

PATIENT PRESENTING CLINICAL SIGNS

China Novak
Presents for not walking correctly fell off stairs hind legs giving out , lethargic
Abnormal PE/Chem/CBC/UA Results: Increased BUN

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

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.

Shih Tzu

SEX

The **left kidney** 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 cortex 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 5.28 cm. Cortical cysts noted.

Female

AGE

16

Severe hydronephrosis noted in the **right kidney** with echogenic debris. The right kidney measured 8.0 cm. Cortical cysts noted.

WEIGHT

23.9

Adrenal Glands

INTERPRETED BY

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins were noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 2.8 cm x 1.25 cm at the caudal pole and 1.43 cm at the cranial pole.

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenn

Spleen

HOSPITAL NAME

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.

Rockaway AH

REFERRING VET

Liver

Dr. Maniar

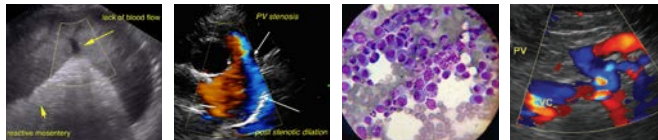
The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. An anechoic cyst was noted in the left medial liver measuring 3.0 cm, not pathological. 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.

INVOICE

44993

DATE

8/28/23



PATIENT

Gastrointestinal

China Novak

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.

SPECIES

Canine

Pancreas

BREED

Shih Tzu

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.

SEX

Female

ULTRASONOGRAPHIC FINDINGS

AGE

16

- Complete right renal hydronephrosis, cause is unclear, no obvious evidence of neoplasia
- Moderate near end stage degenerative left renal changes with cortical cyst
- Bilateral adrenal hypertrophy
- Age related hepatic changes and anechoic cyst left medial liver

WEIGHT

23.9

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

72-hour IV fluid protocol and eventual right nephrectomy would be ideal if the left kidney is able to maintain metabolic need. Full urine culture and sensitivity and blood pressure measurements indicated, and reassessment of the renal values after 48-72 hours of IV fluid support.

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DABVP, Cert. IVUSS

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HOSPITAL NAME

Rockaway AH

REFERRING VET

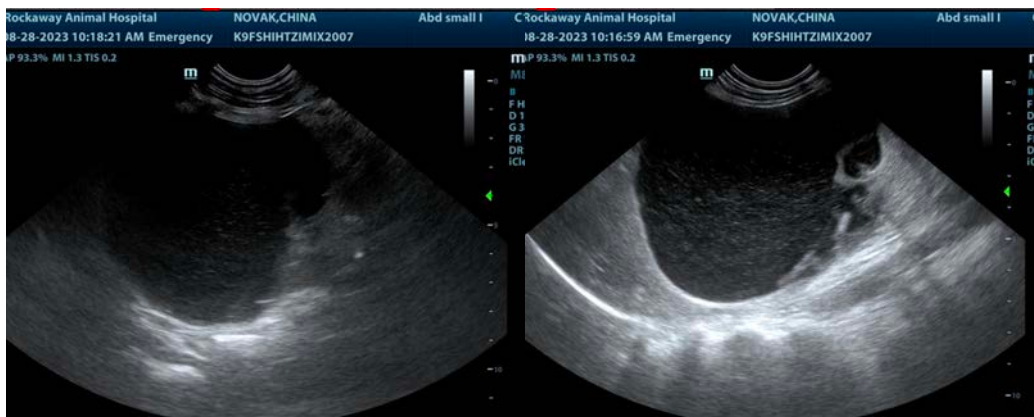
Dr. Maniar

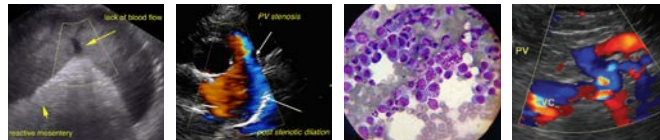
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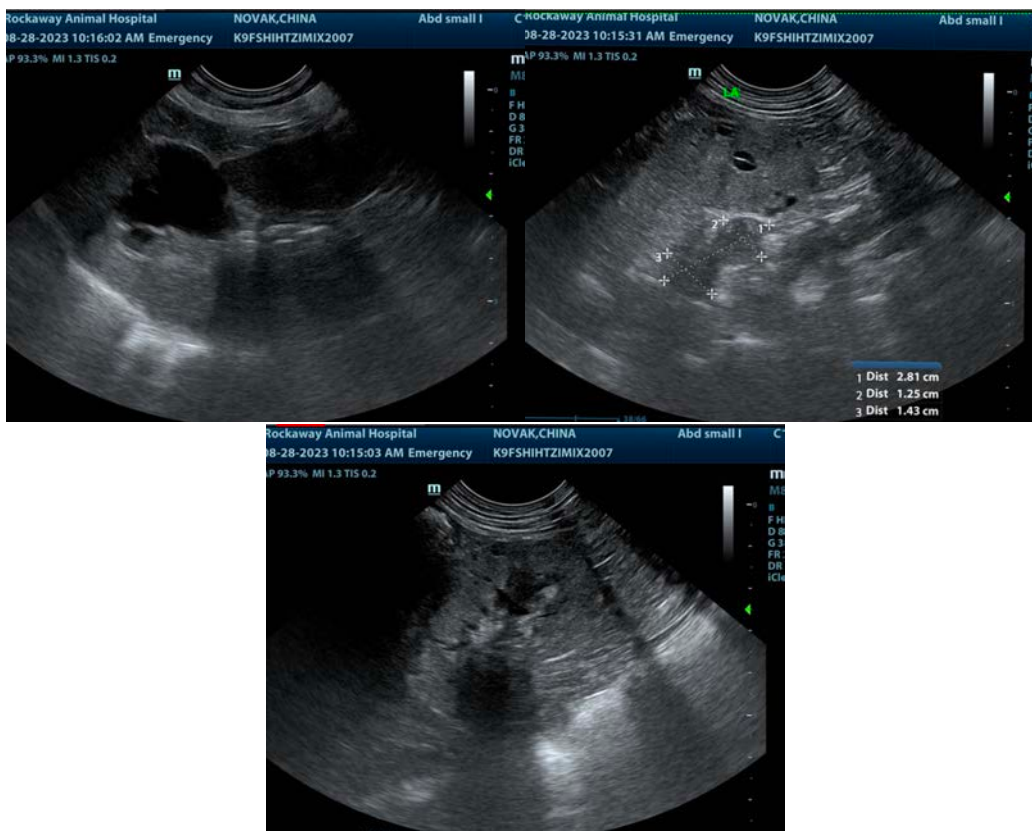
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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