



PATIENT

Jester Linker

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

7.5 Years

WEIGHT

26.13 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency Hospital Volusia

REFERRING VET

Dr. Carver

INVOICE

41256

DATE

9/12/22

PRESENTING CLINICAL SIGNS

p presented for lethargy, anorexia over the last few days and then p started leaking urine today. No past medical issues. No current medications. No antifreeze in household/garage. P was vaccinated for DAPP and LEPTO in May 2022.

Abnormal PE/Chem/CBC/UA Results: BUN: 81 Creat 3.9 P: 12.1 Ca: 13.9 Radiographs: Unremarkable abdomen Lepto ELISA Snap: positive

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented a minimal amount of urine with minor wall thickening, likely owing to recoil effect. However, underlying cystitis cannot be ruled out.

The **kidneys** presented normal size and contour with slight cortical infarct in the dorsal cortex of the left kidney. The remainder of the kidney was unremarkable with normal curvilinear patterns. The right kidney measured 6.3 cm. The left kidney measured 6.0 cm.

Adrenal Glands

The **left adrenal gland** was subjectively flattened, measuring 4.0 mm.

The region of the **right adrenal gland** was imaged, no evident pathology. However, it may be subnormal in size.

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.

Liver

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.

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.

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.



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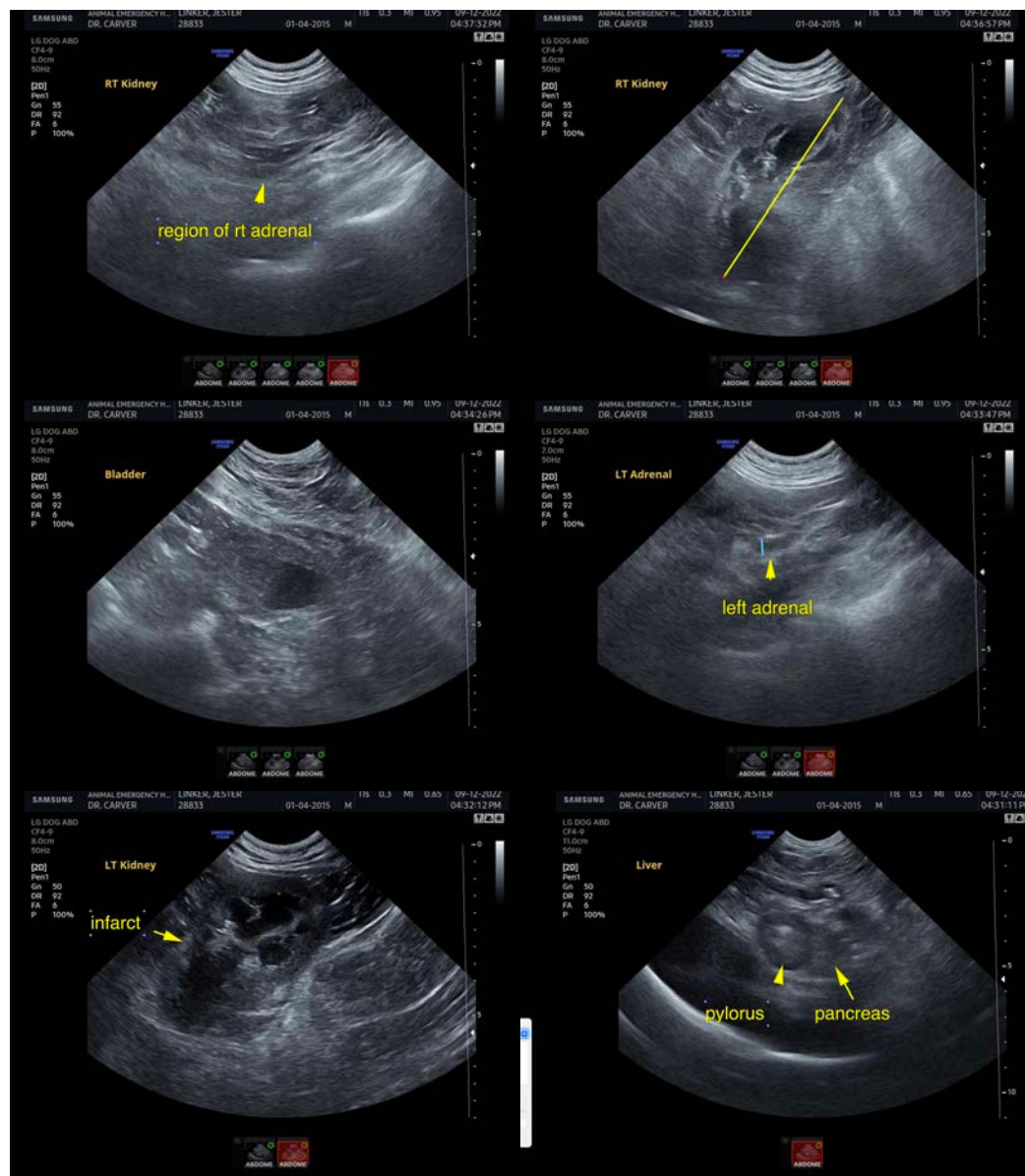
9/12/22

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable abdomen with relatively normal kidneys and slight stable infarct in the left kidney
- Subjectively flattened adrenal glands

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend screening for Addison's with ACTH stimulation. Full urinary workup warranted with culture and sensitivity if any inflammatory sediment is present. Otherwise, treatment for acute renal failure indicated. Leptospirosis titers also indicated.





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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.

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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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