



**PATIENT**

Walter Demmers

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

Neutered male

**AGE**

11 years

**WEIGHT**

9.46 lbs

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Willakenzie AC

**REFERRING VET**

Dr. Whalen

**DATE**

12/8/21

**Invoice**  
94402

**PRESENTING CLINICAL SIGNS**

History: History of mucooid stool, vomiting, and unclear findings upon radiograph of cranial abdomen.  
Abnormal PE/Chem/CBC/UA Results: SDMA and BUN slightly elevated

**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 moderate degenerative changes and increased cortical echogenicity. Minor pyelectasia was noted in the kidneys. Slight mineralization was noted in both kidneys. The left kidney measured 3.4 cm. The right kidney measured 3.48 cm.

**Adrenal Glands**

The right **adrenal gland** was at the upper limits of normal to slightly enlarged and measured 2.03 x 0.78 cm at the cranial pole and 0.78 cm at the caudal pole. The left adrenal gland measured 1.66 x 0.49 cm at the cranial pole and 0.61 cm at the caudal 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. 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**

Walter Demmers

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

**BREED**

Shih Tzu

**Pancreas**

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.

**SEX**

Neutered male

**Heart**

Rapid view of the heart revealed no evidence of pathology.

**AGE**

11 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

9.46 lbs

Moderate degenerative renal changes. Acute on chronic insult is suspected.

Structurally unremarkable gastrointestinal tract.

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

IV fluid support, full urinary work-up and GI protectants should prove effective. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Willakenzie AC

**REFERRING VET**

Dr. Whalen

**DATE**

12/8/21

**Invoice**  
94402





**PATIENT**

Walter Demmers

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

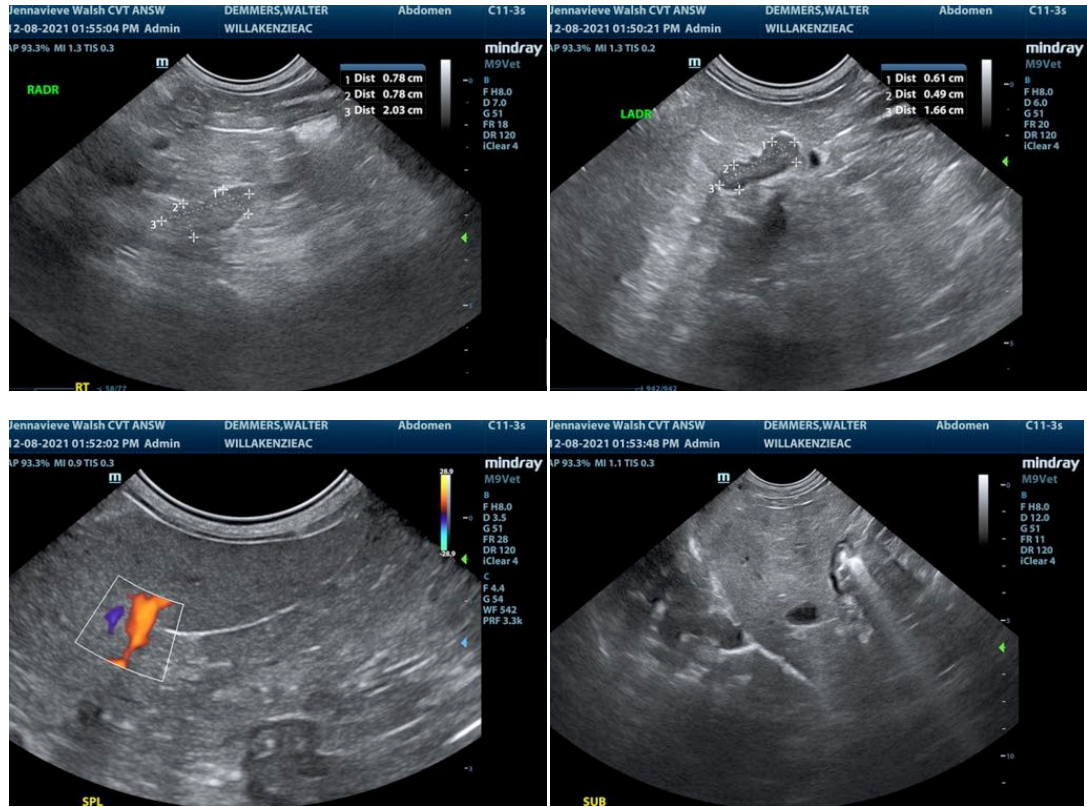
Neutered male

**AGE**

11 years

**WEIGHT**

9.46 lbs



**INTERPRETED BY**

Eric Lindquist, DMV, DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Willakenzie AC

**REFERRING VET**

Dr. Whalen

**DATE**

12/8/21

**Invoice**  
94402

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.

**Eric Lindquist, DMV, DABVP, Cert. IVUSS**

CEO of SonoPath.com

Eric.Lindquist@SonoPath.com