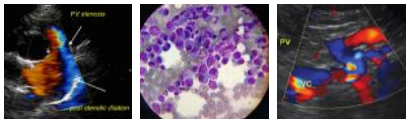
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
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DATE
9/30/22

PATIENT
Buddy Roth

SPECIES
Canine

BREED
Tibetan Terrier

SEX
Neutered Male

AGE
10/1/11

WEIGHT
Neutered Male

INTERPRETED BY
Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME
Jacksonville VH

REFERRING VET
Dr. Larsson

INVOICE
17511

PRESENTING CLINICAL SIGNS

History: Progressive Weight Loss with increase of food. Lost 10 pounds since spring. Diagnosed with diabetes in August 2022. On Purina EN fiber balance. Still PU/PD.

Current Medications: Fluoxetine 20mg PO SID, Vetsulin 5 units SQ BID
Lab Results: 8/31/22: Increased ALK PHOS 544, Increased GLUCOSE 413, Increased Amylase 7738, Increased Precision PSL 7194
CBC WNL. U/A: USG 1050, glucose +3, protein +1, ketones +4
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

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 minor 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 5.47 cm. Slight pinpoint mineralizations noted. The left kidney measured 5.47 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 right adrenal gland measured 0.8 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 2.67 cm x 0.67 cm at the caudal pole and 0.67 cm at the cranial pole.

Spleen

A hypoechoic nodule was noted at the caudal pole of the **spleen**, measuring 1.16 cm x 0.94 cm with hyperechoic surrounding fat suggestive for active inflammation. A separate splenic nodule was noted, measuring 1.87 cm with disrupted architecture.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some moderate age-related parenchymal remodeling was noted but likely not clinically significant at this time. 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. Occasional nondisruptive nodular changes were noted.

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

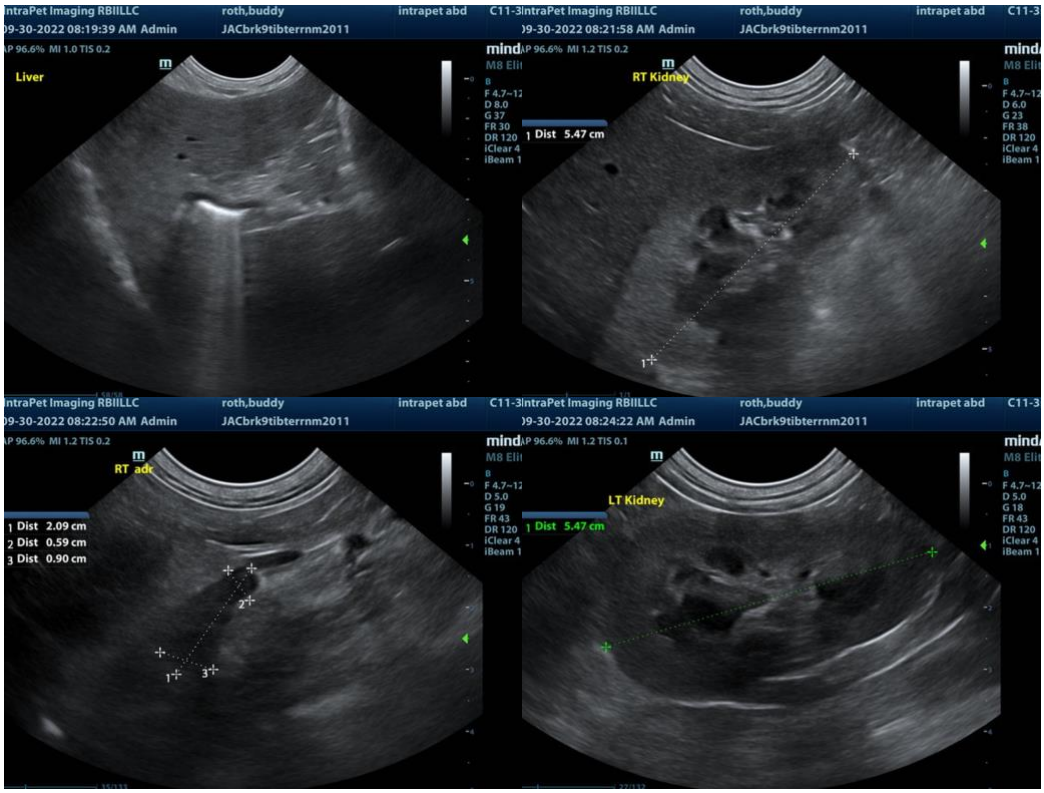
The **pancreas** revealed mixed echogenic changes with hypoechoic undulating contour and enhanced surrounding mesentery. The pancreatic changes were fairly extensive, both in the right and left limbs.

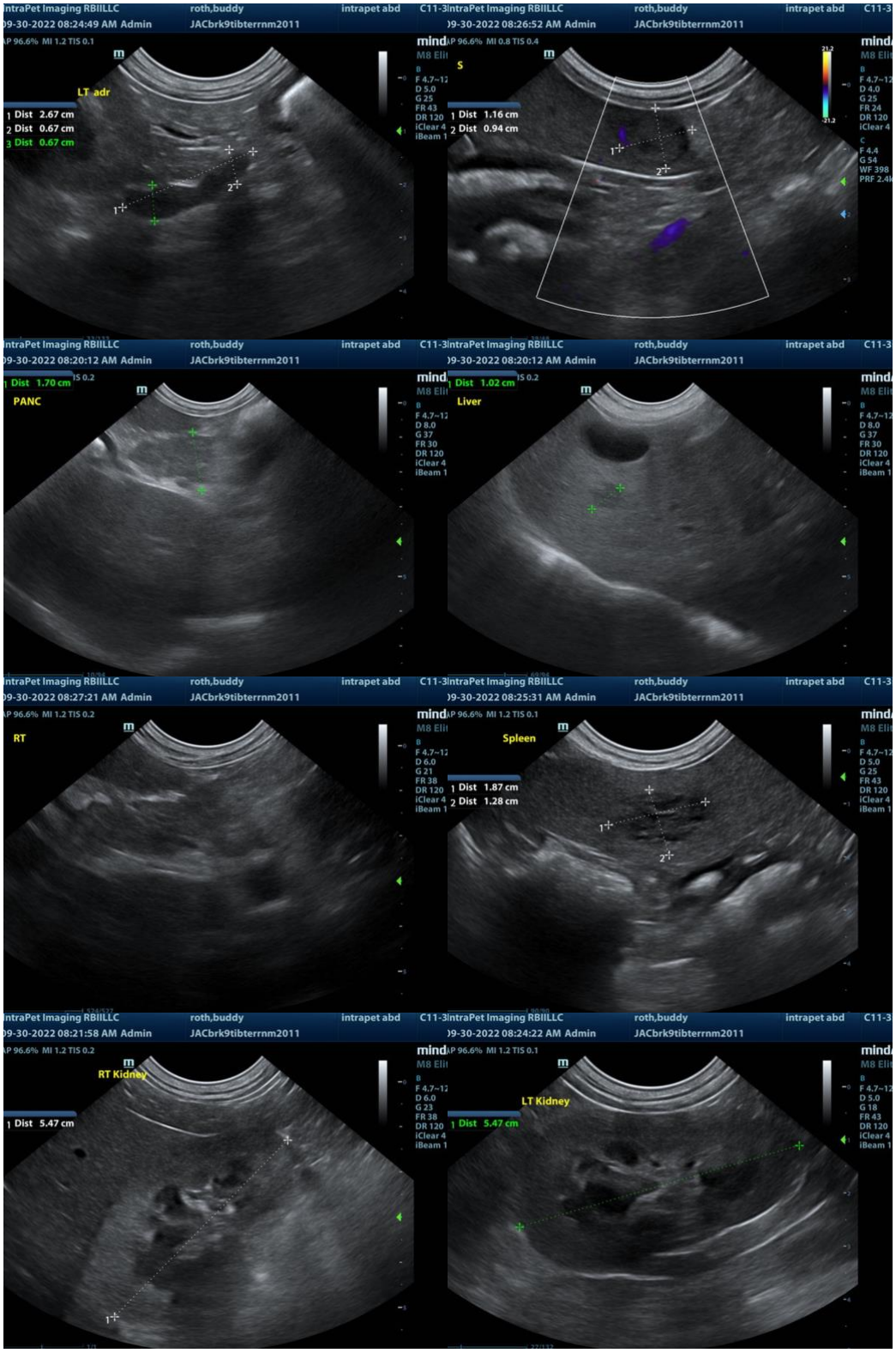
ULTRASONOGRAPHIC FINDINGS

- Extensive pancreatic remodeling and chronic active inflammatory pattern
- Splenic and hepatic nodules, round cell neoplasia, nodular hyperplasia, hemangiosarcoma are all possible
- Age-related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the splenic nodules and liver nodules are indicated. Treatment for pancreatitis is warranted in the meantime until cytology can be evaluated.




IntraPet Imaging RBIILLC
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LT adr
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3 Dist 0.67 cm
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PANC
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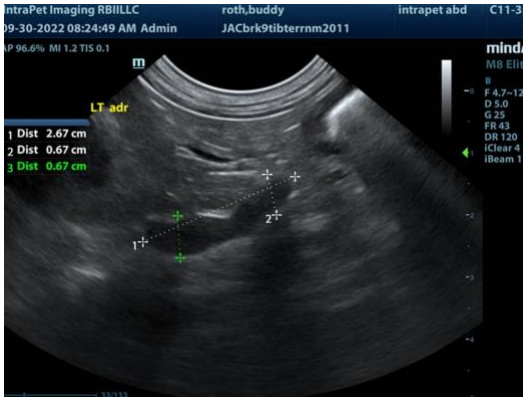

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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