



PATIENT

Max MacDonald

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

14 Years

WEIGHT

32 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency
Care

REFERRING VET

Dr. Drummond

INVOICE

33911

DATE

1/1/22

PRESENTING CLINICAL SIGNS

continued hospitalization overnight for supportive care and monitoring of cholestatic hepatopathy. Max presented to BBVSH/ER with a history of pain and anorexia. Max was at his pcdvm on 12/29 where he received DHLP and bordetella vaccinations. He began vomiting on the way home and was dispensed cerenia. He has had no further vomiting but has been inappetent, lethargic, and trembling. He has a history of a cough of ~1-year duration.

Abnormal PE/Chem/CBC/UA Results: - Max had abdominal pain and dehydration appreciated on presentation. -Abd thoracic rads: rounded, slightly abnormal liver - petrays rad review appreciated unremarkable thorax and abdomen. -Admitting Chem10, Tbili, CBC showed cholestatic hepatopathy (ALT; 744, ALP: >2000, Tbili: 4.8), mild neutrophilia (12.14k), mild non-regenerative anemia (HCT: 36%, low retics). UA showed grey zone/minimally concentrated urine (USG: 1.025), proteinuria (100), and bilirubinuria. -Recheck Chem17 showed mild improvement in LEs (ALT: 628, ALP: 1981), progression of hyperbilirubinemia (5.8), and elevated DEs (amyl: >2500, lipase: 5442). PCV/TP remained unchanged at 38%/7.4. -Clinically looking brighter, has eaten whenever offered, but *profoundly* tender with palpation in right cranial quadrant especially

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. The residual prostate measured 1.0 cm.

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 right kidney measured 7.76 cm. The left kidney measured 7.19 cm.

Adrenal Glands

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 0.70 cm. The right adrenal gland measured 0.75 cm.

Spleen

The **spleen** was enlarged with coarse architecture and swollen irregular contour with hyperechoic nodular changes, consistent with lipogranulomas. However, subtle honeycomb-type appearance of the spleen noted with generalized swelling. Strong concern for infiltrative disease/round cell neoplasia.

Liver

The **liver** exhibited a similar pattern as the spleen with swollen irregular contour, increased portal markings, and subtle micronodular granular type parenchymal changes. The common bile duct was not visible owing to the pancreatic pathology. Some level of post-hepatic obstruction may be playing a role in the bilirubin elevations as well. The gallbladder was mildly turgid, yet fairly expected for this type of pathology.



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The **stomach** was unremarkable and empty. Duodenal spasm and variable thickening noted. Regional lymph nodes were enlarged.

SPECIES

Pancreas

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The right **pancreatic** limb revealed mixed hypoechoic parenchymal changes with hyperechoic inflamed surrounding fat. The pancreatic pathology enveloped the upper gastrointestinal tract and extended for approximately 6.0 cm.

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Labrador Retriever

ULTRASONOGRAPHIC FINDINGS

SEX

- Extensive pancreatitis
- Splenohepatic swelling with granular appearance – splenitis, cholangiohepatitis and pancreatitis versus round cell neoplasia and concurrent pancreatitis

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

14 Years

FNA spleen, liver and pancreas strongly recommended. Plasma expanders, broad-spectrum antibiotics, pain management all indicated. Leptospirosis titers indicated. The amount of pancreatic pathology is fairly extensive and has an acute on chronic presentation. The regional lymphadenopathy is concerning for underlying neoplasia, hence the necessity for sampling. Some level of pancreatic necrosis likely.

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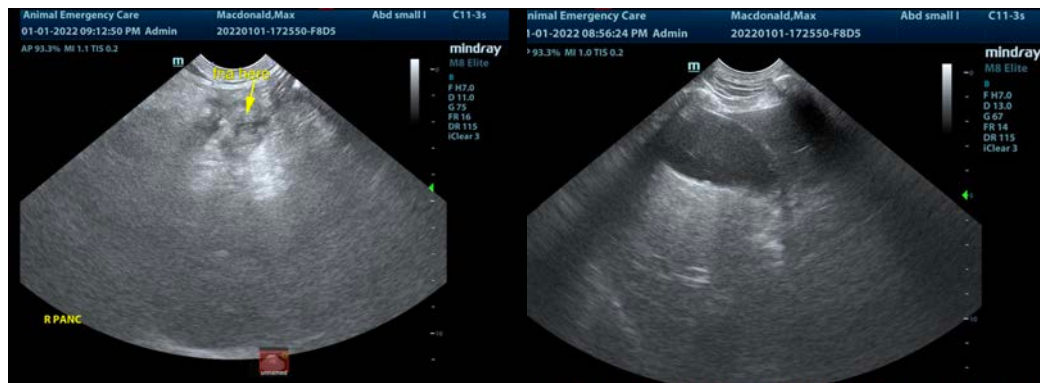


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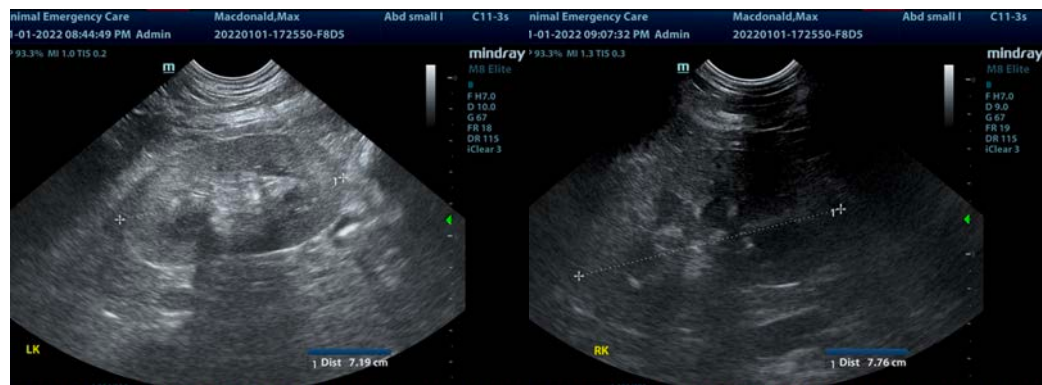
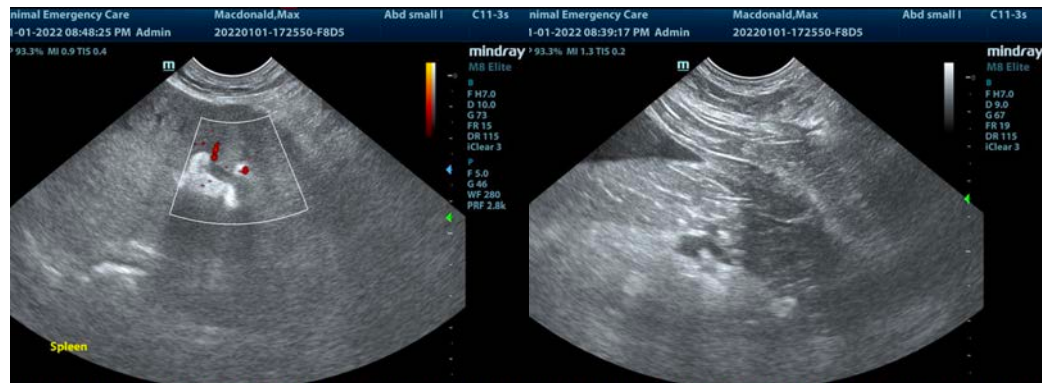
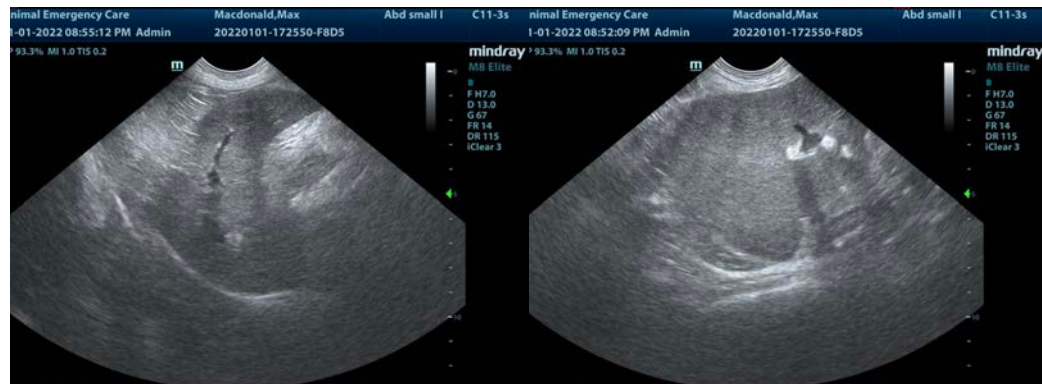
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com

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