



**PATIENT PRESENTING CLINICAL SIGNS**

Harley Carroll History: pancreatitis

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED** 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.

Chihuahua Mix

**SEX**

Neutered male

The **kidneys** were normal in size and contour; however, a minor hyperechoic ring was noted at the corticomedullary junction. This is consistent with diabetic nephropathy. This is likely from glucosuria. However, assessment for proteinuria is also warranted. This is an idiopathic finding, but an expected finding in diabetic patients. The right kidney measured 5.69 cm. The left kidney measured 5.36 cm.

**AGE**

5 years

**Adrenal Glands**

**WEIGHT**

20 lbs

The right adrenal gland was uniformly enlarged and measured 3.0 x 1.64 cm at the cranial pole and 0.76 cm at the caudal pole. The left adrenal gland was uniformly enlarged and measured 0.7 cm.

**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 was noted.

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**Liver**

Exam of the cranial abdomen demonstrated excessive **liver** size and swollen contour. Mild, coarse architecture was noted with increased portal markings and minor parenchymal remodeling is suggestive of an inflammatory component. Minor excessive GB debris was noted with the presence gall bladder dilation and precipitate without the overt formation of mucocele but this may be an issue in the future. This type of liver presentation typically is associated with slow and gradual SAP elevations with low-grade ALT rise. USG-FNA sampling is encouraged if more aggressive LE profiles are present such as ALT > 200 or rapid rise in SAP. These presentations are usually reactive hepatopathies owing to other disease processes either endocrine (Diabetes, Hypothyroidism, Cushing's disease), "antigen surveillance" from the gut/pancreas, or idiopathic breed predisposed progressions.

**REFERRING VET**

Dr. Maniar

**INVOICE**

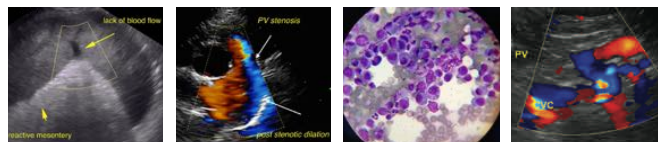
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**DATE**

9/7/21

**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



**PATIENT**

Harley Carroll

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**

The **pancreas** appears largely unremarkable.

**BREED**

Chihuahua Mix

**ULTRASONOGRAPHIC FINDINGS**

Mild bilateral adrenal hypertrophy.

**SEX**

Neutered male

Diabetic nephropathy.

**AGE**

5 years

I suspect that the patient is in diabetic state. CBC, Chem and UA would be warranted to assess for diabetes. If the patient is not diabetic then emerging diabetic state may be an issue. Assessment for proteinuria and glucosuria is warranted given the medullary rim sign in the kidneys. If the patient is PU/PD then work up for PDH is indicated given the bilateral adrenal enlargement even though this patient is at a young age for Cushingoid state. Emerging PDH may be an issue depending on clinical parameters.

**WEIGHT**

20 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Eric Lindquist, DMV  
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**IMAGING PERFORMED BY**

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**HOSPITAL NAME**

Rockaway AH

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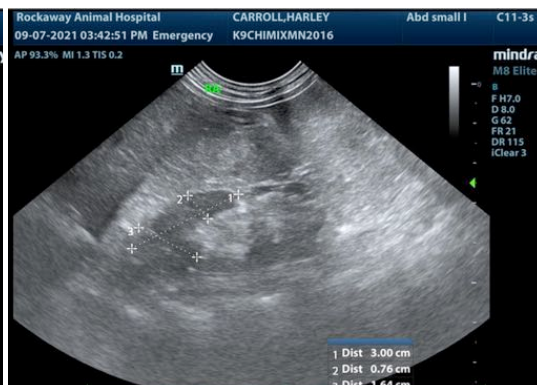
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**PATIENT**

Harley Carroll

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

Neutered male

**AGE**

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**WEIGHT**

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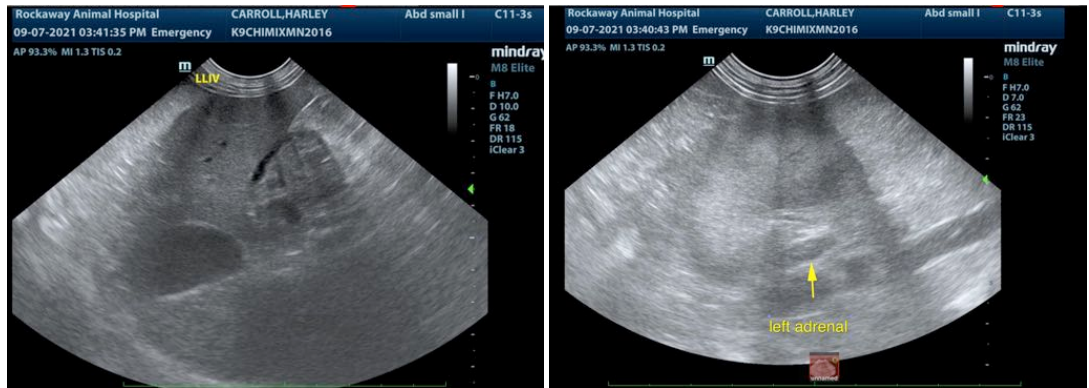
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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