



PATIENT PRESENTING CLINICAL SIGNS

Lucy King History: acute anorexia and vomiting

SPECIES Abnormal PE/Chem/CBC/UA Results: PE WNL spec 510 chc/chem azotemia, UPC 5.1, urine culture pending chest and abd rads WNL

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

GoldenDoodle 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.

SEX

Spayed Female 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 7.0 cm. The right kidney measured 6.5 cm.

AGE

9 Years

Adrenal Glands

WEIGHT

42 Lbs.

The **left adrenal gland** was 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 0.6 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The **right adrenal gland** was not visualized. The right adrenal was obscured by reactive mesentery in the region.

IMAGING PERFORMED BY

Dr. Scott

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.

HOSPITAL NAME

Ho Ho Kus VH

Liver

REFERRING VET

Dr. Eisenberg

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. 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.

INVOICE

13578

Gastrointestinal

DATE

1/24/22

The upper **gastrointestinal tract** in this patient revealed minor, edematous wall. There was no evidence of foreign bodies. The stomach was fluid filled with hyperperistalsis. This pattern continued



PATIENT

Lucy King

to the ileocecal valve. The colon revealed a fluid filled lumen. This presentation is most consistent with gastrointestinal irritation/inflammation without obstruction. Spastic small intestine noted. Reactive mesentery was noted associated with the small intestine.

SPECIES

Canine

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.

BREED

GoldenDoodle

ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis pattern with reactive mesentery

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of foreign bodies or neoplasia. Azotemia is likely either owing to prerenal disease or acute renal insult given the elevated UPC, but structurally the kidneys appear unremarkable which is normal for acute insult. Toxin or infectious exposure should be considered. Tick borne disease panel indicated. Gi protectant protocol, IV fluid support, blood pressures and doxycycline warranted. Leptospirosis should also be considered. Addison's should be ruled out with baseline cortisol, if not already performed, even though the left adrenal appeared normal.

WEIGHT

42 Lbs.

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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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