



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Manny Head	History: Increased liver values. ALKP 245, Mg 1.4. U/A-USG 1.043, Prot trace, Bili 1+, Dk. yellow
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The <b>urinary bladder</b> , 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.
Great Dane	
<b>SEX</b>	The residual prostate was uniform and measured 1.7 cm.
Neutered male	The <b>kidneys</b> revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 7.99 cm.
<b>AGE</b>	
7 years	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
127.6 lbs	Both <b>adrenal glands</b> 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 3.4 x 0.53 cm at the cranial pole and 0.55 cm at the caudal pole. The right adrenal gland measured 3.04 x 1.17 cm at the cranial pole and 0.88 cm at the caudal pole.
<b>INTERPRETED BY</b>	
Eric Lindquist, DMV DABVP, Cert. IVUSS	
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Shari Reffi, CVT	The <b>spleen</b> in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.
<b>HOSPITAL NAME</b>	<b>Liver</b>
Summit Dog and Cat Hospital	The <b>liver</b> revealed slightly increased portal markings. Mild hepatic remodeling was noted. The portal vein was prominent, yet no evidence of portosystemic shunting. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.
<b>REFERRING VET</b>	<b>Gastrointestinal</b>
Dr. Vogler	The <b>gastrointestinal</b> presentation revealed mild uniform prominence of the gastric mucosa as well as areas of "ropey" small intestinal wall with slight disruption of the normal 1:3 muscularis/mucosal ratio. The intestinal submucosa was slightly irregular, thickened and hyperechoic suggestive of low grade, chronic disease. No concerning lymphadenopathy was visible. No evidence of obstruction was present.
<b>INVOICE</b>	
42497	
<b>DATE</b>	
1/4/23	



**PATIENT**

Manny Head

Chronic inflammatory bowel disease is likely with a low possibility of an early neoplastic event such as lymphoma. Full thickness tissue biopsies via open laparotomy, ideally guided by intraoperative ultrasound in order to obtain the most representative mural sample, would be necessary to rule out this possibility.

**SPECIES**

Canine

**Pancreas**

**BREED**

Great Dane

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

**ULTRASONOGRAPHIC FINDINGS**

Mild hepatic remodeling. History of inflammatory hepatopathy is likely.

**AGE**

7 years

Minor upper gastrointestinal thickening.

Prominent portal vein.

**WEIGHT**

127.6 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Bile acid profile would be ideal. Underlying food intolerance, occult parasitism or other causes of chronic inflammation may be periodically affecting this patient given the hepatic and GI presentation. Depending on the patient's history diet change may be in order. Prominent and slightly tortuous portal hypertension may be developing in this patient. FNA of the liver is warranted for further definition or eventual core biopsy. However, with only ALKP elevation this is likely stable at this time.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Summit Dog and Cat  
Hospital

**REFERRING VET**

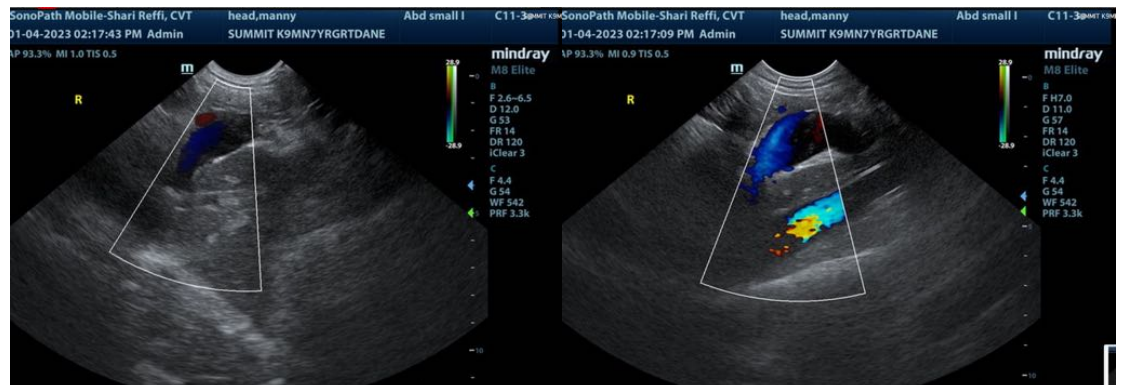
Dr. Vogler

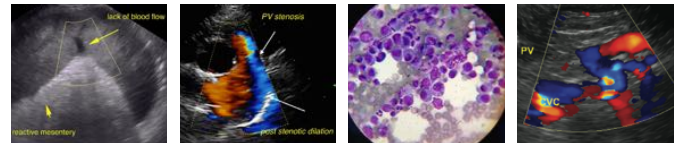
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**PATIENT**

Manny Head

**SPECIES**

Canine

**BREED**

Great Dane

**SEX**

Neutered male

**AGE**

7 years

**WEIGHT**

127.6 lbs

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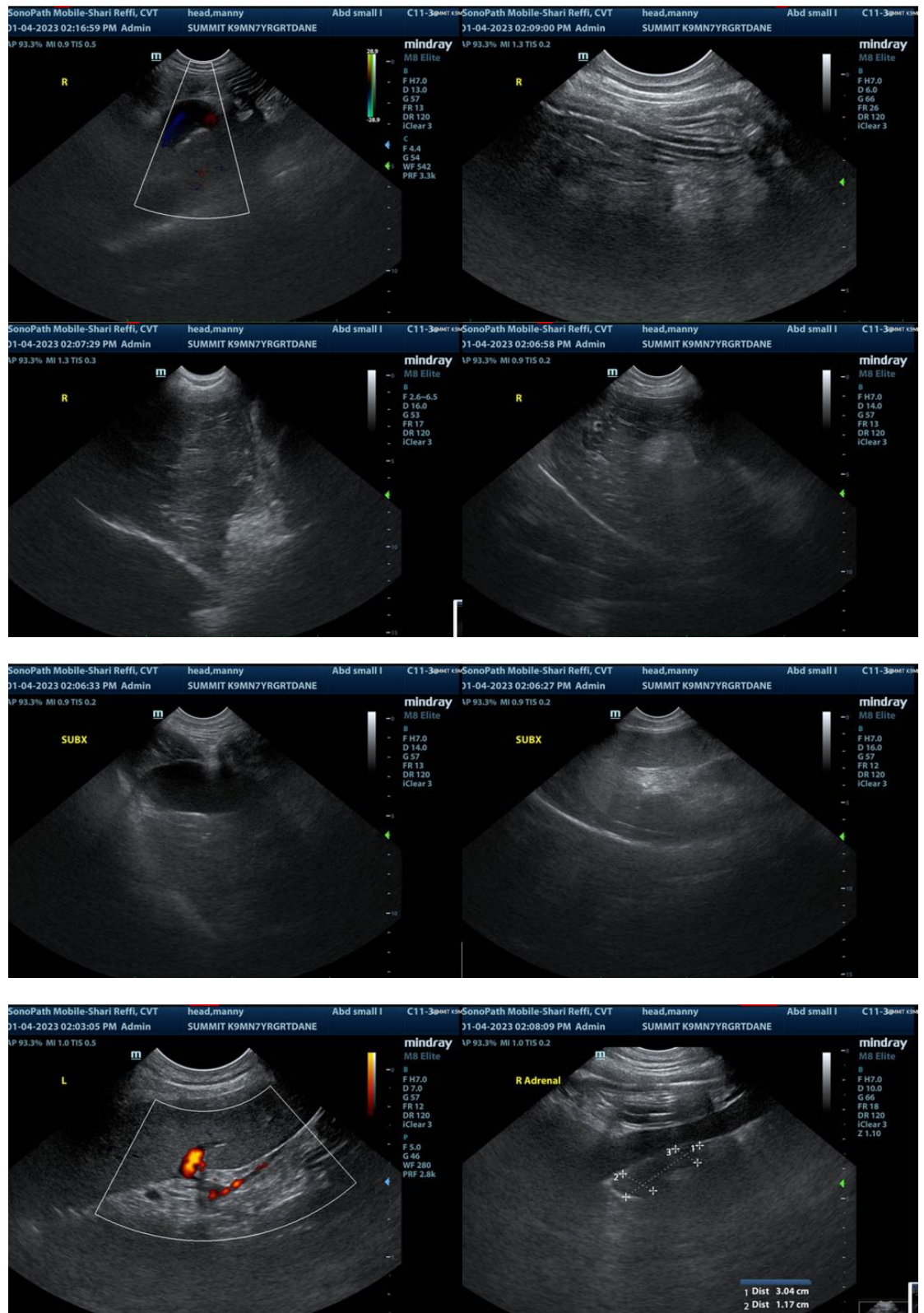
Dr. Vogler

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**PATIENT**

Manny Head

**SPECIES**

Canine

**BREED**

Great Dane

**SEX**

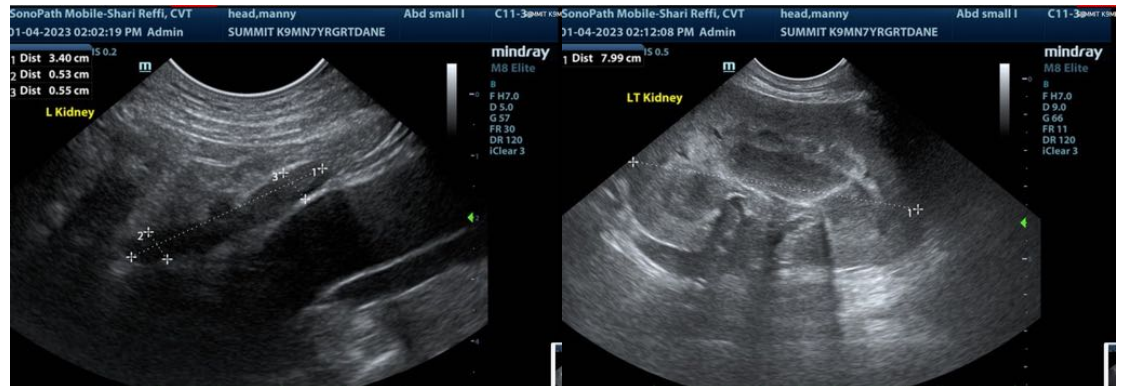
Neutered male

**AGE**

7 years

**WEIGHT**

127.6 lbs



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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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**  
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