



**PATIENT PRESENTING CLINICAL SIGNS**

Audo Kormondy

History: asymptomatic, repeated low platelets counts. R/O splenic disease, neoplasia. On cytopoint injection monthly for allergies.

**SPECIES**

Abnormal PE/Chem/CBC/UA Results: platelets 81,000; 10/10/22: coag profile normal, accuplex neg, UA wnl, USPG 1.057

Canine

**BREED**

German Shepherd

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**  
*Urinary System*

**SEX**

Neutered male

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.

**AGE**

6 years

The prostate was slightly heterogenous and measured 2.1 cm in width. If the patient was a later in life neuter underlying prostatitis may have been the issue.

**WEIGHT**

85.5 lbs

The **kidneys** 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 right kidney measured 6.95 cm. The left kidney measured 8.4 cm.

*Adrenal Glands*

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

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 2.47 x 0.74 cm at the caudal pole and 0.76 cm at the cranial pole. The right adrenal gland measured 3.08 x 1.67 cm at the cranial pole and 0.44 cm at the caudal pole.

**IMAGING PERFORMED BY**

Diane McFadden, RVT

*Spleen*

**HOSPITAL NAME**

Whippany VH

The **spleen** was folded upon itself cranially with mild, uniform enlargement. This is typical for the breed. Underlying hyperplasia is possible especially given the subnormal platelet count.

**REFERRING VET**

Dr. Smith

*Liver*

**INVOICE**

40150

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. 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.

**DATE**

10/19/22



**PATIENT**

**Gastrointestinal**

Audo Kormondy

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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**

**Pancreas**

German Shepherd

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**

**AGE**

6 years

Rapid view of the heart revealed no evidence of pathology.

**WEIGHT**

85.5 lbs

**ULTRASONOGRAPHIC FINDINGS**

Minor hypersplenism, typical for breed.

Slightly heterogenous prostate, may be normal if the patient was neutered later in life.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Given the patient's history Doxycycline trial and tick borne disease panel would be indicated. Prostatic palpation is warranted to assess if the tissue is firm or collapsible, the latter of which would suggest benign remodeling.

**IMAGING PERFORMED BY**

Diane McFadden, RVT

**HOSPITAL NAME**

Whippany VH

**REFERRING VET**

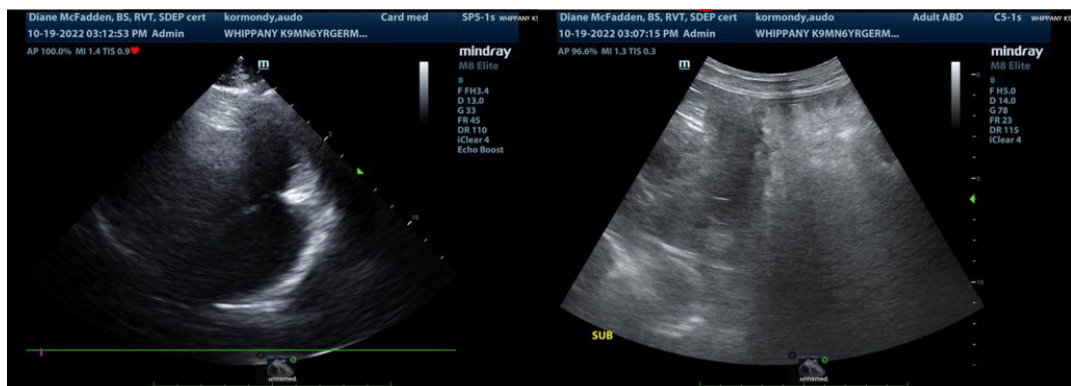
Dr. Smith

**INVOICE**

40150

**DATE**

10/19/22





**PATIENT**

Audo Kormondy

**SPECIES**

Canine

**BREED**

German Shepherd

**SEX**

Neutered male

**AGE**

6 years

**WEIGHT**

85.5 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Diane McFadden, RVT

**HOSPITAL NAME**

Whippany VH

**REFERRING VET**

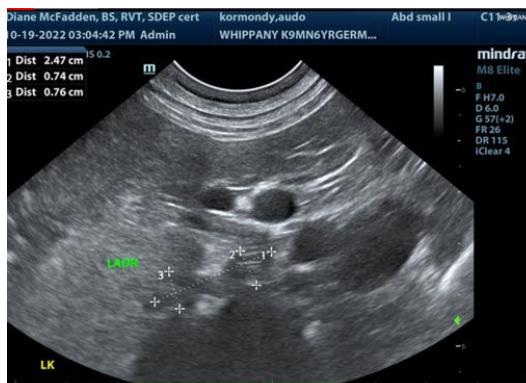
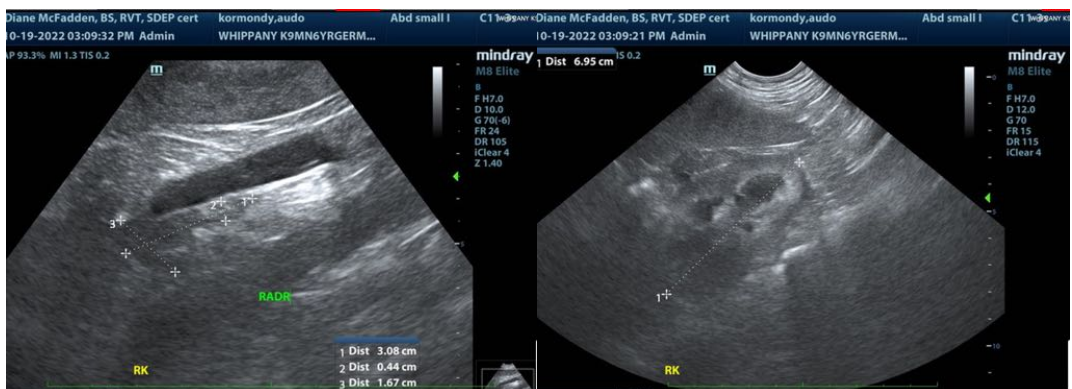
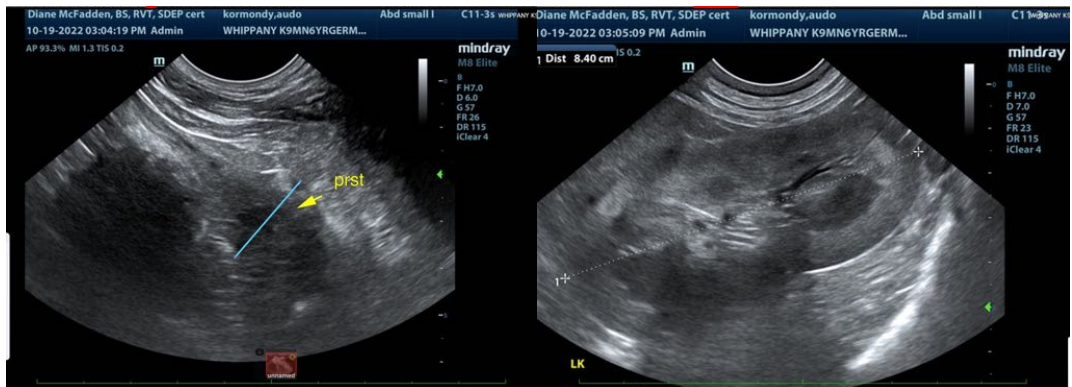
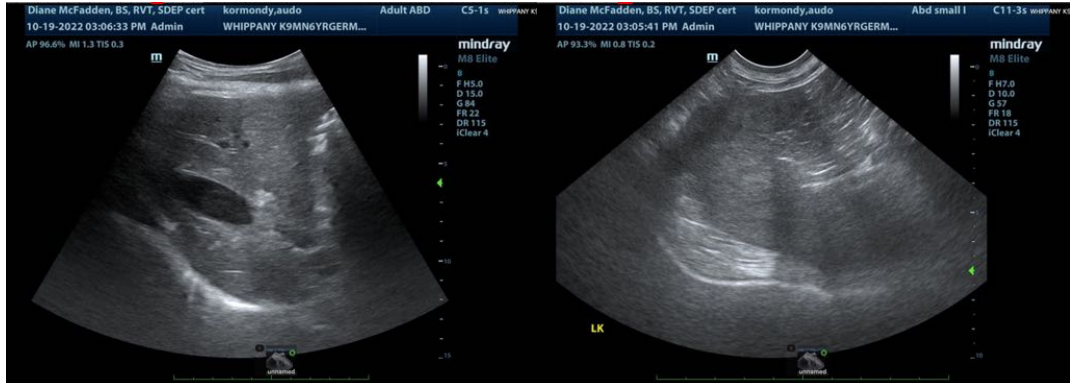
Dr. Smith

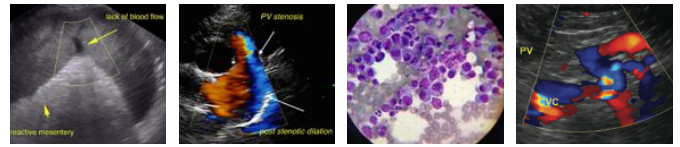
**INVOICE**

40150

**DATE**

10/19/22





**PATIENT**

Auto Kormondy

**SPECIES**

Canine

**BREED**

German Shepherd

**SEX**

Neutered male

**AGE**

6 years

**WEIGHT**

85.5 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Diane McFadden, RVT

**HOSPITAL NAME**

Whippany VH

**REFERRING VET**

Dr. Smith

**INVOICE**

40150

**DATE**

10/19/22

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  
Info@SonoPath.com