



PATIENT PRESENTING CLINICAL SIGNS

Lucia Wood Vomited cloth from a stuffed toy on Tuesday 1/25, suspect ingestion prior to obtaining puppy on 1/19. Diarrhea began 1/22. On 1/25 radiographs ("morning" = 1 pm and again about 6hr later "afternoon") found movement of ingesta without overt obstruction. Received supportive IVF. Negative fecal O&P, negative giardia ELISA. Improved energy and appetite Wed 1/26 until night when frequent, urgent liquid diarrhea began. Anorexic this am (ate only 2 bites of bland i/d diet then stopped eating).
Abnormal PE/Chem/CBC/UA Results: Current Medications Probiotic.

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact Female

AGE

9 Weeks

WEIGHT

7.4 kg

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 **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 6.14 cm. The right kidney measured 6.68 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 2.44 cm x 0.48 cm at the caudal pole and 0.42 cm at the cranial pole. The right adrenal gland measured 0.30 cm.

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** 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.

Portal vein/vena cava ratio was 1:1. No evidence of portosystemic shunts.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

VCA Salem AH

REFERRING VET

Dr. Wood

INVOICE

35121

DATE

1/27/22



PATIENT *Gastrointestinal*

Lucia Wood A minor amount of chyme was noted in the **stomach**. No evidence of foreign matter. Transit of chyme into the small intestine appeared to be normal.

SPECIES *Pancreas*

Canine 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

Golden Retriever *Free Abdomen*

SEX Trace amounts of free fluid noted, physiologic in this age patient.

Intact Female

ULTRASONOGRAPHIC FINDINGS

AGE

- Minor retention of ingesta in the stomach

9 Weeks

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

No evidence of foreign body obstruction. Transit of chyme was normal. Supportive care should prove effective. If foreign body is presented, it would likely be in the colon. The upper gastrointestinal tract reveals only ingesta. IV fluid support, 12 hour NPO recommended and reassessment of the clinical signs. If clinical signs persist, recheck sonogram warranted. However, no obstructive pattern noted at this point.

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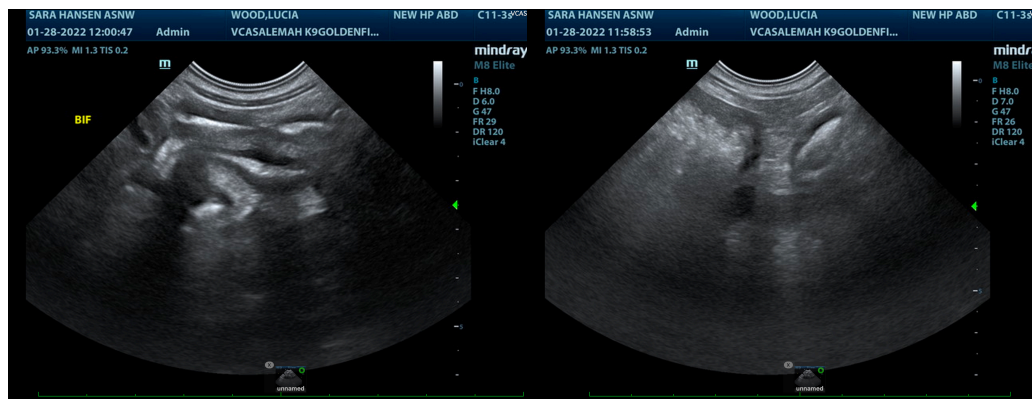
Dr. Wood

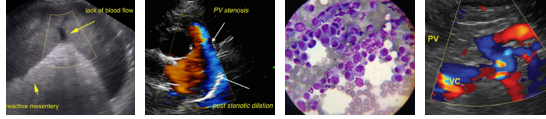
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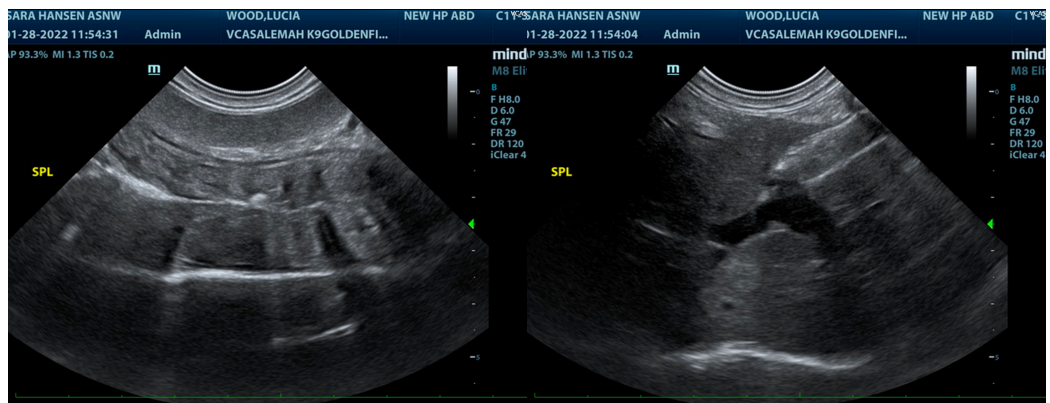
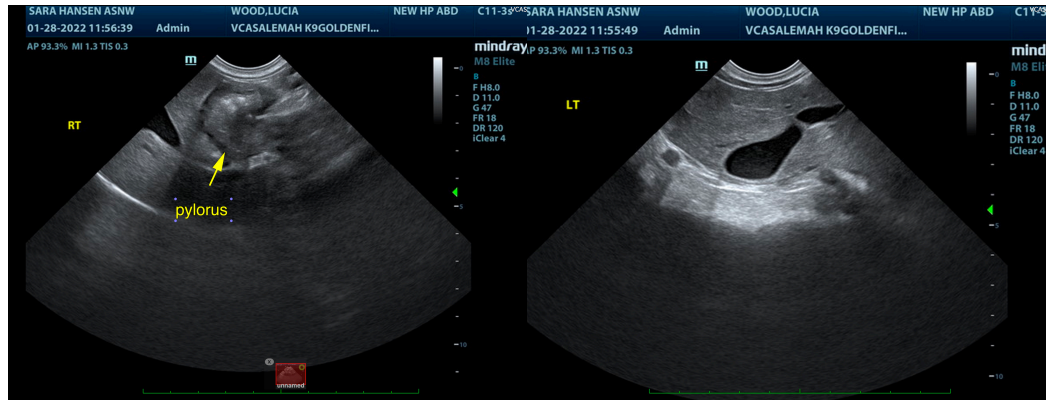
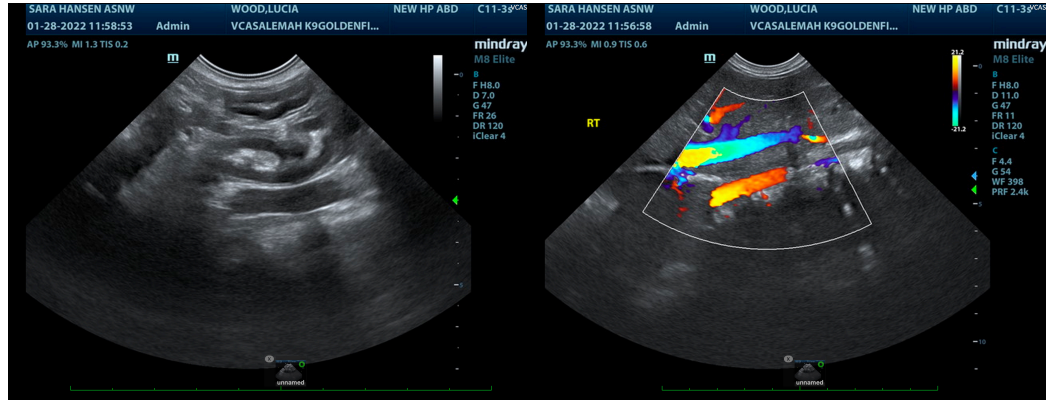
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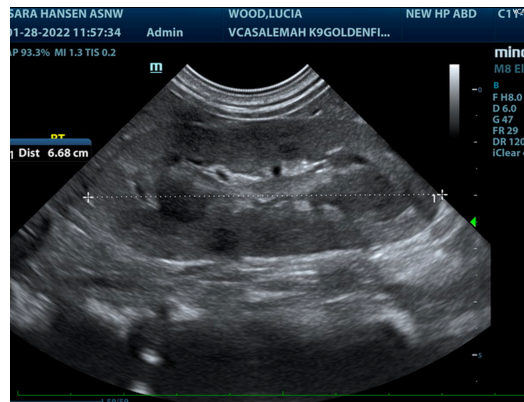
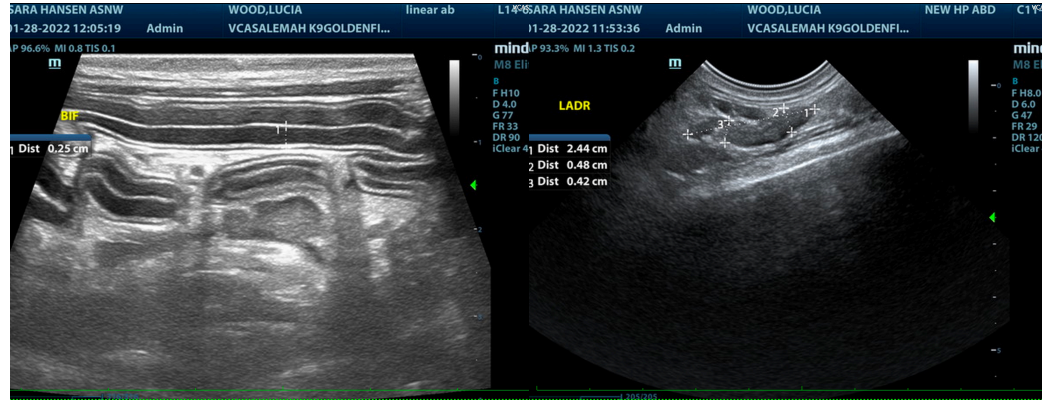
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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