

<b>DATE</b>	<b>PRESENTING CLINICAL SIGNS</b>
10/26/21	History: <b>Presenting Complaint:</b> Not Eating; ADR. <b>Date:</b> 10-23-2021 <b>Notes:</b> Hasn't been interested in eating for a few days - last good meal was on Thursday with chicken and rice - did eat some eggs today - has appeared more lethargic/not acting like herself - today was shaking like she was cold - owner noted that she appears to be breathing quicker at rest but not panting. Will gag then hack but no productive vomiting noted, is having soft, yellow colored stool Was at the rdvm on Thursday for similar issues - did ultrasound: mild inflammation of the liver, enlarged spleen - elevated WBC on BW - started Pred (10 mg: 1 tab q24 1 week, 1 tab every other day 1 week, 1/2 tab every other day 1 week - last given 5-6p yesterday), metro (500 mg: 1 tab q24 - last give 5-6p yesterday). Will shred toys and cloth material - has not seen eating but can't rule out.
<b>PATIENT</b>	
Princess Goslin	Owner gave ice cream few days ago. Known rat issue under the porch - patient will occasionally go under there - hasn't caught any of the rats, vaxxed against leptospirosis - no rat poison.
<b>SPECIES</b>	<b>Assessment:</b> Not eating, Hacking cough. <b>Plan:</b> Reviewed history and physical exam. Discussed ddx: gastroenteritis vs pancreatitis vs obstruction vs kidney disease vs liver disease - discussed leptospirosis with the owner especially due to presence of rats on property - discussed concerns for aspiration especially since not having productive gagging
Canine	Recommended hospitalization, full BW, +/- fecal, thoracic rads, +/- abdominal rad, fluids, supportive care as needed - noted to owner we will call rdvm for records - owner agreed to plan.
<b>BREED</b>	Current Medications: Unasyn, Ondansetron, Cerenia, Enrofloxacin, Entyce, Furosemide, Metronidazole, Denamarin, Pantoprazole.
Pitbull	Lab Results: Attached separately.
<b>SEX</b>	Radiographs: Thorax 2 view- Patchy alveolar changes. Area of round increased opacity above the heart base. Attached separately.
Spayed Female	Date of Previous IntraPet Ultrasound: No previous IntraPet scans.
<b>AGE</b>	Sedation: not needed
10/23/14	Stat Report: not requested
<b>WEIGHT</b>	
58.8 lbs	
<b>INTERPRETED BY</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	<b>Urinary System</b> The <b>urinary bladder</b> , 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.
<b>HOSPITAL NAME</b>	The <b>kidneys</b> 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 6.33 cm. The right kidney measured 5.95 cm.
Animal Emergency Hospital	
<b>REFERRING VET</b>	<b>Adrenal Glands</b>
Dr. Nacke-Horney	Both <b>adrenal glands</b> 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 2.33 x 0.76 cm at the caudal pole and 0.72 cm at the cranial pole. The right adrenal gland measured 2.5 x 0.62 cm at the caudal pole and 0.84 cm at the cranial pole.
<b>INVOICE</b>	
92672	<b>Spleen</b> The <b>spleen</b> was enlarged with scalloping contour.

### Liver

The **liver** revealed slight coarse architecture with minor swelling against the diaphragm. Scalloping contour was noted throughout the liver. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.

### 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. The mesenteric lymph nodes were also enlarged.

### 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.

### Free Abdomen

Multi-focal lymphadenopathy noted in the liver and mid cranial abdomen. Grouping of which measured 4.9 x 2.34 cm.

### Thorax

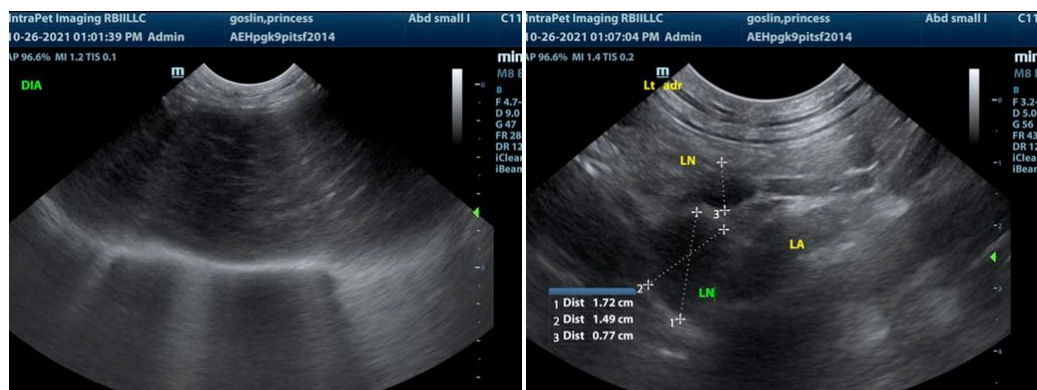
Abnormal air pattern was noted in the chest; however, there was no evidence of a thoracic mass.

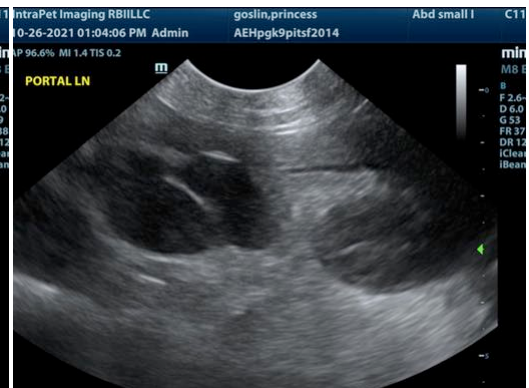
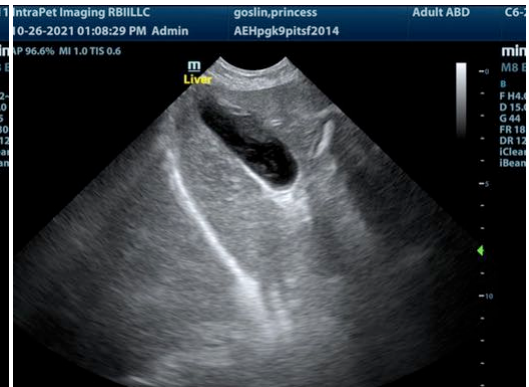
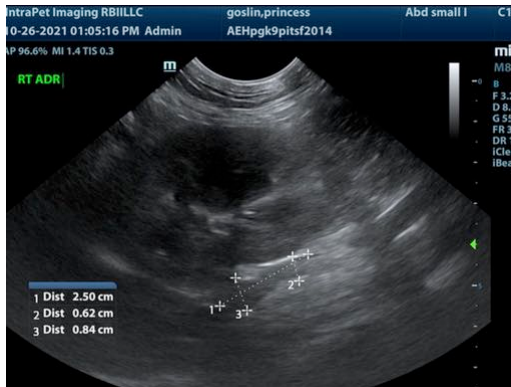
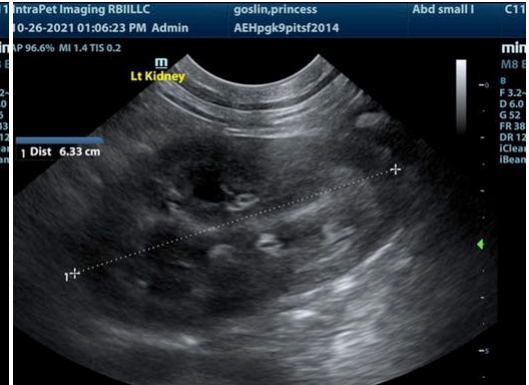
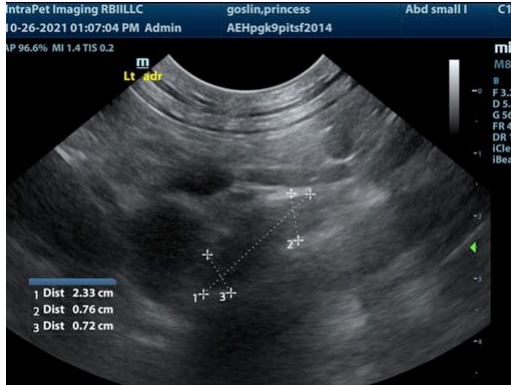
## ULTRASONOGRAPHIC FINDINGS

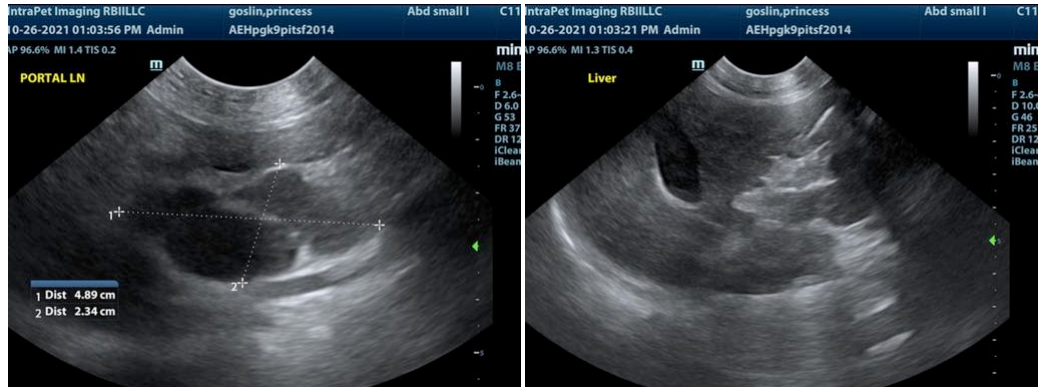
Infiltrative pattern in the cranial abdomen involving multiple lymph nodes and liver.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a strong concern for round cell neoplasia involving spleen, lymph nodes, liver and likely spread to the chest given the lung pattern. FNA of the spleen, liver and lymph nodes is recommended for further definition and immediate chemotherapeutic intervention.







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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