



PATIENT

Riggs Gibbs

SPECIES

Canine

BREED

Pitbull

SEX

Neutered male

AGE

4 years

WEIGHT

61 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Ebersole

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Barengo

INVOICE

40169

DATE

10/19/22

PRESENTING CLINICAL SIGNS

History: Gradual weight loss and picky appetite for several months. Recently wouldn't eat at all. No known toxin. Lepto Snap NEG, but treated just in case w/antibiotics.

Abnormal PE/Chem/CBC/UA Results: PE: BAR, BCS 3-4/9, good muscle mass. HCT = 59; Amylase 1590, BUN 85, Phos 11.2, Creat 5, Alb 3.6. USG 1.016, inactive sediment. Lepto snap negative. Cortisol = 3.2

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** were normal in size and contour with slight cortical striations of unknown cause. This is likely owing to parenchymal inflammatory changes. The left kidney measured 7.7 cm. The right kidney measured 7.0 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 0.6 cm at the caudal pole and 0.65 cm at the cranial pole. The right adrenal gland measured 2.04 cm at the cranial pole and 0.84 cm at the caudal pole.

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 was noted.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Slightly increased portal markings were noted. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder and common bile duct were unremarkable.



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Gastrointestinal

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The **gastrointestinal tract** was structurally unremarkable and the curvilinear patterns were maintained. Reactive mesentery was noted around the small intestine.

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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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ULTRASONOGRAPHIC FINDINGS

Mild cystitis bladder pattern.

Mild reactive mesentery associated with the intestinal tract.

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Otherwise, unremarkable abdomen.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no structural evidence of neoplasia noted in this patient. Acute renal insult is suspected. Toxin or infectious disease are potential. Due to the low normal baseline cortisol an emerging Addisonian state cannot be ruled out. Cortisol should be rechecked in the coming months.

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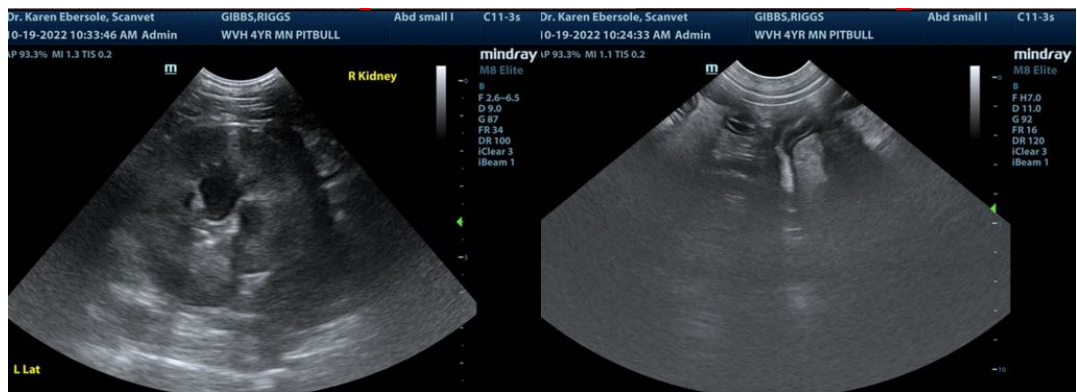
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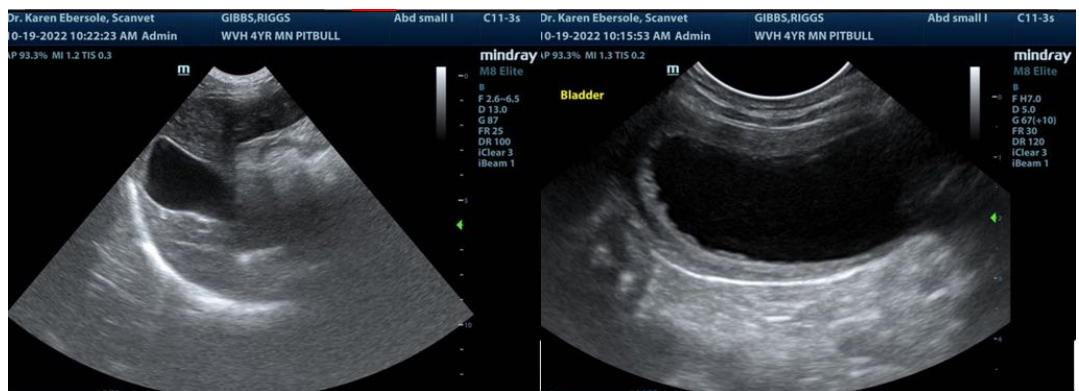
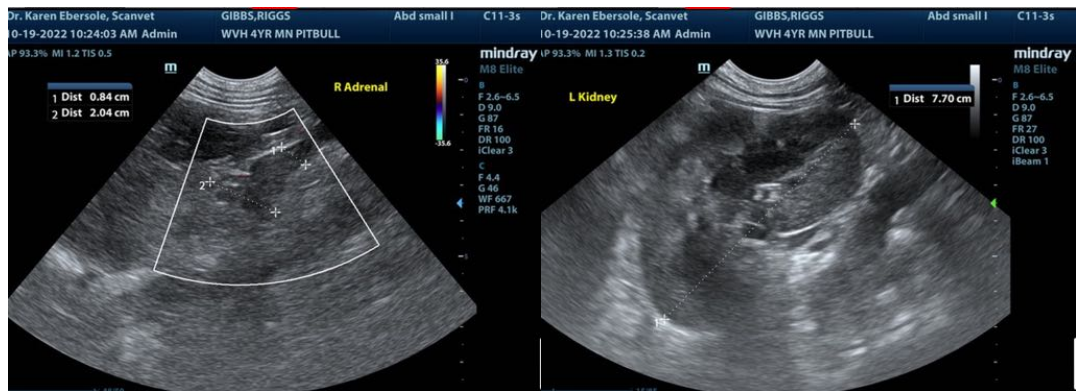
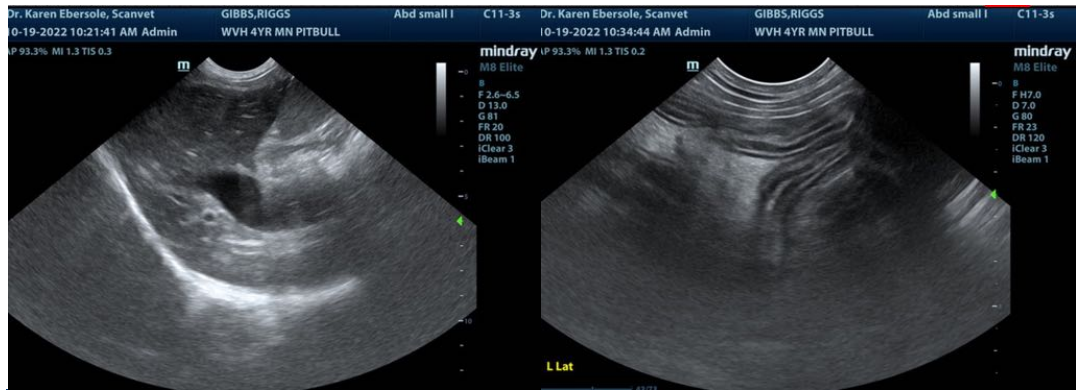
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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