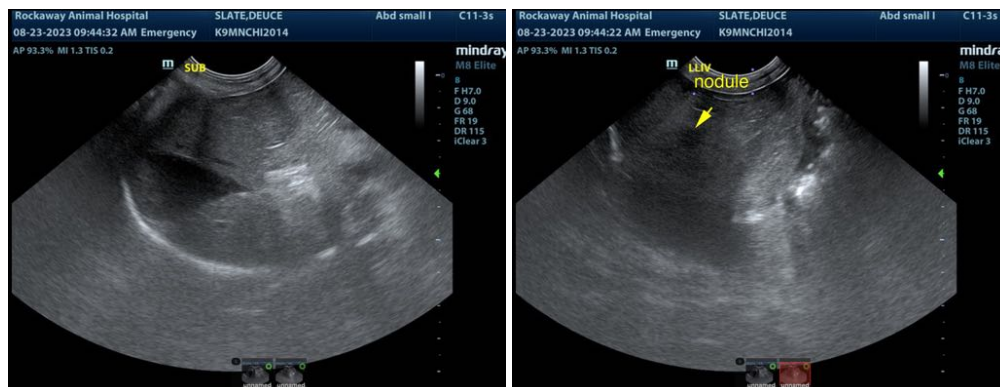
Possible, minor low-grade pancreatitis.

Liver nodule.

Age related abdominal changes.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the seizure activity skull CT with contrast is indicated in this patient if seizure activity is not controllable. Typical Cushing's is unlikely in this patient. However, if the patient appears Cushingoid and urine specific gravity is persistently less than 1.020 then work up for PDH is indicated. A very small percentage of Cushingoid patients may have normal adrenal glands.





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Canine

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**SEX**

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**WEIGHT**

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**INTERPRETED BY**

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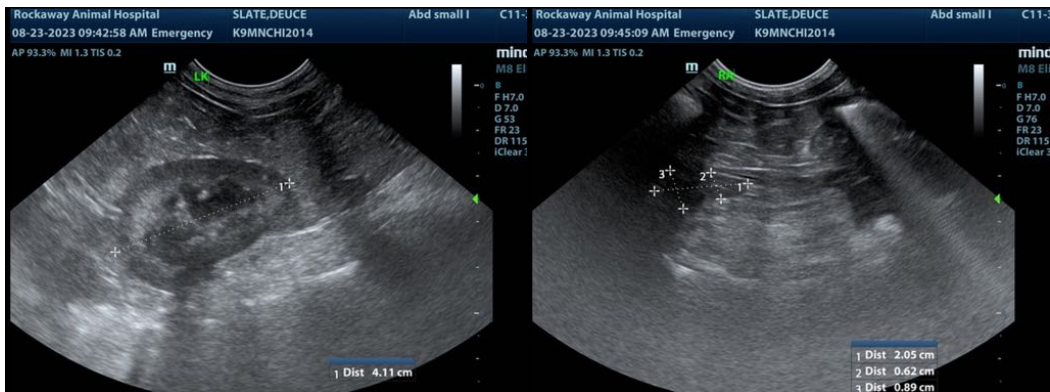
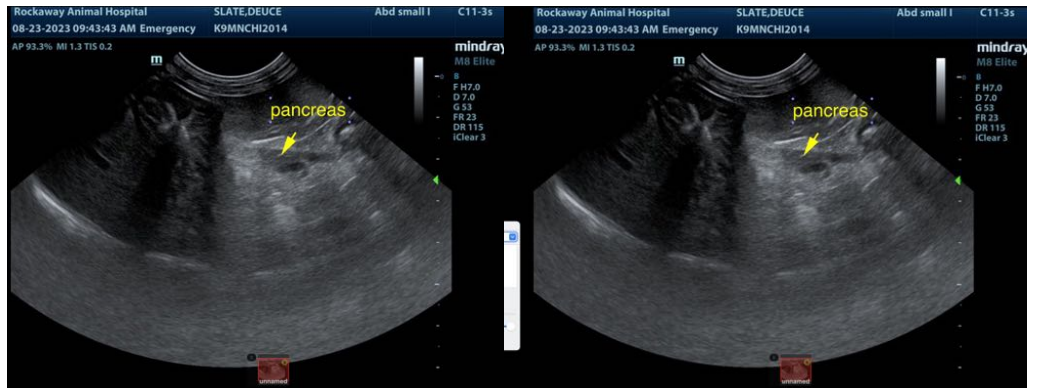
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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