



PATIENT

Bisley Waffle

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

10 years

WEIGHT

78 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Waffle

HOSPITAL NAME

Torch Lake VC

REFERRING VET

Dr. Waffle

INVOICE

91824

DATE

9/19/21

PRESENTING CLINICAL SIGNS

History: Hx of 3 days duration of vomiting. Hx of ingesting socks (4 time repeat offender)
Chem - WNL Temp - 102.4 Painful upper R quadrant CBC - unremarkable Abdominal rad interpretation pending

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 left kidney measured 5.0 cm. The right kidney measured 5.0 cm.

Adrenal Glands

The regions of the **adrenal glands** were imaged with no evidence of pathology.

Spleen

The **spleen** was mildly enlarged with slight, heterogenous parenchymal changes.

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

The **stomach** was dilated with fluid. Portions of the small intestines appeared to have minor thickening. The colon was unremarkable.



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Pancreas

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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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Golden Retriever

ULTRASONOGRAPHIC FINDINGS

Splenic enlargement.

Underlying inflammatory bowel is likely.

SEX

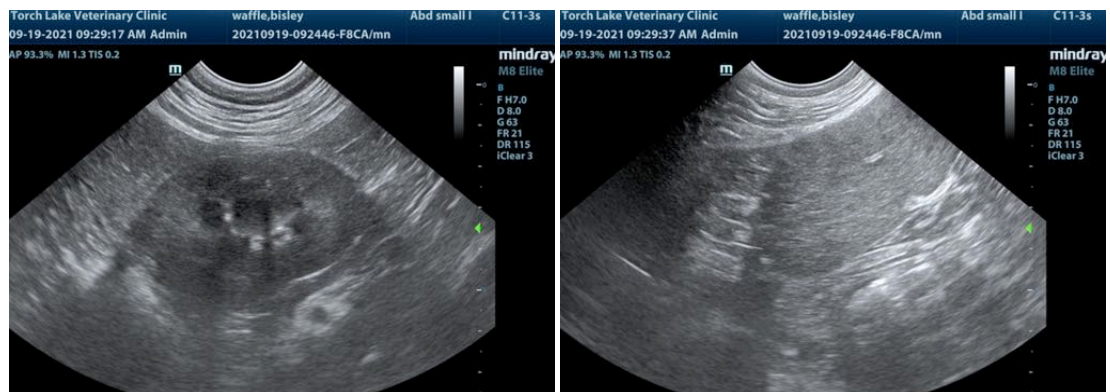
Neutered male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of intestinal neoplasia; however, I am concerned for potential emerging splenic neoplasia versus reactive spleen. If any weight loss is an issue then 25-gauge FNA of the spleen is indicated. Supportive care for gastrointestinal upset should prove effective otherwise.

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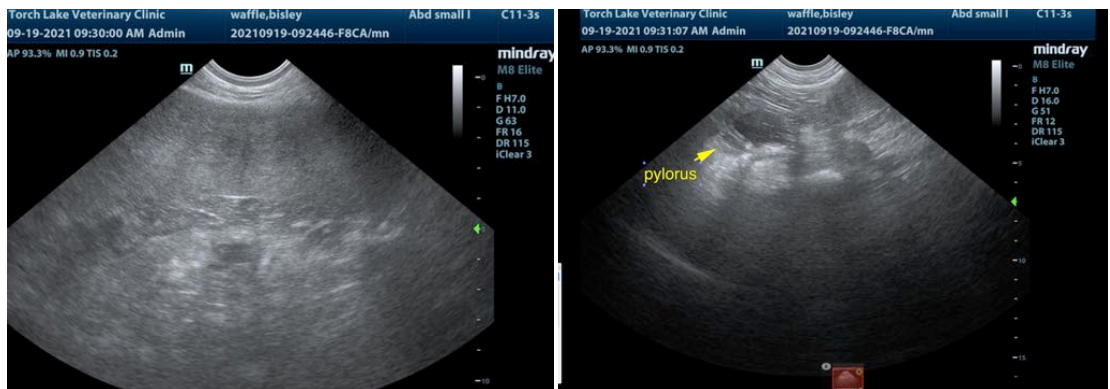
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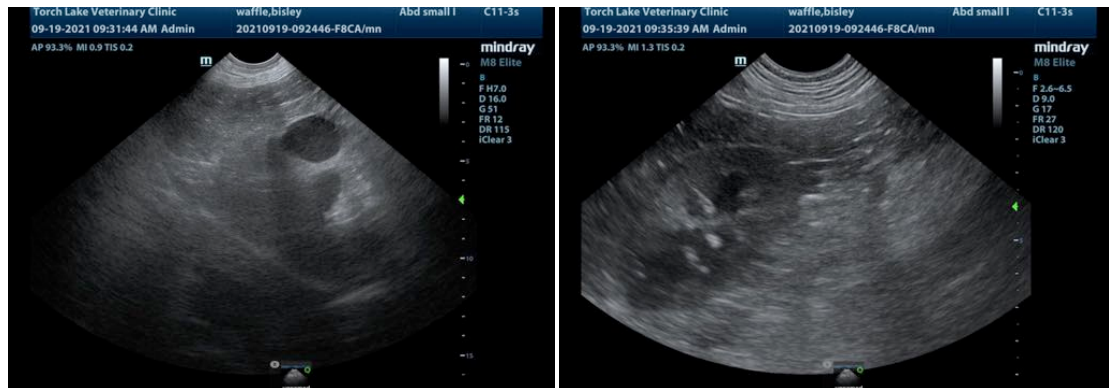
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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