

**DATE**

9/17/21

**PRESENTING CLINICAL SIGNS**

History: 8/3/2021 presented for lethargy, decreased appetite, and hind limb lameness/weakness. Temp 103.9, retaken 104.2. Severe dental disease, no obvious lameness on exam. Treated with Doxycycline 100 mg q 24 hrs. x 14 days, Vetprofen 75 mg 1/4-tab q 12 hrs., temp normalized, partial response to therapy. 9/14/2021 pet somewhat better, still decreased appetite, weak in hind legs, slow proprioception, back slight arched, temp 103.2. Almost 2-pound weight loss.

**PATIENT**

Buddy Grates

Current Medications: Galliprant 20 mg q 24 hours, Gabapentin 50 mg 1-1 1/2 q 12 hours.

Lab Results: (8/3/2021) 4 DX negative x 4, ALT 250, ALP 754.

**SPECIES**

Canine

Radiographs: Not provided by the veterinarian.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Not needed.

Stat Report: Not requested.

**BREED**

Australian Terrier

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****SEX**

Neutered male

**Urinary System**

Slight concretion was noted in the **urinary bladder**, non-obstructive, measuring 1.0 mm. The residual prostate was uniform, measuring 0.97 cm.

**AGE**

1/09

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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. Slight pyelectasia was noted in the right kidney. The right kidney measured 4.1 cm. Pinpoint mineralizations were noted in the kidneys. The left kidney measured 4.14 cm.

**WEIGHT**

16.6 lbs

**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 1.4 cm x 0.61 cm at the caudal pole and 0.68 cm at the cranial pole. The left adrenal gland measured 1.9 cm x 0.54 cm at the caudal pole and 0.52 cm at the cranial pole.

**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.

**HOSPITAL NAME**

Chadwell AH

**REFERRING VET**

Dr. Malick

**Liver**

The **liver** presented heterogenous parenchyma with increased portal markings and minor coarse architecture. Slight undulating capsular contour was noted. The gallbladder and common bile duct were unremarkable. This is consistent with chronic inflammatory hepatopathy. The portal vein/vena cava ratio was 1:1.

**INVOICE**

13137

**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**

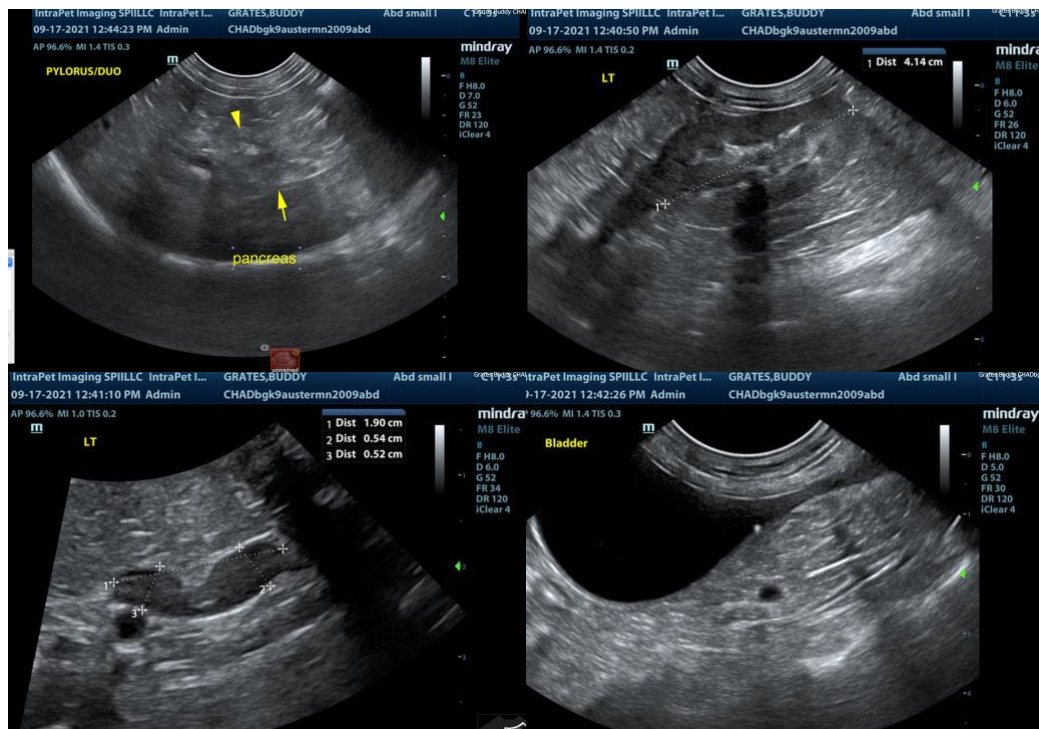
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some minor parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes.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

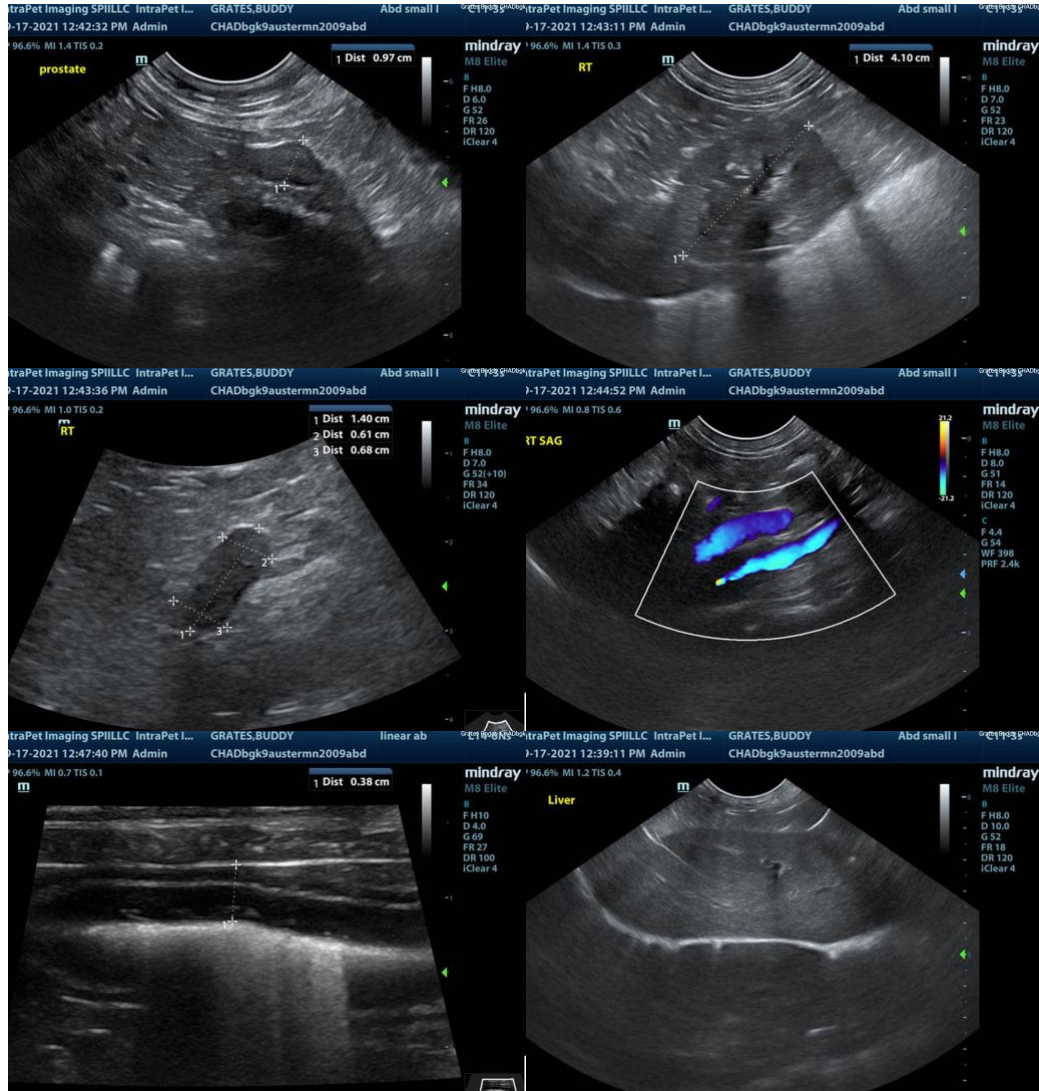
### ULTRASONOGRAPHIC FINDINGS

- Mild chronic inflammatory hepatopathy
- Minor renal mineralization
- Age-related pancreatic changes
- Slight bladder concretion, should pass without significant difficulty

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA warranted for further definition. Leptospirosis titers warranted to rule out underlying occult infection. No evidence of neoplasia. Periods of pancreatitis likely in this patients' history, may be fueling a low-grade inflammatory hepatopathy issue. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas.





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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