



**PATIENT**

Skittles Donovan

**SPECIES**

Canine

**BREED**

Jack Russel Terrier

**SEX**

Spayed female

**AGE**

12 years

**WEIGHT**

10.6 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Waffle

**HOSPITAL NAME**

Torch Lake VC

**REFERRING VET**

Dr. Waffle

**INVOICE**

42449

**DATE**

1/3/23

**PRESENTING CLINICAL SIGNS**

History: P is no longer eating or drinking. RDVM suspected possible FB.  
Abnormal PE/Chem/CBC/UA Results: BCS 2/9, Pale Mucous membrane

**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 was noted. Ureteral papillae were normal.

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 right kidney measured 3.84 cm. The left kidney measured 3.51 cm.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**Spleen**

The **spleen** was not visualized and is likely displaced dorsally owing to the ascites.

**Liver**

The **liver** was coarse in architecture with slightly increased portal markings. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

**Gastrointestinal**

The **stomach** was filled with ingesta and/or hair accumulation. The small intestine revealed mucosal fogging with surrounding ascites. The colon appeared unremarkable.

**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.



**PATIENT**

**Free Abdomen**

Skittles Donovan

A moderate amount of ascites was present. A minimal amount of flat was present in this patient.

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Canine

**ULTRASONOGRAPHIC FINDINGS**

Full stomach of hair or other types of material and intestinal mucosal fogging.

**BREED**

Ascites.

Jack Russel Terrier

Hepatic remodeling.

**SEX**

Spayed female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I am concerned about occult neoplasia such as round cell neoplasia in this patient. Abdominocentesis and cytospin of the free fluid is recommended. Malassimilation is possible. If the albumin level is less than 1.5 then protein losing enteropathy and secondary albumin loss may be the cause of ascites. The stomach was full of ingesta or possible hair or grass type density. Abdominocentesis and cytospin of the free fluid will define the next step for this patient. The prognosis is guarded. The liver does not appear to have severe enough changes to warranted portal hypertension causing the ascites.

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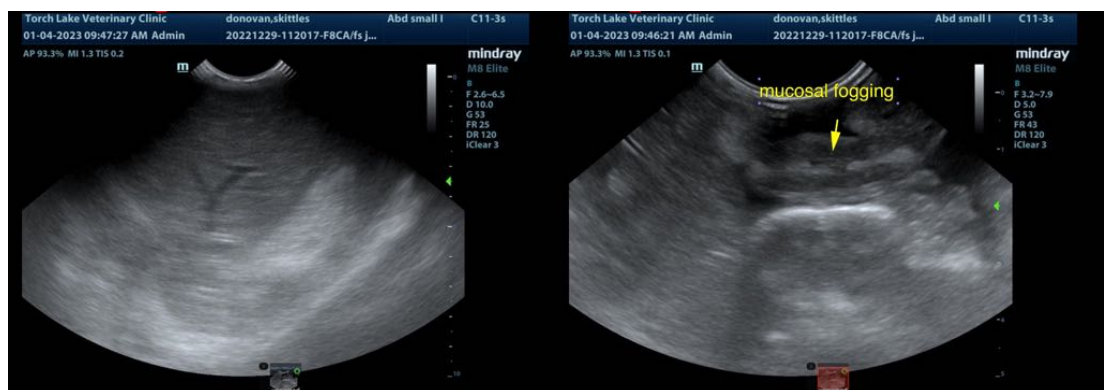
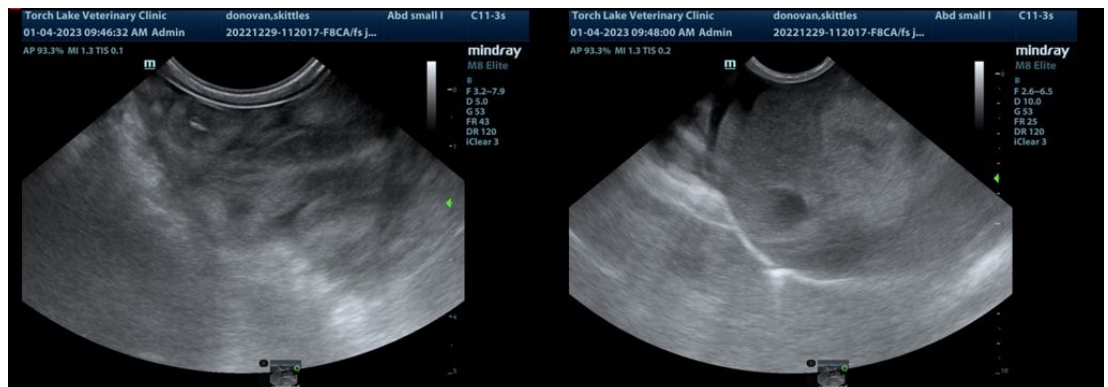
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
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