



PATIENT

Cassie Anderson

SPECIES

Canine

BREED

Foxhound Mix

SEX

Spayed Female

AGE

15 years

WEIGHT

62 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Grau

HOSPITAL NAME

Fredon AH

REFERRING VET

Dr. Grau

INVOICE

91503

DATE

8/25/21

PRESENTING CLINICAL SIGNS

History: regenerative anemia discovered on geriatric bloodwork dog has weak painful hips, seems tense/painful in abdomen, very dense....

Abnormal PE/Chem/CBC/UA Results: RBC 4.94, Hct 29.7, Hg 9, reticulocytes 364, albumin 2.6, ALKP 594, SDMA 21, Creat 1.8

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 was noted. Ureteral papillae were normal.

The **kidneys** 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Cortical infarcts and mineralization were noted within the kidneys. The left kidney measured 5.0 cm. The right kidney measured 5.0 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

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.

Liver

The visible **liver** was unremarkable, yet the gallbladder was not visualized.

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. The stomach was filled with shadowing foreign material. Transit of chyme appeared to be present in the small intestine.



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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

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Full stomach, possible foreign matter depending on when the patient ate prior to the sonogram.

Moderate degenerative renal changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

15 years

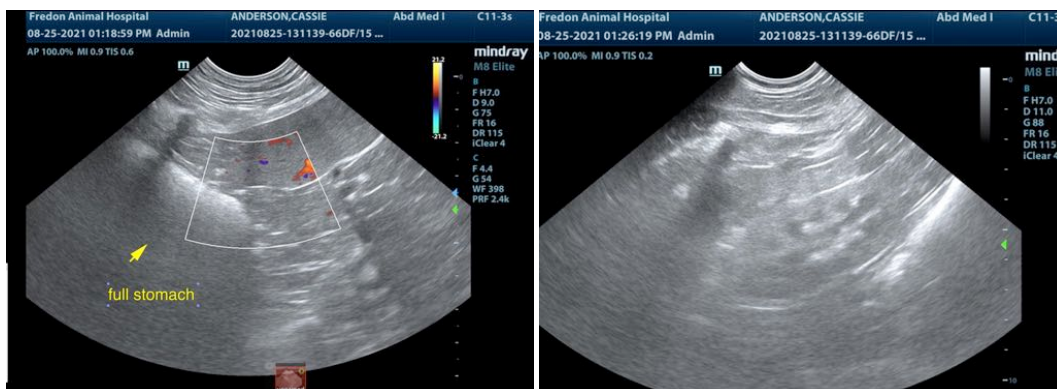
There was no evidence of hemorrhage. The cause of the anemia is unclear in this patient. The kidneys appear near end stage. GI blood loss should be considered. If the patient was not n.o.o. then a recheck sonogram is recommended after 12-18 hours at n.p.o. status.

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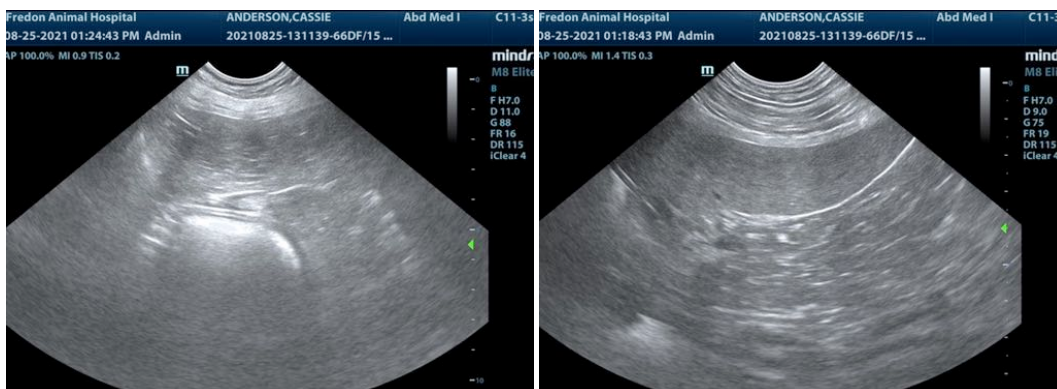
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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