



PATIENT

Joni Crowley

PRESENTING CLINICAL SIGNS

History: Hx of SIBO, defecated out grass w/severely dilated small intestines. Suspect renal aplasia.

SPECIES

Canine

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

BREED

Poodle

The **left kidney** was enlarged, uniform. The left kidney measured 8.6 cm. Blood flow to the left kidney appeared to be adequate on power doppler assessment.

SEX

Canine

The region of the **right kidney** was imaged. No evident kidney. Right renal aplasia is likely.

Adrenal Glands

AGE

6 Years

The **left 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 left adrenal gland measured 2.3 cm x 0.39 cm at the cranial pole and 0.45 cm at the caudal pole.

WEIGHT

60 Pounds

The **right adrenal gland** was imaged. No evident pathology. The right adrenal gland measured 0.6 cm in width.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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. Caudal folding of the spleen was noted.

IMAGING PERFORMED BY

Shari Reffi, CVT

Liver

The **liver** itself was unremarkable. The gallbladder was overdistended and caudal folding was noted. Anechoic bile was noted. The common bile duct was normal.

HOSPITAL NAME

Rockaway AH

Gastrointestinal

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.

REFERRING VET

Dr. Maniar

INVOICE

16785

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.

DATE

8/8/22

ULTRASONOGRAPHIC FINDINGS



PATIENT

Joni Crowley

- Right renal aplasia
- Compensatory enlargement of the left kidney
- Overdistended gallbladder with caudal folding

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend a bile acid profile in this patient. Supportive care is warranted otherwise. No evidence of structural GI disease.

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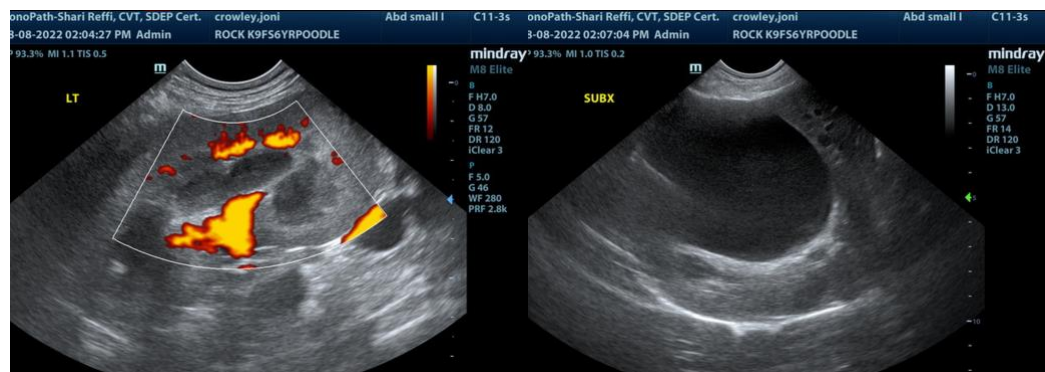
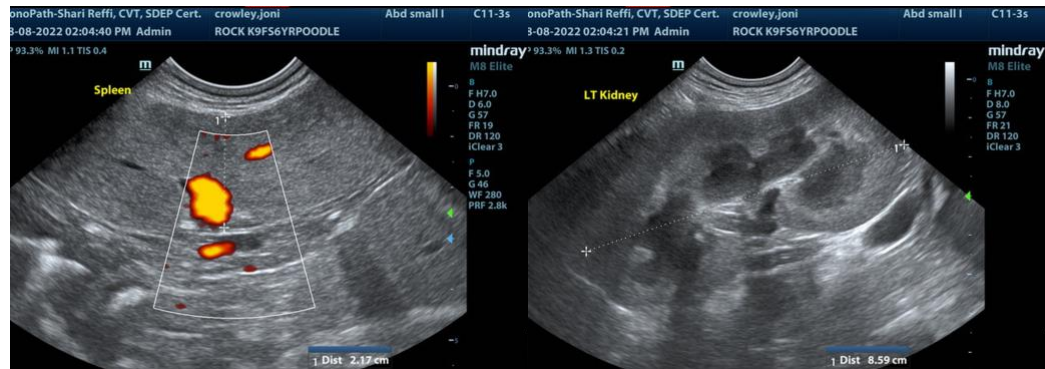
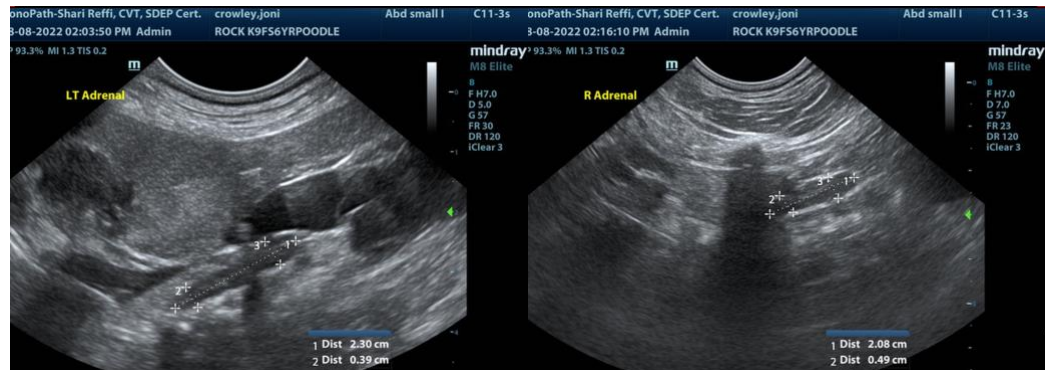
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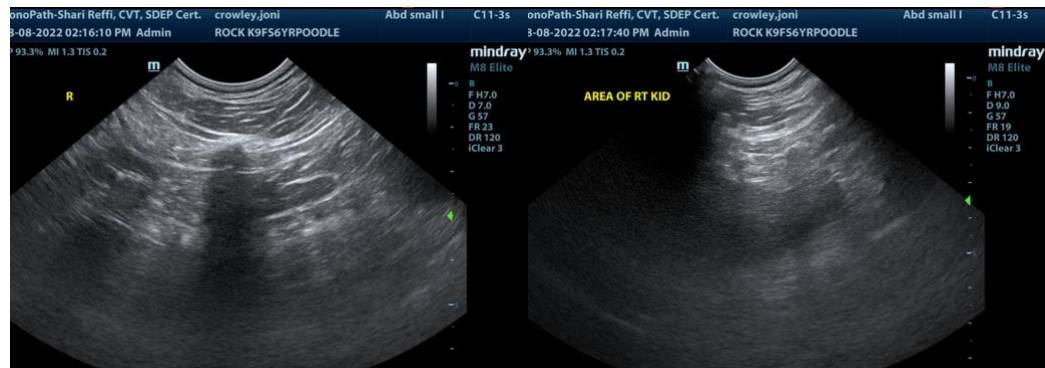
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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