



PATIENT

PRESENTING CLINICAL SIGNS

Twenty Paws Bailey

ALP 255, CBC HCT 35.1

SPECIES

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Pit

SEX

Intact female

The **urinary bladder** presented a relatively uniform thickening of the cranioventral and craniodorsal mucosae with micropolypoid mucosal changes without involvement of the submucosae. Polypoid changes were noted and measured up to 2.0 x 1.0 cm at the apex. This appears resectable. The urine presented some echogenicity consistent with suspended debris. No evidence of urethral pathology was present. This presentation is most consistent with chronic cystitis. Technically transitional cell carcinoma cannot be ruled out without histopathological review but is not overtly suspected based on this pattern. Cystocentesis and urine culture +/- pathological review of urine cytology would be warranted. No overt calculi were present at this time.

AGE

10 years

The uterus was dilated with thickened mucosal changes that are consistent with pyometra. The uterus measured up to 2.0 cm in width.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 left kidney measured 6.36 cm.

IMAGING PERFORMED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

HOSPITAL NAME

Franklin Lakes AH

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 0.9 cm at the cranial pole and 0.9 cm at the caudal pole. The right adrenal gland measured 2.75 x 0.94 cm at the cranial pole and 0.6 cm at the caudal pole.

REFERRING VET

Dr. Hudson

Spleen

The **spleen** was heterogenous with a focal 3.37 cm parenchymal mass without evidence of cavitation.

INVOICE

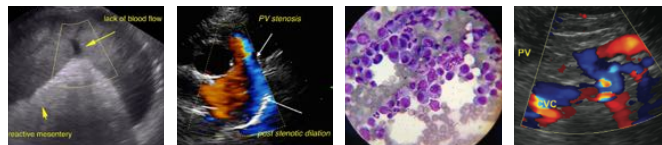
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Liver

DATE

3/7/23

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.



PATIENT

Gastrointestinal

Twenty Paws Bailey

The **stomach** revealed a 4.0 cm shadowing structure along with ingesta. I suspect foreign matter. The small intestine and colon were unremarkable.

SPECIES

Canine

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

BREED

Pit

SEX

Intact female

ULTRASONOGRAPHIC FINDINGS

Chronic cystitis bladder pattern.

AGE

10 years

Pyometra.

Bilateral adrenal hypertrophy.

Splenic mass. Hyperplasia versus hemangiosarcoma or less likely round cell neoplasia.

Gastric foreign matter.

INTERPRETED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend ovariohysterectomy, splenectomy, gastrotomy and apical bladder wall biopsy. Chest radiographs are warranted prior to any surgical intervention.

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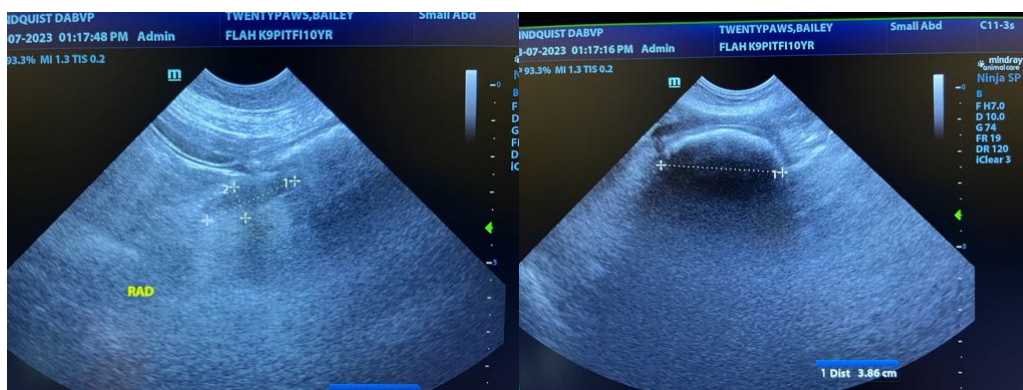
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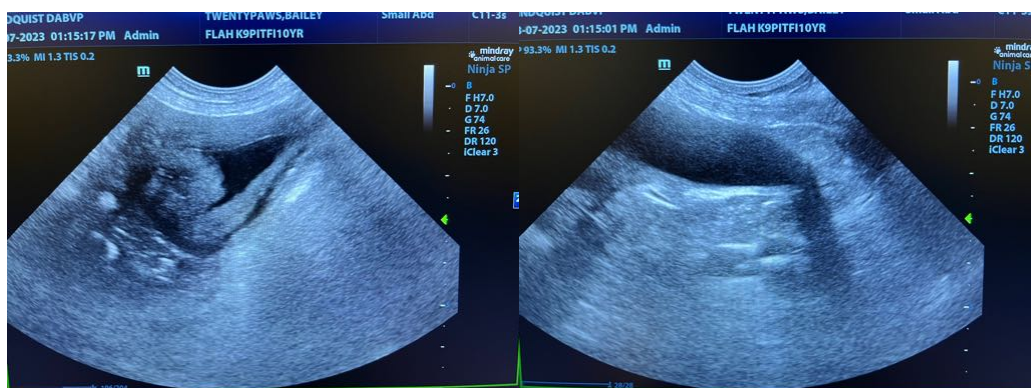
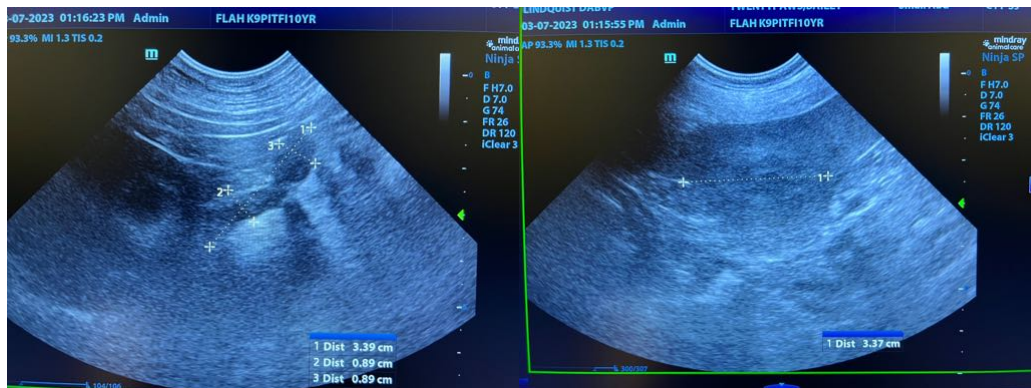
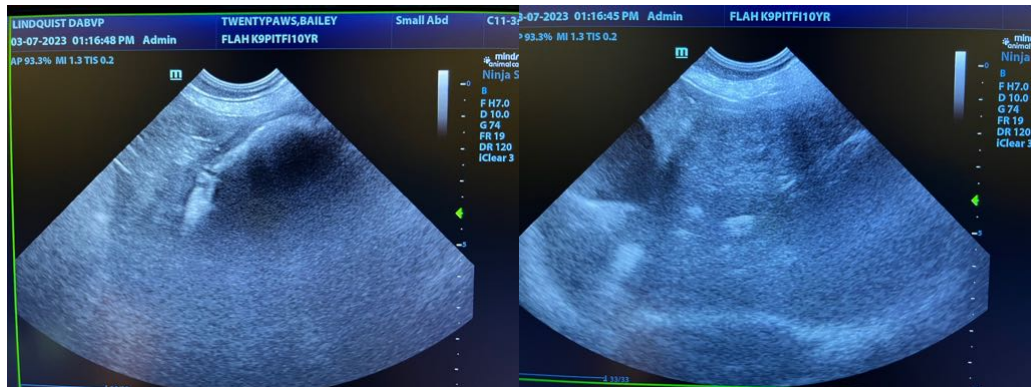
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PATIENT

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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.

SPECIES

Canine

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.

BREED

Pit

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
Info@SonoPath.com

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Intact female

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