



PATIENT PRESENTING CLINICAL SIGNS

Mocha Sheldon
Elevated liver values
Abnormal PE/Chem/CBC/UA Results: ALP 615

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.

Havanese

SEX

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 his age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 3.8 cm with pyelectasia noted. The right kidney measured 4.35 cm with pelvic mineralization noted.

Spayed Female

AGE

7

WEIGHT

19

Adrenal Glands

INTERPRETED BY

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 1.27 cm x 0.39 cm at the caudal pole and 0.43 cm at the cranial pole. The right adrenal gland measured 1.79 cm x 1.15 cm at the cranial pole and 0.65 cm at the caudal pole.

Eric Lindquist, DMV

DABVP, Cert. IVUSS

Spleen

The **spleen** revealed an expansive hypoechoic nodule measuring 0.66 cm.

IMAGING PERFORMED BY

Jenn

Liver

HOSPITAL NAME

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia. Slight nodular change noted in the liver measuring 3.0 mm. FNA indicated.

Rockaway AH

REFERRING VET

Dr. Ascot

Gastrointestinal

INVOICE

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.

44473

DATE

8/4/23



PATIENT

Pancreas

Mocha Sheldon

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

Havanese

- Mild degenerative renal changes with pyelectasia and mineralization
- Splenic nodule
- Benign hepatopathy

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full urinary workup warranted to assess for UTI. FNA of both liver and splenic nodule recommended. I'm concerned about the splenic nodule, given the capsular expansion. Round cell neoplasia, emerging hemangiosarcoma, nodular hyperplasia all possible. Chest radiographs warranted to assess for metastatic disease.

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DABVP, Cert. IVUSS

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Rockaway AH

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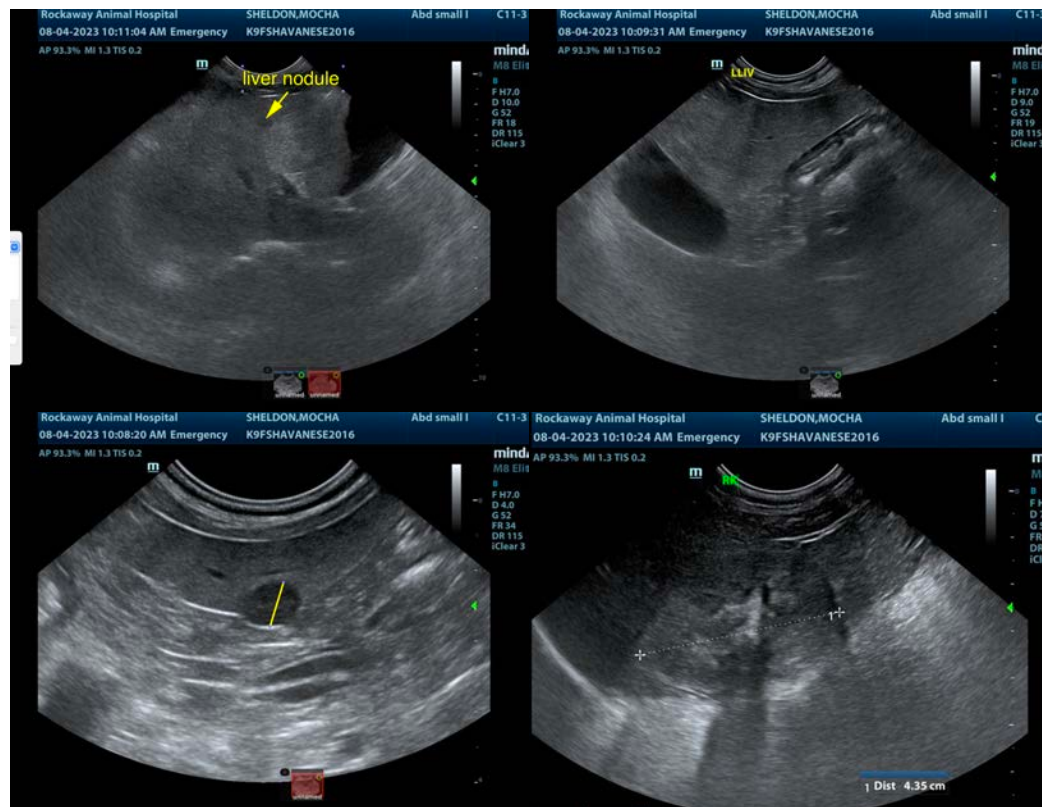
Dr. Ascot

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PATIENT

Mocha Sheldon

SPECIES

Canine

BREED

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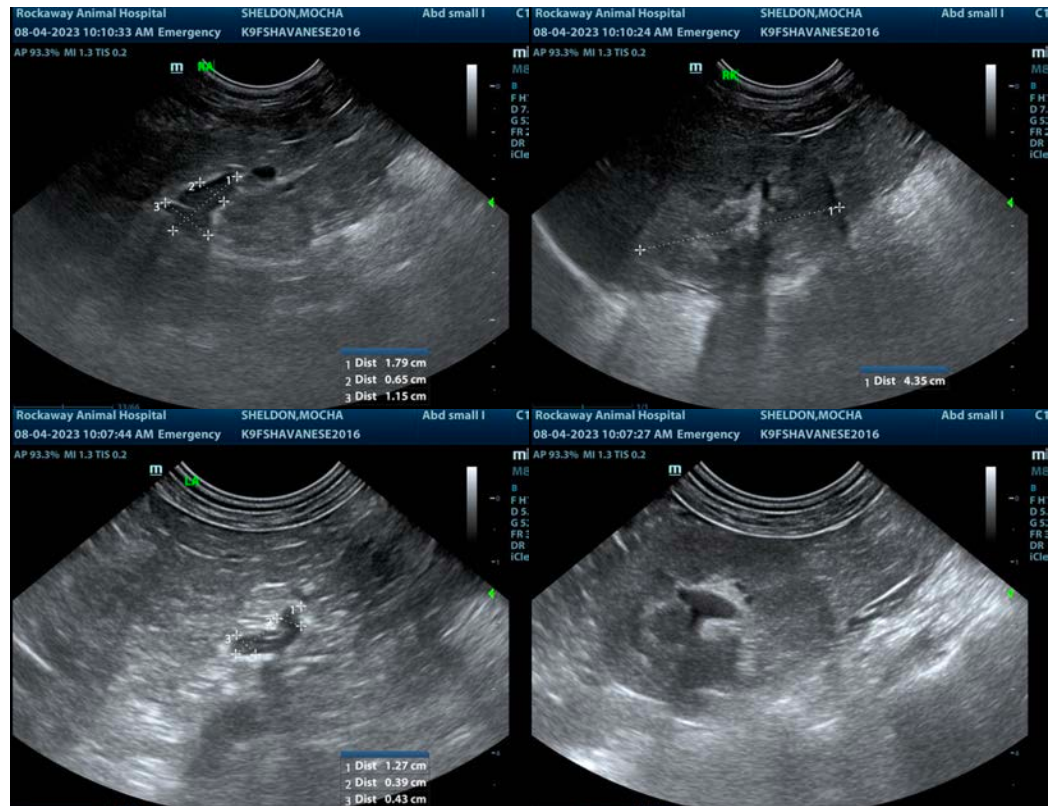
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INVOICE

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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