



PATIENT PRESENTING CLINICAL SIGNS

Bonkers Dorazio

Previously dx with IBD due to chronic vomiting. PE: nsf Bonkers has been on Prednisone for about 4 months. Previous BW did not show any changes with liver enzymes but more recently noted elevated ALT and large jump in SAP. Wish to screen for any secondary hepatic or gall bladder dz and evaluate intestinal health due to past dx of IBD. currently on: Prednisone, Intermittent Cerenia, Sulcrate, Pepcid. Occasional Gabapentin

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: ALT 284, ALP 1026, GGT 16

BREED

Bearded Collie

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 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.

AGE

12 Years

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 5.64 cm. The right kidney measured 6.74 cm.

WEIGHT

20 kg

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 right adrenal gland measured 2.12 cm x 1.21 cm at the cranial pole and 0.38 cm at the caudal pole. The left adrenal gland measured 2.22 cm x 0.33 cm at the caudal pole and 0.32 cm at the cranial pole.

IMAGING PERFORMED BY

Kelly Reschny

Spleen

HOSPITAL NAME

Sixteen Mile VC

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. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

REFERRING VET

Dr. Honda

Liver

The **liver** presented normal size and contour with slight coarse architecture. Minor physiologic gallbladder debris noted.

INVOICE

34138

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. 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.

DATE

1/11/22



PATIENT *Pancreas*

Bonkers Dorazio 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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

- Non-specific inflammatory hepatopathy
- Structurally unremarkable GI tract

BREED

Bearded Collie

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the liver warranted for further definition. Leptospirosis titers warranted to rule out chronic subclinical disease. Prednisone may be suppressing a more significant presentation. Given the chronic vomiting, a clinical trial of the following could be considered. The liver may represent a reactive hepatopathy owing to GI upset.

SEX

Neutered Male

Helicobacter/Gastritis protocol

AGE

12 Years

A clinical trial of **Zithromax** (Dogs: 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), **Metronidazole** (10-20 mg/kg p.o. b.i.d.), **Pepcid** (0.5-1 mg/kg s.i.d.) and **Sucralfate** (0.5-2 g/dog PO) or **Omeprazole** (1 mg/kg p.o. s.i.d.) over the next 3 weeks along with a **novel-protein or hydrolyzed diet** with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.

WEIGHT

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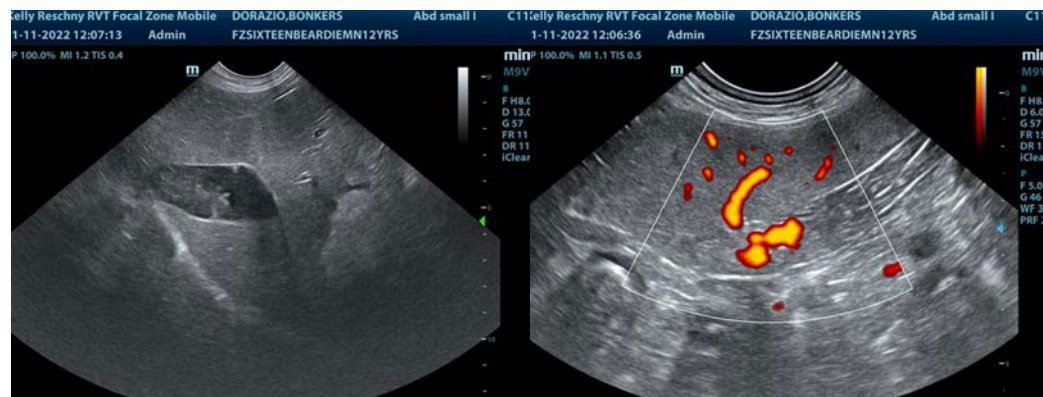


IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Sixteen Mile VC



REFERRING VET

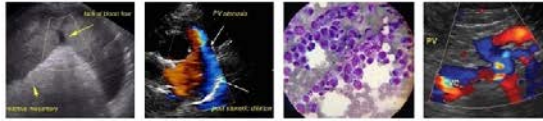
Dr. Honda

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PATIENT

Bonkers Dorazio

SPECIES

Canine

BREED

Bearded Collie

SEX

Neutered Male

AGE

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WEIGHT

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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.

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