

PATIENT

Koda Lowery

SPECIES

Canine

BREED

Husky

SEX

Spayed Female

AGE

12 Years

WEIGHT

83 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

VCA Salem AH

REFERRING VET

Dr. Hallden

DATE

8/5/22

Invoice

16722

PRESENTING CLINICAL SIGNS

History: Senior screening. Had AnimalSounds AUS senior screening most recently on 5/7/2021. 2021 GI patterns (gastroenteritis) and low energy events resolved upon initiating glucocorticoid replacement treatment at 2.13-2.5 mg prednisone/day (0.06-0.07 mg/kg/day) after last AUS found "flattened" adrenals. ACTH stim in 5/2021 found cortisol pre=1.0 ug/dL, post =5.0 ug/dL. History of gastropexy region being sensitive to US probe pressure and pexy site was likely visualized at prior AUS study. Multifocal arthritic regions; regularly sees DVM animal rehabilitation and benefits from Galliprant use. Will be sedated to tolerate imaging.

Abnormal PE/Chem/CBC/UA Results: 7/12/2022: ALT= 158 IU/L, AlkPhos = 174 IU/L. Low tT4 <0.5 ug/dL without clinical signs to suggest hypothyroidism. Unremarkable other chem, CBC and recent UA. Will email recent test results (collected for annual senior screening, NOT due to active illness concerns). Current Medications Galliprant 100 mg po q 24; prednisone 2.13 mg/d Radiographic Findings Survey thorax and abdominal imaging planned for acquisition at time sedation as AUS.

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 were 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 mild 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 and no evidence of pelvic dilation was present. The left kidney measured 7.23 cm. The right kidney measured 6.47 cm.

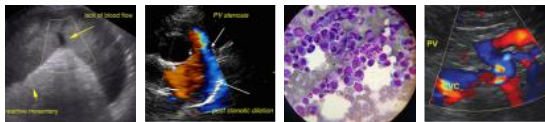
Adrenal Glands

The **right adrenal gland** was 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 right adrenal gland measured 2.25 cm x 0.56 cm at the caudal pole and 1.6 cm at the cranial pole.

The **left adrenal gland** was subjectively flattened, measuring 1.71 cm x 0.24 cm at the caudal pole and 0.3 cm at the cranial pole.

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 were noted.



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Liver

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The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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Gastrointestinal

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The **gastrointestinal tract** revealed persistent mild muscularis thickening yet the lumen was empty. The GI structure was normal otherwise. The stomach appears to be in proper position. No complications for the gastropexy procedure noted.

SEX

Pancreas

Spayed Female

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some minor parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation, then low-grade smoldering chronic pancreatitis should be suspected.

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ULTRASONOGRAPHIC FINDINGS

- Persistently flattened left adrenal gland
- Minor muscularis thickening in the GI tract
- Unremarkable abdomen otherwise

INTERPRETED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

Given the patient history, liver enzyme elevations and nonspecific low grade inflammatory hepatopathy or reactive hepatopathy likely. No evidence of significant disease. This patient may be an emerging Addisonian. If any clinical signs consistent with Addison's develop, then recheck of the ACTH stimulation is indicated.

IMAGING PERFORMED BY

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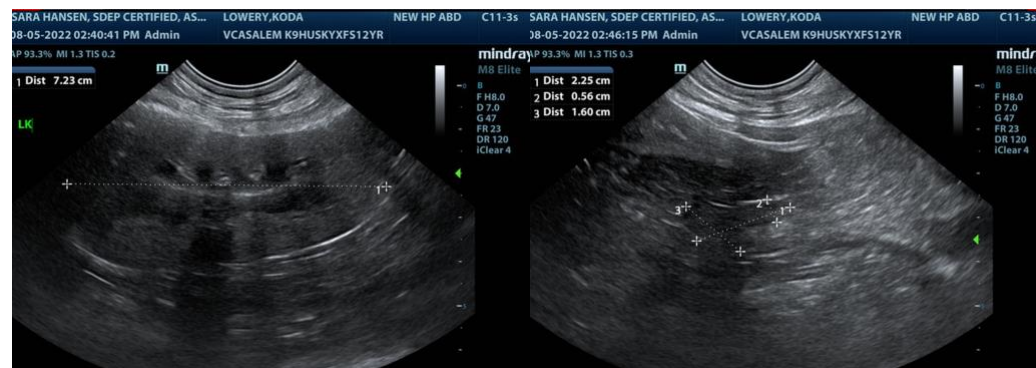
Dr. Hallden

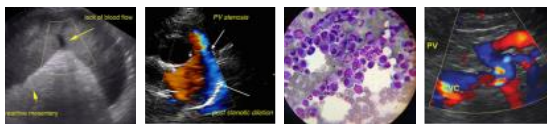
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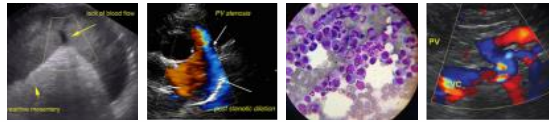


The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com



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