



PATIENT

Walter Dascher

SPECIES

Canine

BREED

Portuguese Water Dog

SEX

Male

AGE

6 Months

WEIGHT

18.9 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency
Care

REFERRING VET

Dr. Ruark

INVOICE

33912

DATE

1/2/22

PRESENTING CLINICAL SIGNS

Otherwise healthy, no specific wayward ingestions, presented to primary care 12/31 for vomiting, inappetence. Radiographs suspicious for fb obstruction due to distended SI (report by radiologist). Hospital care through day on IVF, GI support, pt clinically doing well. Of note, evacuated voluminous foul diarrhea (no blood) during ultrasound
Abnormal PE/Chem/CBC/UA Results: Repeat rads last night not changed, pt did eat some chicken and drank water this morning Labs with mild leukopenia WBC 4K, neutropenia and lymphopenia (absolute; relative distribution is normal) Chem 10 and lactate normal Fecal exam pending Baseline cortisol pending

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 right kidney measured 7.68 cm. The left kidney measured 6.48 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 right adrenal gland measured 0.47 cm. The left adrenal gland measured 0.37 cm at the caudal pole and 0.42 cm at the cranial pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen was folded upon itself cranially. 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** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. Hepatic veins were mildly dilated as was the vena cava. This may be owing to overcirculation if aggressive fluid therapy is being utilized.

Gastrointestinal

The **stomach** was empty, yet mild pyloric hypertrophy noted. The small intestine was edematous, yet empty. The ileocecal junction was clearly visualized with fluid filled colon. Mesenteric lymph nodes were mildly enlarged, reactive.



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Pancreas

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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.

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Free Abdomen

A minor amount of free fluid was present in the caudal abdomen.

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ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis with reactive lymph nodes
- Slight free fluid

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Male

Parvovirus or similar should be considered. It is possible that a foreign body may have passed, yet no obstructive disease noted at this time. Plasma expanders, plasma transfusion, broad-spectrum antibiotics, GI protectants all indicated.

AGE

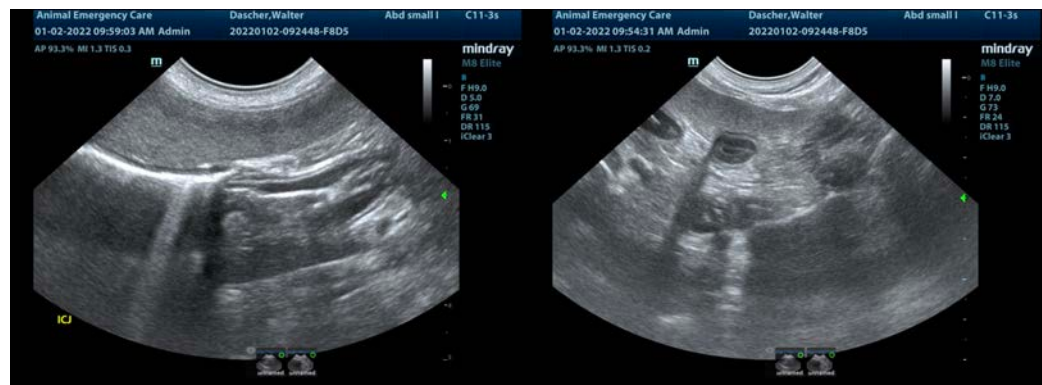
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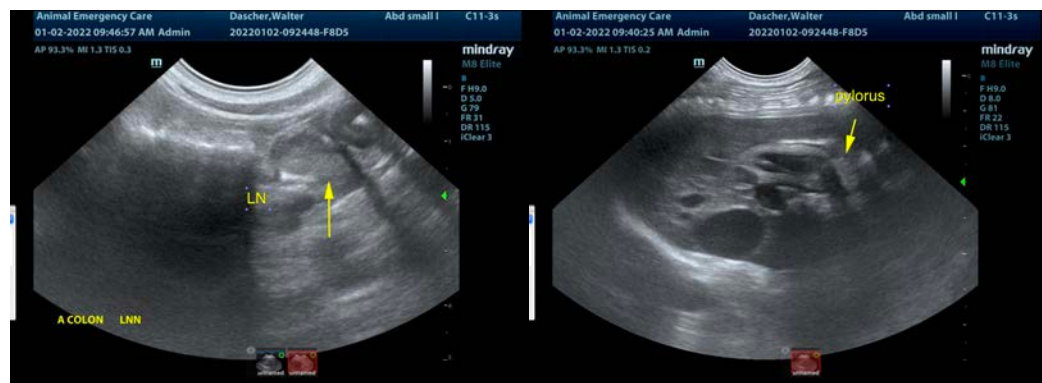
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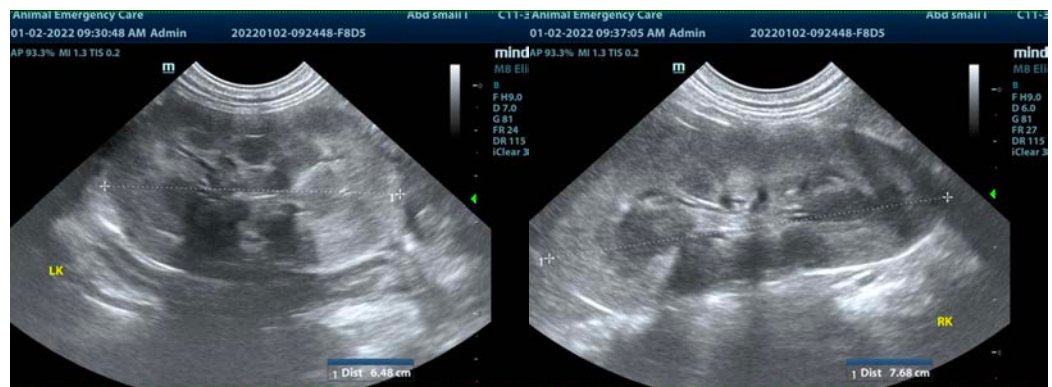
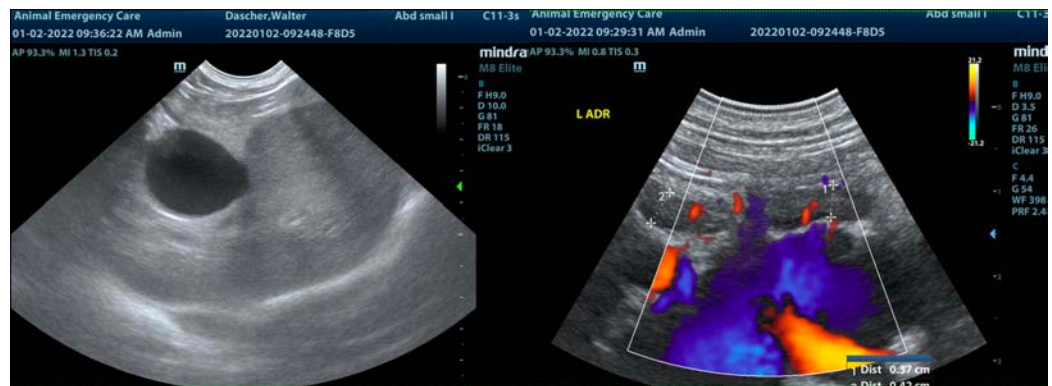
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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