

**DATE**

10/26/21

PRESENTING CLINICAL SIGNSHistory: **Presenting Complaint:** Diarrhea; Appetite Decreased.

Date: 10-25-2021 **Notes:** seen for v on 10/23, low protein, single rad, treated with Maropitant injection, Omeprazole and Gabapentin tgh. Ate once, some chicken first night, then some kibble bits tonight, but then none. Diarrhea has been persistent. **Assessment:** discussed cause of GI upset. Discussed potential causes such as ingestion, foreign body, metabolic (renal, liver, Addison's), pancreatitis, parasites discussed in his case, the low protein could indicate something more serious like IBD, lymphangectasia, less likely cancer, hepatopathy/shunt. **Plan:** IVF, deworm, fecal, start probiotics US, +/- Metronidazole.

Current Medications: Provable, Vitamin B Complex, Metronidazole, Cerenia, Sucralfate.

SPECIES

Canine

Lab Results: Attached separately.

Radiographs: Attached separately.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

BREED

Sedation: not needed

Stat Report: not requested

Yorkshire Terrier

SEX

Intact male

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. A slight amount of sand was noted in the bladder measuring 0.34 cm. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

AGE

10/20

The testicles were imaged and found to be uniform. The prostate was uniform with no evidence of pathology. The prostate measured 1.5 cm.

WEIGHT

5.5 lbs

The **kidneys** revealed normal size and structure, corticomodullary 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 3.43 cm.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**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 1.45 x 0.63 cm at the cranial pole and 0.59 cm at the caudal pole. The left adrenal gland measured 1.56 x 0.41 cm at the caudal pole and 0.43 cm at the cranial pole.

HOSPITAL NAMEAnimal Emergency
Hospital**REFERRING VET**

Dr. King

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.

INVOICE

92671

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.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. Soft stool was noted in the colon. The mesenteric lymph nodes were reactive.

Pancreas

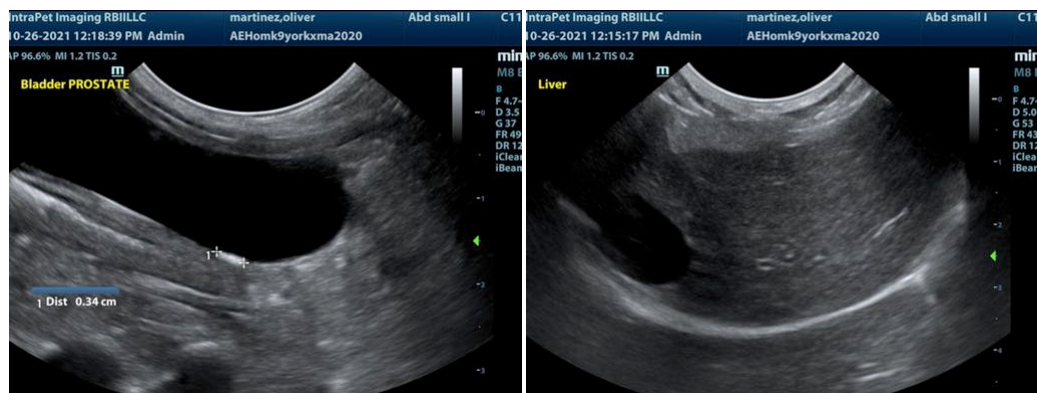
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

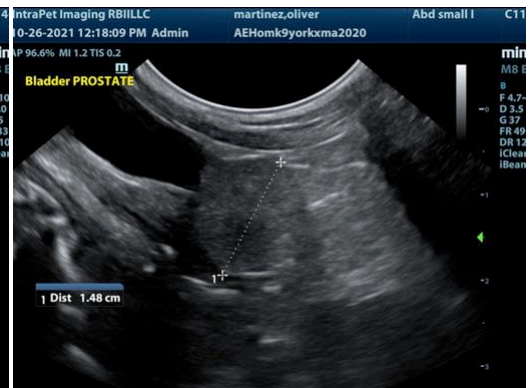
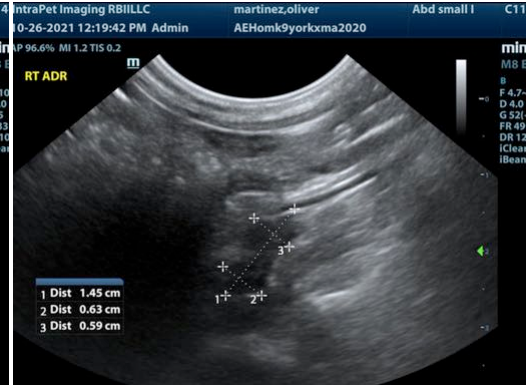
ULTRASONOGRAPHIC FINDINGS

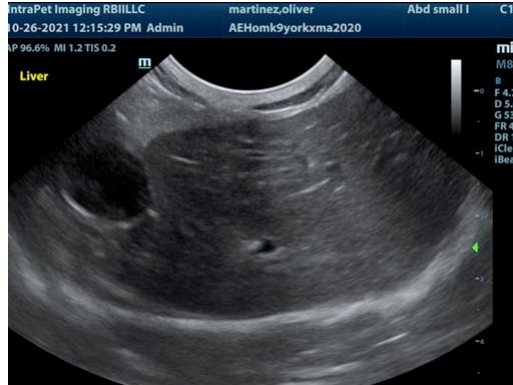
Minor bladder sand.
Otherwise, unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of significant pathology. Urinary work-up is warranted. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.







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
Eric.Lindquist@SonoPath.com