



**PATIENT**

Maya Fresco

**SPECIES**

Canine

**BREED**

Labrador Mix

**SEX**

Spayed female

**AGE**

10 years

**WEIGHT**

72 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Heart and Paw

**REFERRING VET**

Dr. Blackman

**INVOICE**

47801

**DATE**

6/19/23

**PRESENTING CLINICAL SIGNS**

History: Elevated liver enzymes, O notes increased panting. Fast scan revealed hepatomegaly, splenomegaly with hyperechoic diffuse speckling. Current meds: none (pending u/s report)  
Abnormal PE/Chem/CBC/UA Results: ALT 913; ALKP 7854

**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 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. Pinpoint mineralization was noted in the kidneys. The left kidney measured 6.9 cm. The right kidney measured 7.64 cm.

**Adrenal Glands**

The right **adrenal gland** was enlarged, mineralized and measured 5.06 x 3.32 cm at the cranial pole and 1.92 cm at the caudal pole. Vena cava appeared to have early invasion by the right adrenal mass to an extension of approximately 2 cm. The left adrenal gland revealed a swollen cranial pole that measured 0.88 cm and the caudal pole measured 0.38 cm and 0.97 cm in length.

**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. Splenic mineralization was noted. 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** 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.



<b>PATIENT</b>	<b><i>Gastrointestinal</i></b>
Maya Fresco	There was some residual chyme and gas was noted in the <b>stomach</b> , 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.
<b>SPECIES</b>	
Canine	
<b>BREED</b>	<b><i>Pancreas</i></b>
Labrador Mix	The right limb of the <b>pancreas</b> was heterogenous with mixed hyperechoic and hypoechoic changes. This is consistent with remodeling and potential low grade inflammation.
<b>SEX</b>	<b><i>Heart</i></b>
Spayed female	Rapid view of the heart revealed no evidence of pathology.
<b>AGE</b>	
10 years	<b>ULTRASONOGRAPHIC FINDINGS</b>
<b>WEIGHT</b>	Right adrenal mass, early caval invasion.
72 lbs	Pancreatic remodeling, potential low-grade inflammation.
	Vacuolar hepatopathy/endocrine induced hepatopathy.
<b>INTERPRETED BY</b>	Splenic mineralization, likely secondary to underlying Cushing's disease/adrenal dependent Cushing's is suspected.
Eric Lindquist, DMV DABVP, Cert. IVUSS	Age related renal changes.
<b>IMAGING PERFORMED BY</b>	<b><u>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</u></b>
Shari Reffi, CVT	There is a potential for early, low-grade pancreatitis. The right adrenal gland appears to be potentially resectable if the surgeon is prepared for early invasion. CT invasion with contrast would be ideal for further definition. Work-up for adrenal dependent Cushing's is indicated. Blood pressure measurements are recommended.
<b>HOSPITAL NAME</b>	<b>ABOUT SONOPATH CT SERVICES:</b>
Heart and Paw	<b>SonoPath CT Services</b> are offered at the SonoPath Imaging and Veterinary Education Center, 141 Main St (rt 206), Andover, New Jersey, a 20-minute drive west on route 80/206 North from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at <a href="https://sonopath.com/services/vetimaging/">https://sonopath.com/services/vetimaging/</a>
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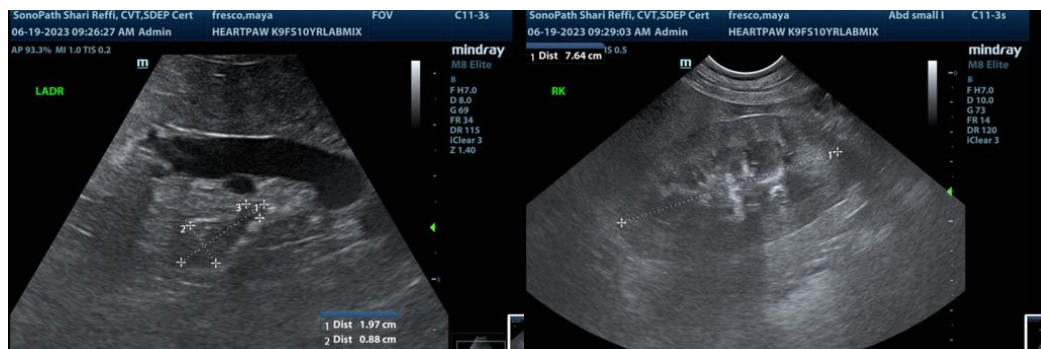
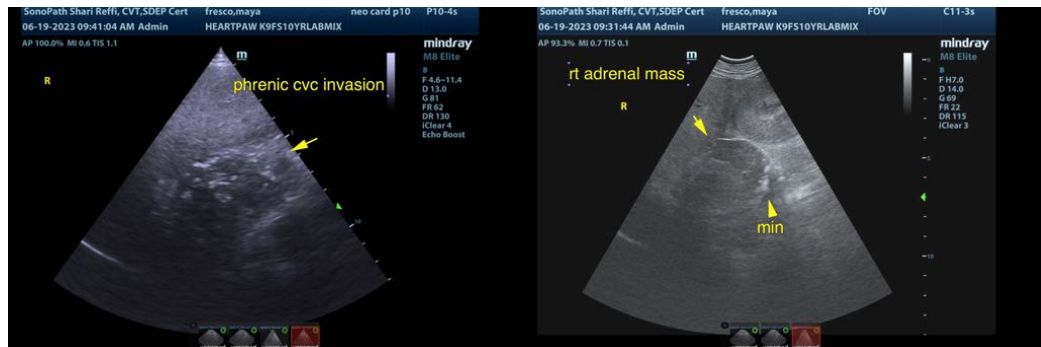
Dr. Blackman

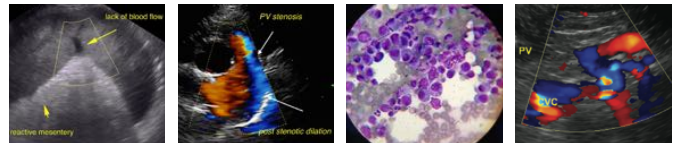
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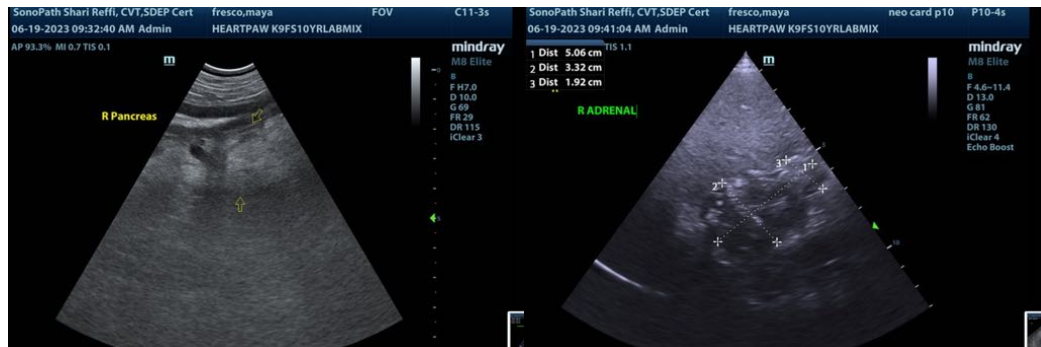
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**  
Info@SonoPath.com