



**PATIENT**

Mya Moody

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Female

**AGE**

10 years

**WEIGHT**

87 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ebersole

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Perkins

**INVOICE**

32711

**DATE**

9/1/22

**PRESENTING CLINICAL SIGNS**

History: New client, following up on previously found LE elevation. PU/PD and increased panting. Initial BW and US done prior to oral abscess surgery (2/2022). Medications: Denamarin, Dasequin and Clavamox (recently finished 2 weeks BID). FNA of Liver done.

Abnormal PE/Chem/CBC/UA Results: BW (8/15/22): ALP>993, ALT 898, AST 100. Mild elevation Chol and TG. T-4 normal. LDDST: normal Initial BW (2/16/22): ALP 2,291, ALT 903, AST 104. Previous US: liver is subjectively small with irregular margins. Diffusely hyperechoic with a mottled echotexture. Normal adrenal regions.

**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 was noted. Ureteral papillae were normal.

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 7.22 cm. The left kidney measured 7.14 cm.

**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 right adrenal gland measured 3.59 x 1.87 cm at the cranial pole and 0.64 cm at the caudal pole. The left adrenal gland measured 0.51 cm at the caudal pole and 0.53 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 was noted.

**Liver**

The **liver** was coarse in architecture with increased portal markings. Moderate remodeling was noted. Heterogenous, hypoechoic hepatic nodular changes were noted. The gallbladder was empty and may be blending with the underlying parenchyma.



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**Gastrointestinal**

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There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

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**Pancreas**

Golden Retriever

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.

**SEX**

Female

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

10 years

Hepatic remodeling. Chronic inflammatory hepatopathy with nodular hyperplasia.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

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Bile acid profile is warranted. Core biopsy may be necessary for further definition. Inciting causes such as Leptospirosis should be ruled out as a potential. FNA of the liver was performed without complication. Minor potential for neoplasia. Liver oriented diet and nutraceuticals are indicated.

**INTERPRETED BY**

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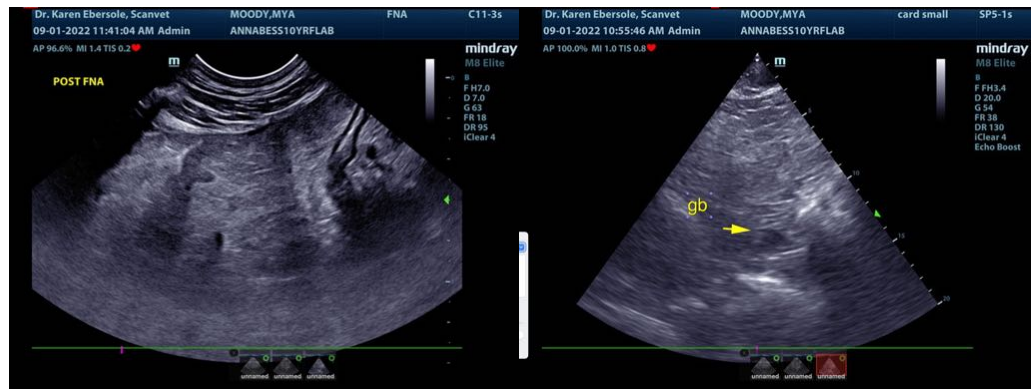
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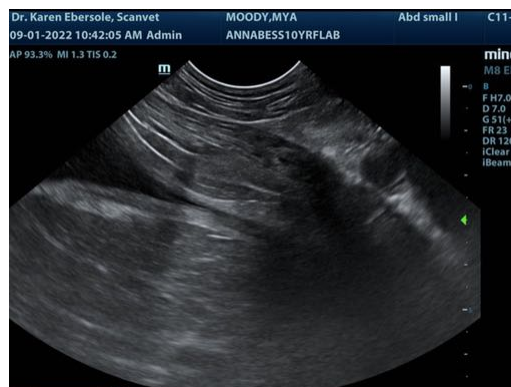
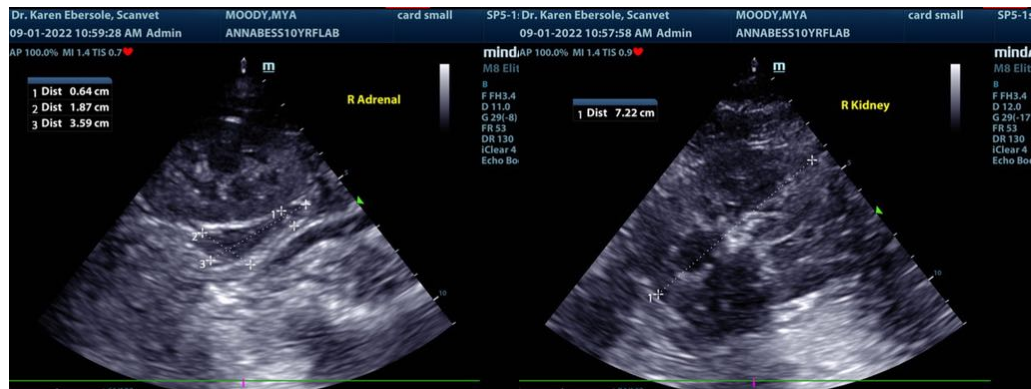
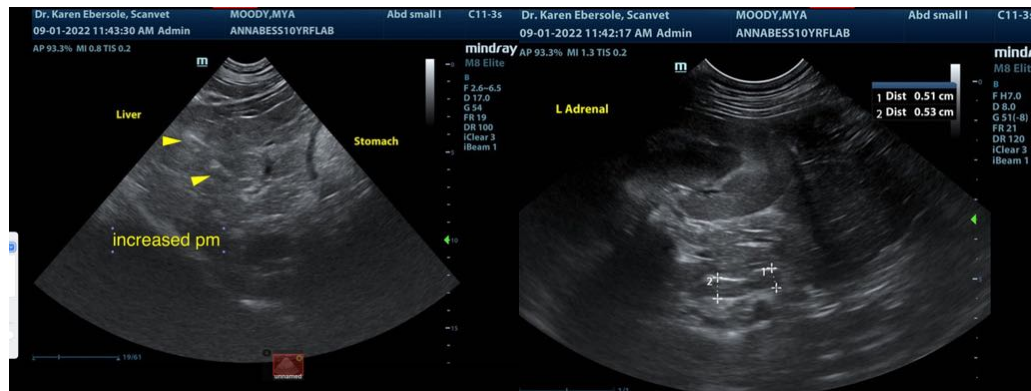
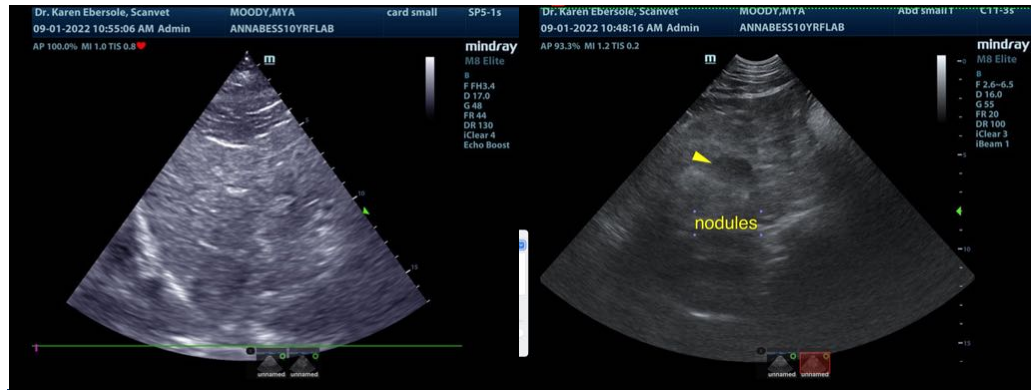
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**BREED**

Golden Retriever

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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Female

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

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