



**PATIENT**

Patrick Quinn

**PRESENTING CLINICAL SIGNS**

History: severe hepatopathy, infectious vs neoplastic vs primary vs autoimmune

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Corgi Mix

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. 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.

**SEX**

Neutered male

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 5.55 cm. The left kidney measured 5.33 cm.

**AGE**

4 years

**WEIGHT**

20 lbs

**Adrenal Glands**

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 1.69 x 0.49 cm at the caudal pole and 0.59 cm at the cranial pole. The right adrenal gland measured 1.68 x 0.87 cm at the cranial pole and 0.65 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Spleen**

The **spleen** was enlarged with scalloping contour and measured up to 2.2 cm in width. Enhanced surrounding mesentery was noted.

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**Liver**

The **liver** was irregular in contour with isoechoic, expansive, nodular changes and increased portal markings. Enhanced surrounding mesentery was also noted. The gallbladder was not visualized. It is likely isoechoic or collapsed or potentially aplasia.

**REFERRING VET**

Dr. Maniar

**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.

**DATE**

8/31/22



**PATIENT**

**Pancreas**

Patrick Quinn

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.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Corgi Mix

Hepatic remodeling and irregular contour.

Non-visible gallbladder.

Splenic enlargement.

**SEX**

Neutered male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

4 years

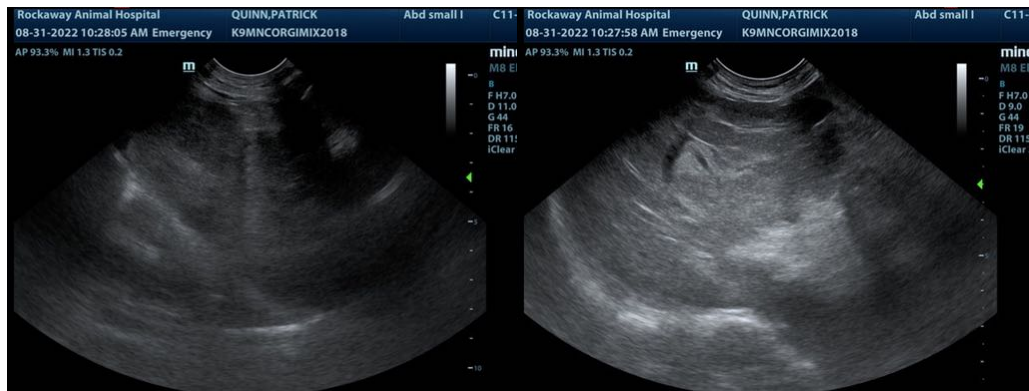
Ultrasound-guided FNA of the spleen and liver is recommended to assess round cell neoplasia versus chronic inflammatory hepatopathy and reactive spleen. Leptospirosis titers are also warranted. The prognosis is guarded.

**WEIGHT**

20 lbs

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Eric Lindquist, DMV  
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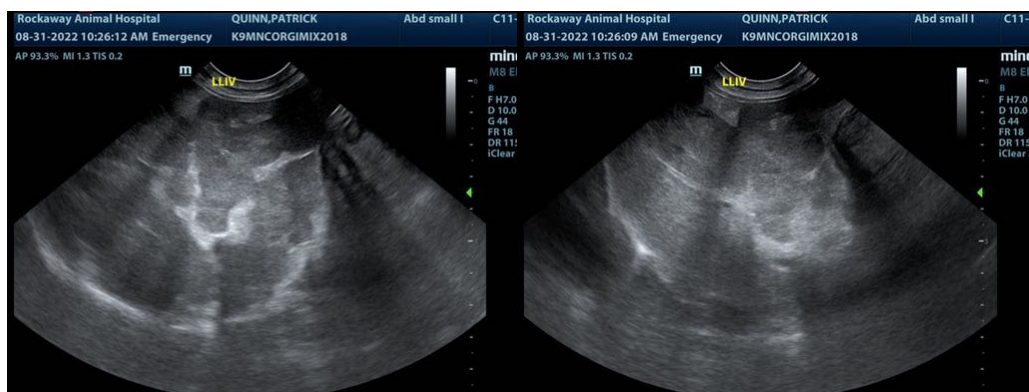


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**BREED**

Corgi Mix

**SEX**

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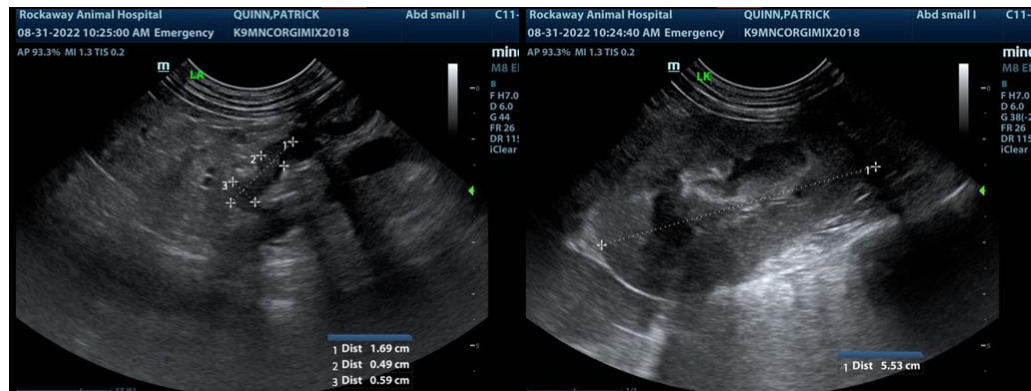
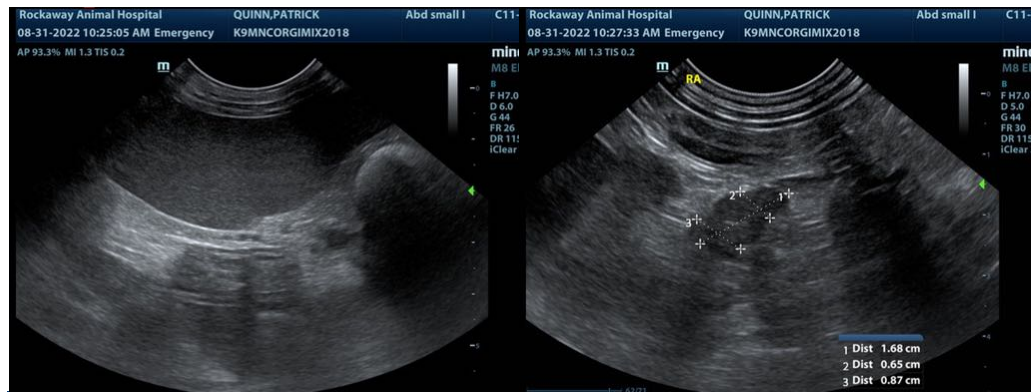
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**  
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