



PATIENT

Loca Evdokimoff

SPECIES

Canine

BREED

Whippet X

SEX

Spayed Female

AGE

9 Years

WEIGHT

8 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

South Pointe Vet Clinic

REFERRING VET

Dr. Mizen

INVOICE

26002

DATE

9/30/21

PRESENTING CLINICAL SIGNS

GI upset lethargy, Mod to severe elevation of liver enzymes. sedated butorphanol for scan

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 were 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 4.91 cm. The left kidney measured 3.64 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 left adrenal gland measured 0.43 cm at the cranial pole and 0.48 cm at the caudal pole. The right adrenal gland measured 0.32 cm at the cranial pole and 0.32 cm at the caudal pole.

Spleen

The **spleen** was uniformly enlarged and swollen in contour.

Liver

The **liver** presented increased portal markings and coalescing hypoechoic nodular changes. The **gallbladder** was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted. The cystic and common bile ducts were normal. Common bile duct measured 0.18 cm. Hepatic lymph nodes were mildly enlarged.

Gastrointestinal

The **gastrointestinal tract** revealed minor variable thickening and echogenic submucosal changes most consistent with low grade end result of chronic GI disease such as IBD and may be related to malassimilation of nutrients if any weight loss is present. No obvious neoplastic patterns were noted and luminal content as unremarkable. Mesenteric lymph node measured 0.62 cm, reactive.

Pancreas

The **pancreas** was enlarged, hypoechoic and irregular.

ULTRASONOGRAPHIC FINDINGS

- Diffuse hepatic remodeling
- Pancreatic remodeling
- Splenic enlargement



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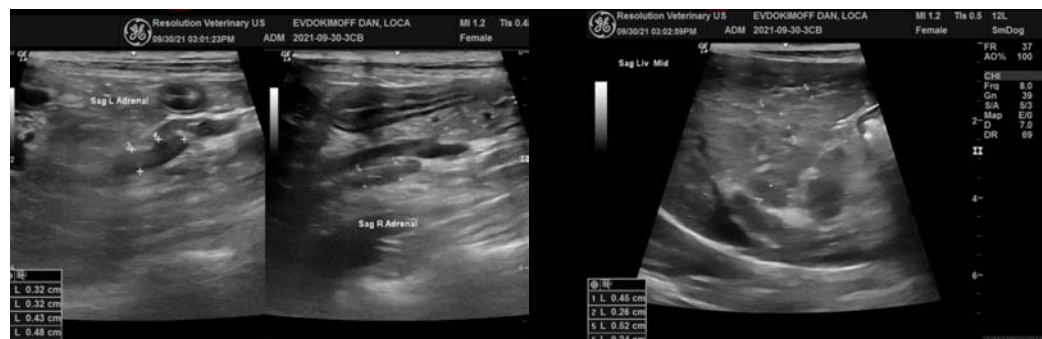
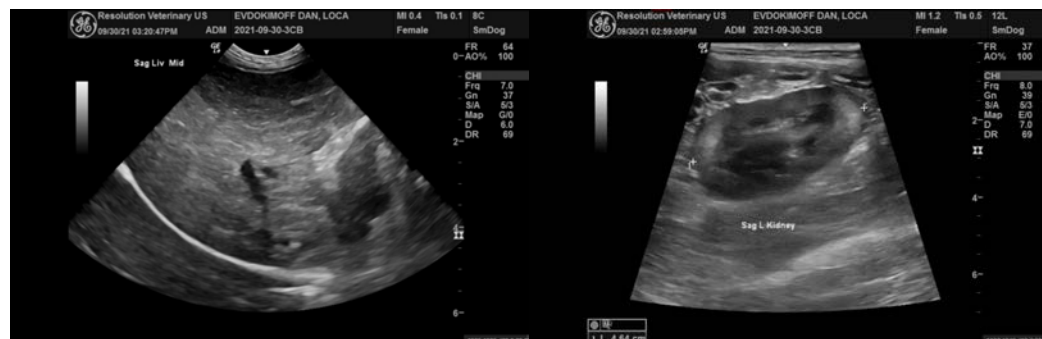
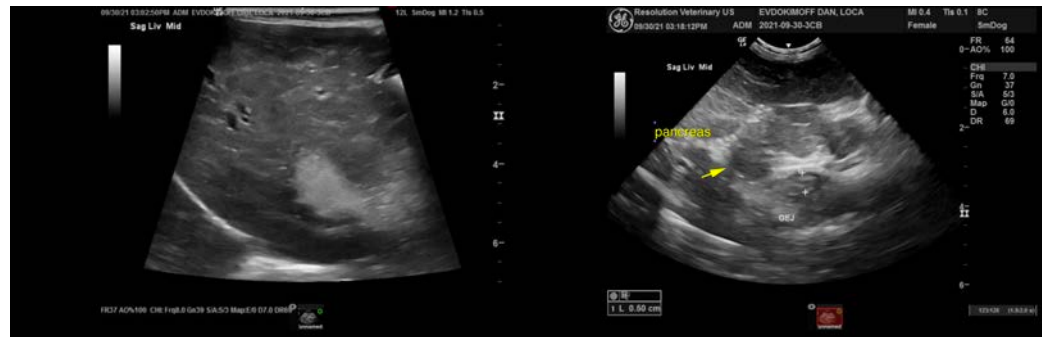
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen, liver and pancreas would be ideal in this patient. Bile acid profile warranted given the amount of hepatic remodeling. Trace amounts of free fluid noted, may be owing to early portal hypertension or lymphatic obstruction. Guarded prognosis. Chronic pancreatic remodeling and chronic cholangiohepatitis versus round cell neoplasia possible. If crusting skin lesions are present, then hepatocutaneous syndrome is a potential.





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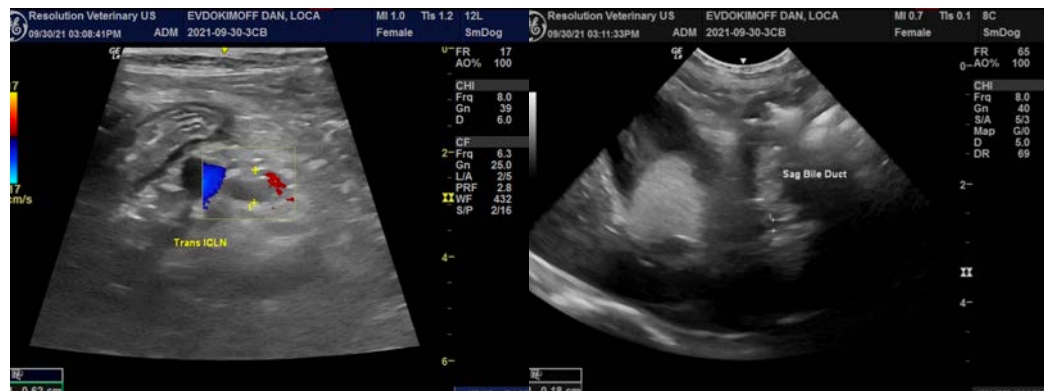
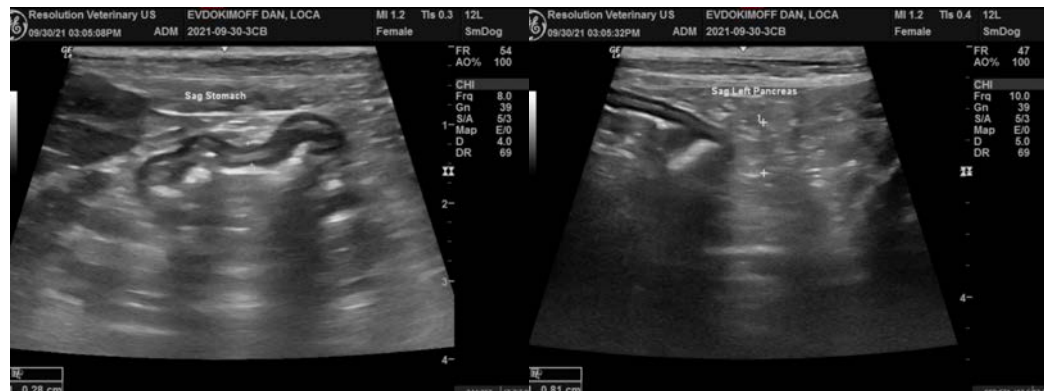
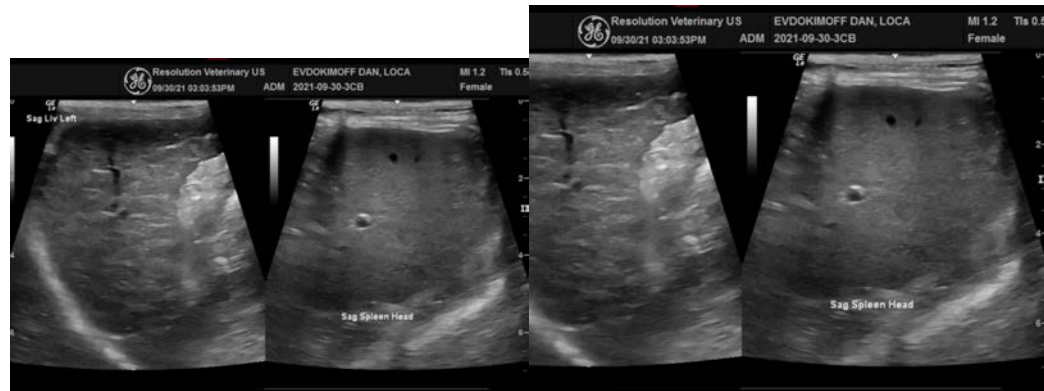
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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