



PATIENT

Digi Vogelsang

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

AGE

6 Years

WEIGHT

69.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Erica Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Erica Harmon

INVOICE

34276

DATE

1/15/22

PRESENTING CLINICAL SIGNS

increased swallowing/signs of nausea noted early January (1/5) seen at rDVM, full labs (CBC, CHEM 21, lytes, T4, UA and cPL all normal-performed 1/5/22) radiographs of thorax and abdomen unremarkable at that time (1/5) started on omeprazole and some signs of improvement noted starting last night (1/14) p started to vomit with some blood, had decreased appetite, re-presented to rDVM, started on fluids, cerenia, famotadine, Pen-G and transferred for further hosp and abdominal u/s

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 **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 left kidney measured 6.0 cm. The right kidney measured 6.0 cm.

Adrenal Glands

The regions of the **adrenal glands** were unremarkable.

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. 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.

Liver

The **liver** presented slight increased portal markings with coarse architecture. The gallbladder and common bile duct were unremarkable. History of inflammatory hepatopathy likely, yet appears to be stable.

Gastrointestinal

The **stomach** revealed a minor amount of non-obstructive artifact and gas. Slight shadowing material noted, may be oral medication, measuring approximately 1.3 cm. A large amount of gastrointestinal gas accumulation noted.

Pancreas

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.



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ULTRASONOGRAPHIC FINDINGS

- Excessive GI gas, no overt obstruction with a 1.2 cm soft shadowing material in the pylorus (likely oral medications)

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of surgical disease. Supportive care should prove effective.

BREED

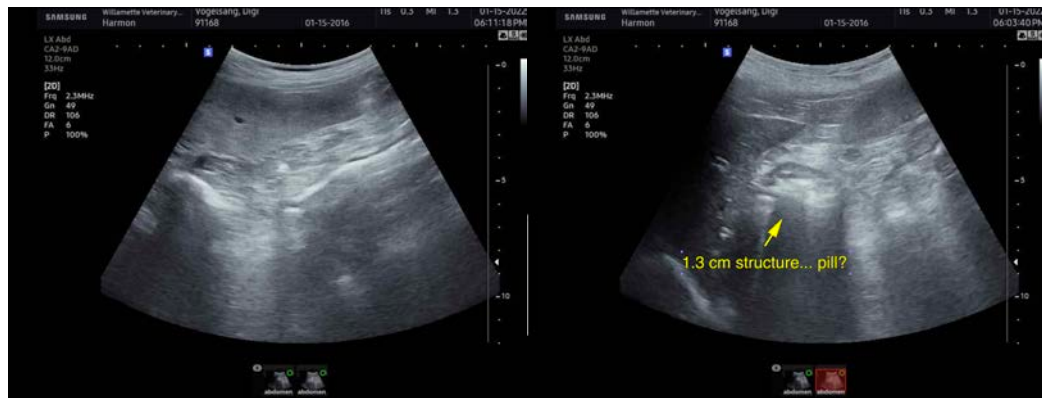
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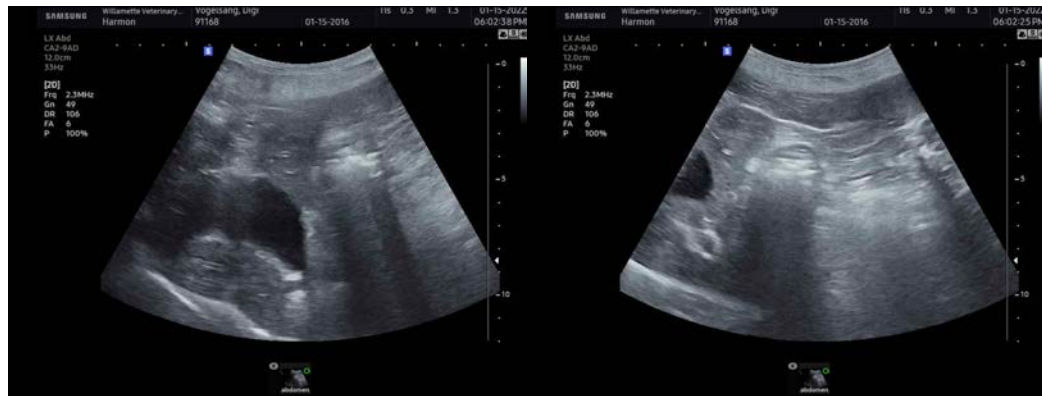
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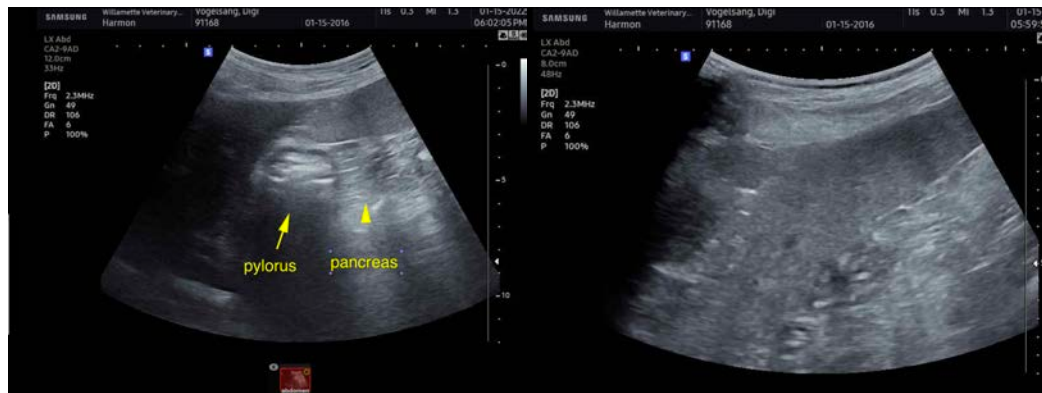
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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