



PATIENT

Dixie Singhisen

PRESENTING CLINICAL SIGNS

History: Acting "strange", lethargic, concern for UTI
UTI w/ dark urine -Increased labs (from April) -ALP (607) -ALT (895) -GGT (17+) -BA (56+)

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Schnauzer

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

SEX

Intact Female

AGE

7 months

The **kidneys** were mildly swollen with slight pyelectasia. Hyperechoic nodular changes were noted in the kidneys. The right kidney revealed slight pyelectasia measuring 0.27 cm. A cortical infarct was noted. The right kidney measured 6.0 cm. Blood flow to the kidneys appeared to be adequate. The left kidney measured 5.2 cm.

WEIGHT

7.9 lbs

Adrenal Glands

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 left adrenal gland measured 0.33 cm at the cranial pole and 0.25 cm at the caudal pole. The right adrenal gland measured 0.32 cm at the cranial pole and 0.48 cm at the caudal pole.

IMAGING PERFORMED BY

Emily Downs

Spleen

HOSPITAL NAME

Living Springs VC

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself. This is a positional variant and is not pathological. There was no evidence of significant disease.

REFERRING VET

Dr. Gochanour

Liver

The **liver** was subnormal in size. The intrahepatic vasculature was hypovolemic. Extrahepatic portosystemic shunt was noted. The vena cava was dilated. The abnormal vessel measured 1.0 cm in width and appeared to be deriving from the left gastric vein and entered into likely the vena cava. CT evaluation is warranted for further definition. The gallbladder and common bile duct were unremarkable.

INVOICE

91609

Gastrointestinal

DATE

8/31/21

The **stomach** presented echogenic mucosal changes. There is a minor amount of fluid accumulation. The wall thickness was mildly excessive and measured 0.77 cm. This is consistent with gastritis. The small



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intestine and colon were unremarkable. The mesenteric lymph node is reactive and measuring 1.59 x 1.0 cm.

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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.

BREED

Schnauzer

ULTRASONOGRAPHIC FINDINGS

SEX

Intact Female

Extrahepatic portosystemic shunting.

Bladder debris and renal remodeling with pyelectasia.

Concurrent inflammatory hepatopathy and gastritis.

AGE

7 months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

7.9 lbs

Given the bile acid elevation clinical trial of the following is recommended. Full pre and post prandial bile acid profile is recommended. CT evaluation and surgical planning is recommended for portosystemic shunting.

INTERPRETED BY

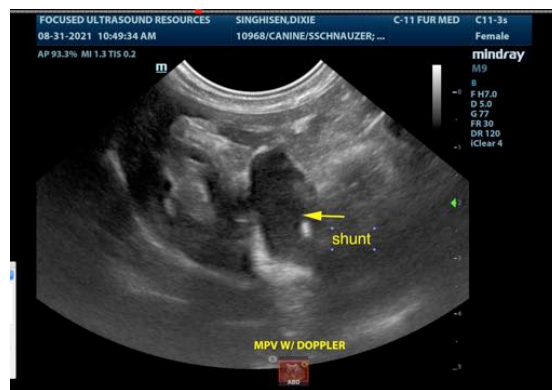
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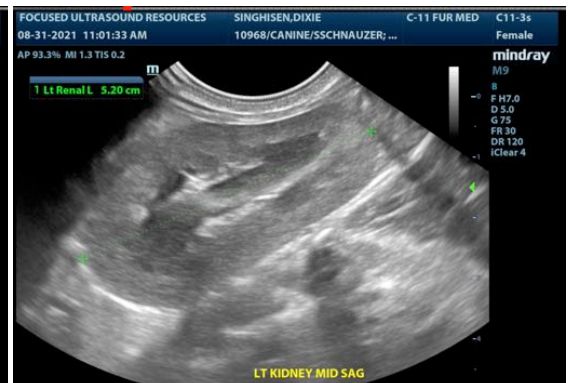
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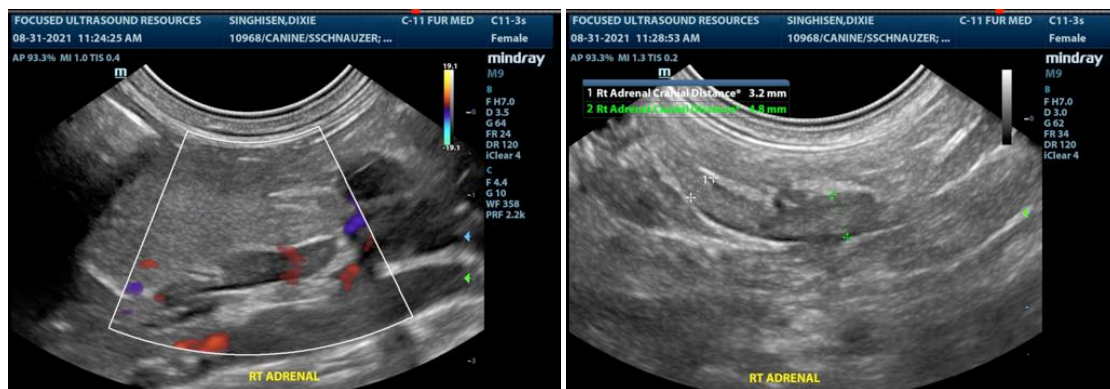
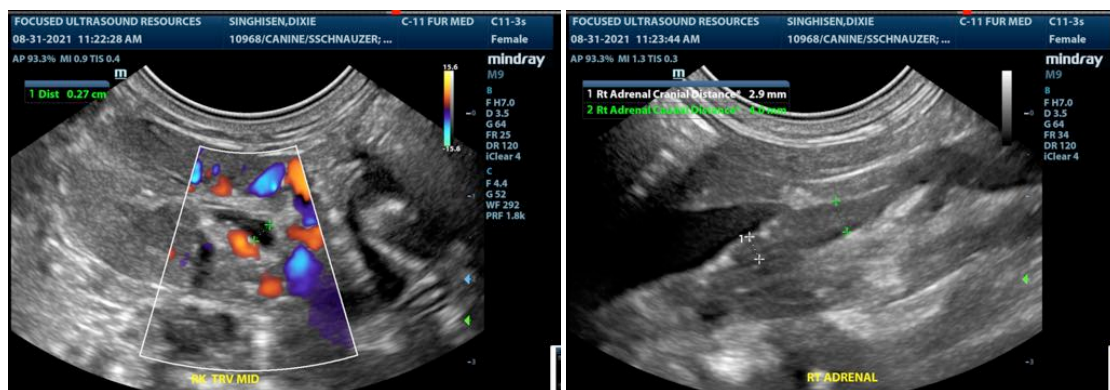
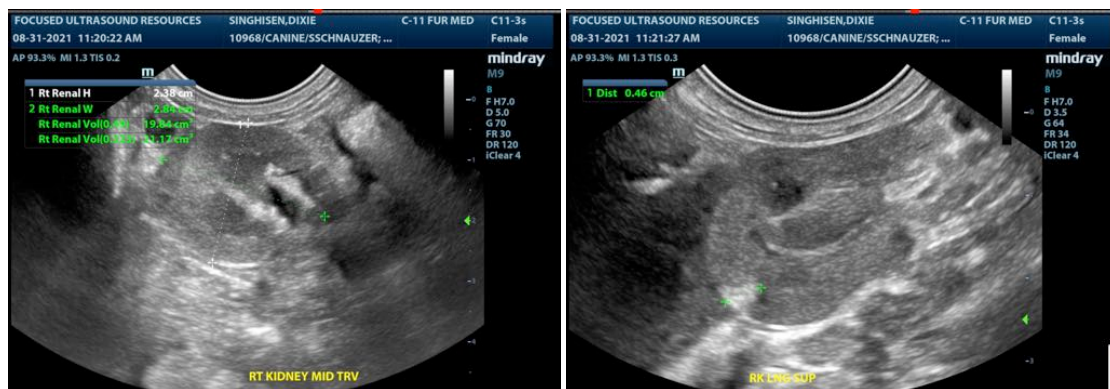
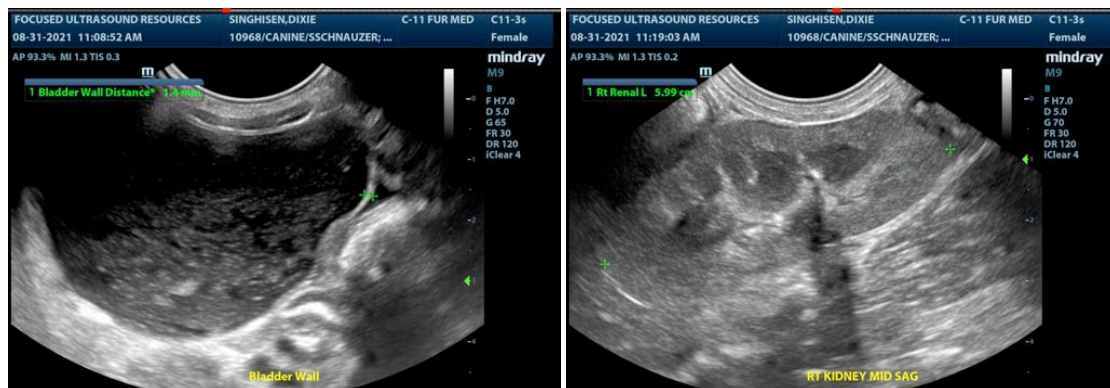
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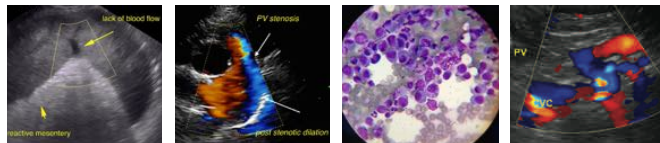
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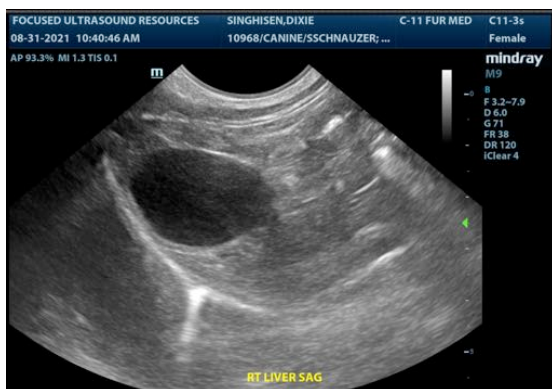
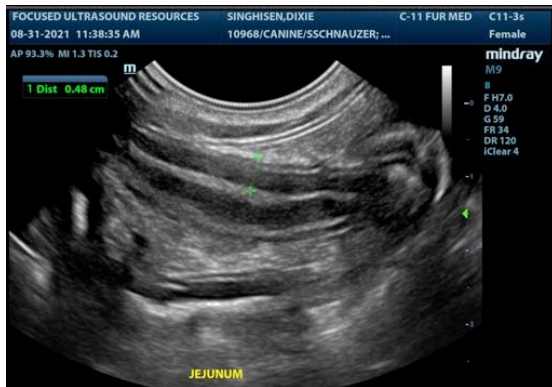
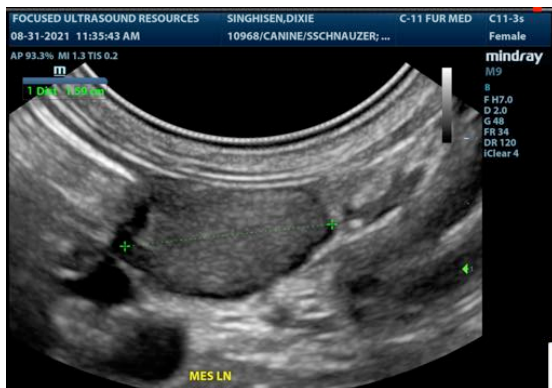
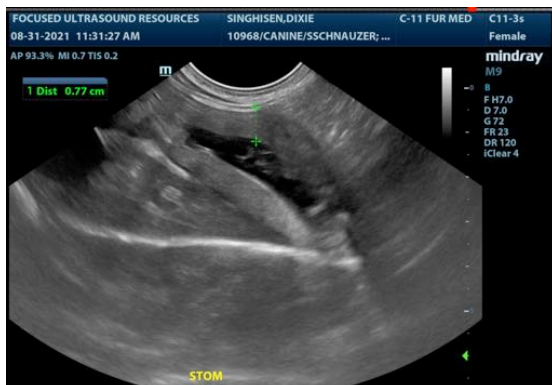
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Schnauzer

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

SEX

Intact Female

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