



**PATIENT**

Cloudy Leroux

**SPECIES**

Canine

**BREED**

Dachshund Mix

**SEX**

Neutered male

**AGE**

10 years

**WEIGHT**

15 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Tranquility VC

**REFERRING VET**

Dr. DeMeo

**INVOICE**

91869

**DATE**

9/21/21

**PRESENTING CLINICAL SIGNS**

History: Grade IV/VI murmur, coughing. Elevated liver enzymes. Current meds: Enalapril 2.5mg bid, Furosemide 12.5mg 0.5 bid  
Abnormal PE/Chem/CBC/UA Results: ALT 176, ALKP 229

**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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.83 cm. The left kidney measured 3.97 cm.

**Adrenal Glands**

The left **adrenal gland** was mildly swollen measuring 2.03 x 0.67 cm at the caudal pole and 0.59 cm at the cranial pole. The right adrenal gland measured 1.59 x 0.63 cm at the caudal pole and 0.6 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** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Occasional, hyperechoic, lipogranulomatous nodule was noted and was non-disruptive. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.



**PATIENT**

**Gastrointestinal**

Cloudy Leroux

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.

**SPECIES**

Canine

**Pancreas**

**BREED**  
Dachshund Mix

The **pancreas** revealed minor, heterogenous parenchymal changes. This is consistent with remodeling. Low-grade active inflammation is possible, yet this would be minor.

**SEX**

Neutered male

**ULTRASONOGRAPHIC FINDINGS**

Minor pancreatic remodeling.

**AGE**

10 years

Slight hepatic remodeling.

Minor bilateral adrenal hypertrophy.

Otherwise, geriatric abdomen.

**WEIGHT**

15 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Subxiphoid palpation is recommended to assess for pain-solicited response. If pain is noted low grade pancreatitis is suspected. If the patient appears Cushingoid and the urine specific gravity is less than 1.020 then work-up for PDH is indicated, yet subjectively the abdomen appears largely benign.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

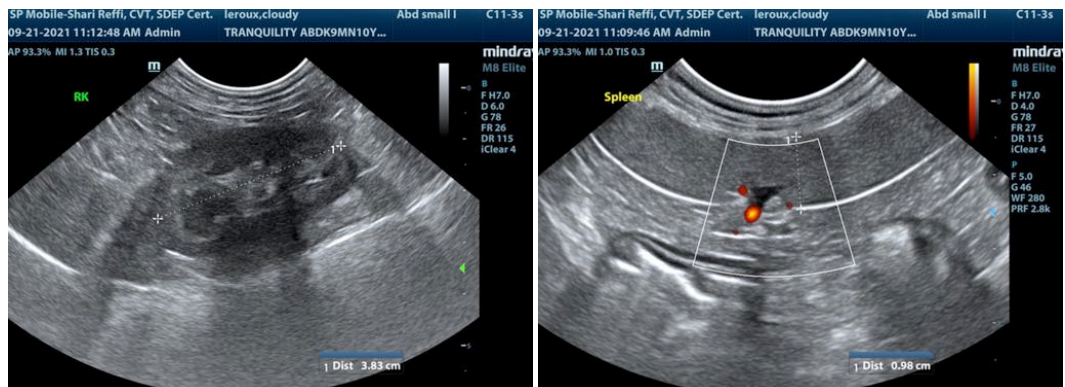
Shari Reffi, CVT

**HOSPITAL NAME**

Tranquility VC

**REFERRING VET**

Dr. DeMeo



**INVOICE**

91869

**DATE**

9/21/21



**PATIENT**

Cloudy Leroux

**SPECIES**

Canine

**BREED**

Dachshund Mix

**SEX**

Neutered male

**AGE**

10 years

**WEIGHT**

15 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Tranquility VC

**REFERRING VET**

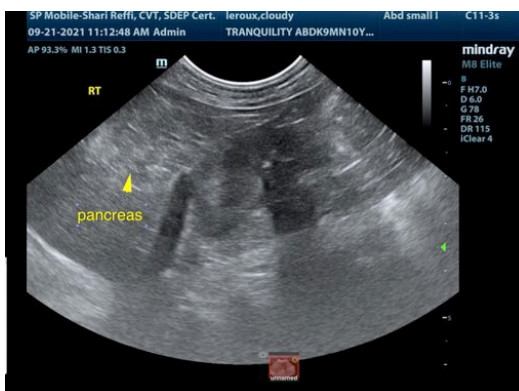
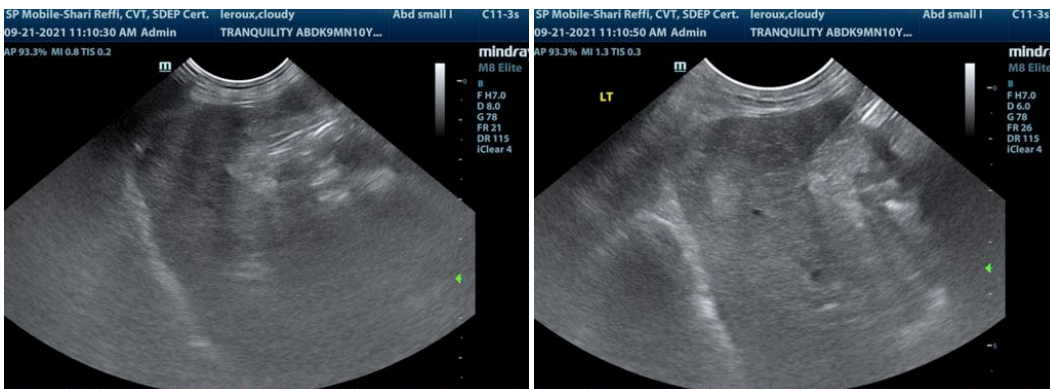
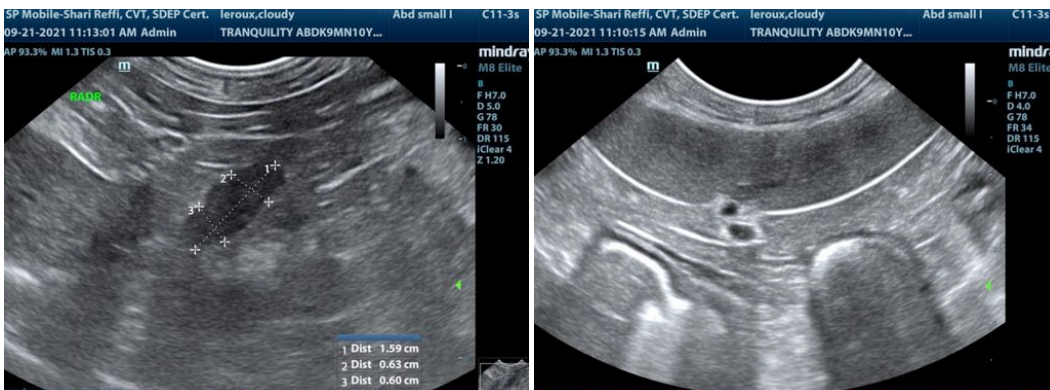
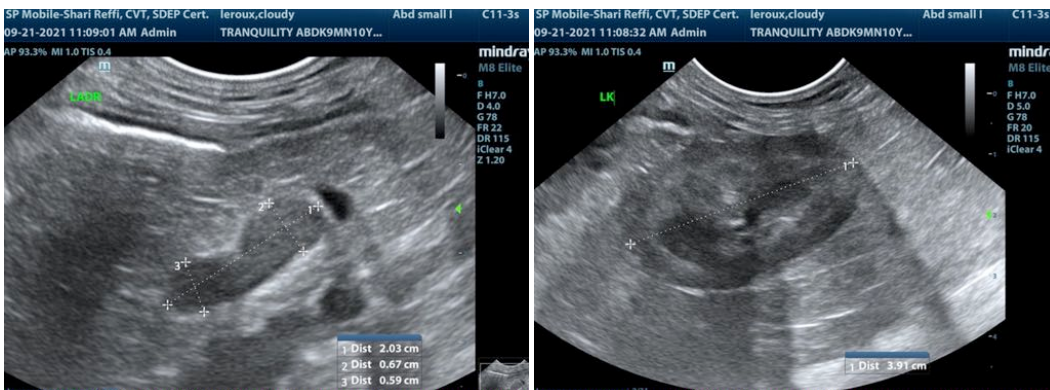
Dr. DeMeo

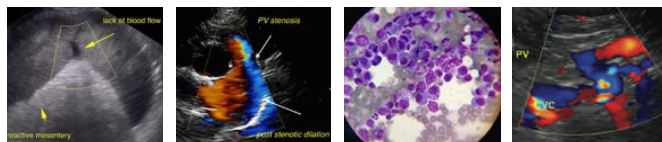
**INVOICE**

91869

**DATE**

9/21/21





**PATIENT**

Cloudy Leroux

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.

**SPECIES**

Canine

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.

**BREED**

Dachshund Mix

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

**SEX**

Neutered male

**AGE**

10 years

**WEIGHT**

15 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Tranquility VC

**REFERRING VET**

Dr. DeMeo

**INVOICE**

91869

**DATE**

9/21/21