**DATE PRESENTING CLINICAL SIGNS**

10/8/21

History: Painful for several weeks. Treated previously for urinary retention, back pain, and changed behavior. Has become increasingly agitated and painful. Unwilling to eat and only defecating every 3-4 days.

PATIENT

Chopper Bellamy

SPECIES

Canine

BREED

Labrador Mix

SEX

Neutered Male

AGE

2017

WEIGHT

66 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**

Homeward Bound

REFERRING VET

Dr. Sorum

INVOICE

13639

Current Medications: Methocarbamol 500mg BID for 7 days, omeprazole 40mg SID for 3 days, gabapentin 300mg BID for 14 days. Previously on 50mg carprofen BID for 7 days. No improvement noted with any medications.

Lab Results: Full bloodwork panel WNLs, total bilirubin increased at 1.5.

Radiographs: Radiograph report via radiologist WNLs. Possible narrowed IV disk spaces.

Date of Previous IntraPet Ultrasound: No previous

Sedation: not needed

Stat Report: not requested

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 **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 6.85 cm. The right kidney measured 6.92 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 2.59 cm x 0.69 cm at the caudal pole and 0.59 cm at the cranial pole. The right adrenal gland measured 3.63 cm x 0.68 cm at the caudal pole and 0.64 cm at the cranial 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 were noted.

Liver

The **liver** was slightly subnormal in size with minor coarse architecture. The gallbladder, common bile duct and intrahepatic vasculature appeared normal in volume and structure.

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. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

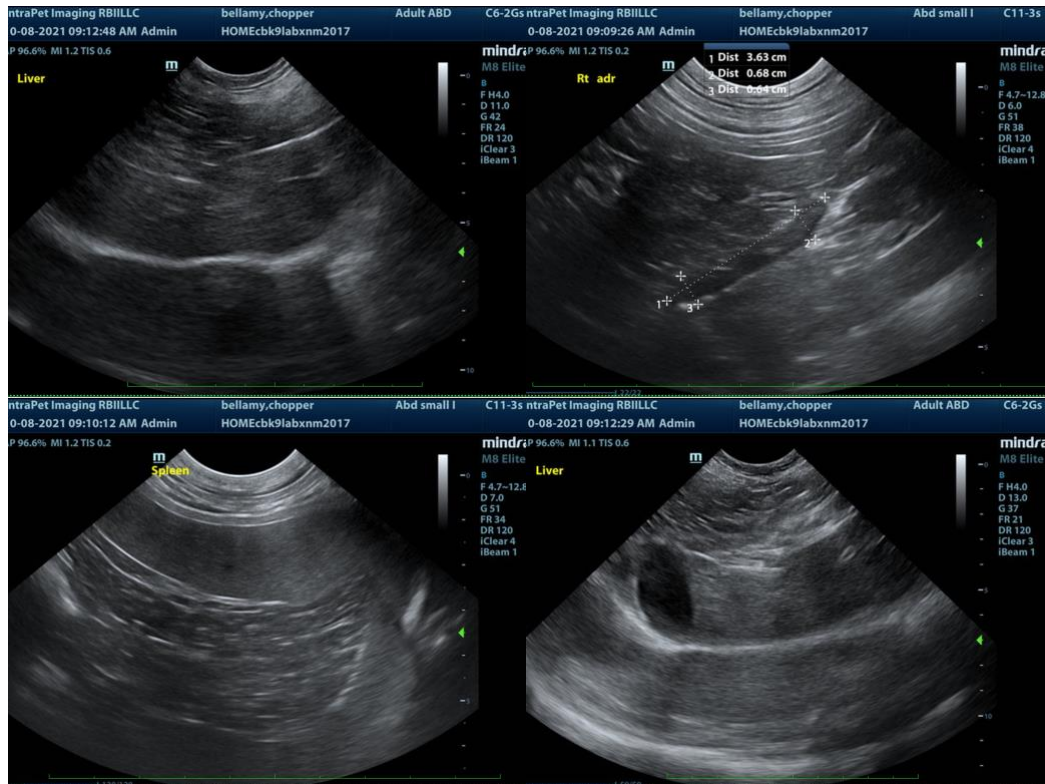
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

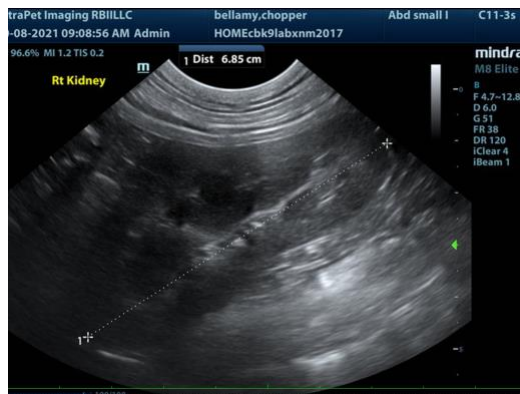
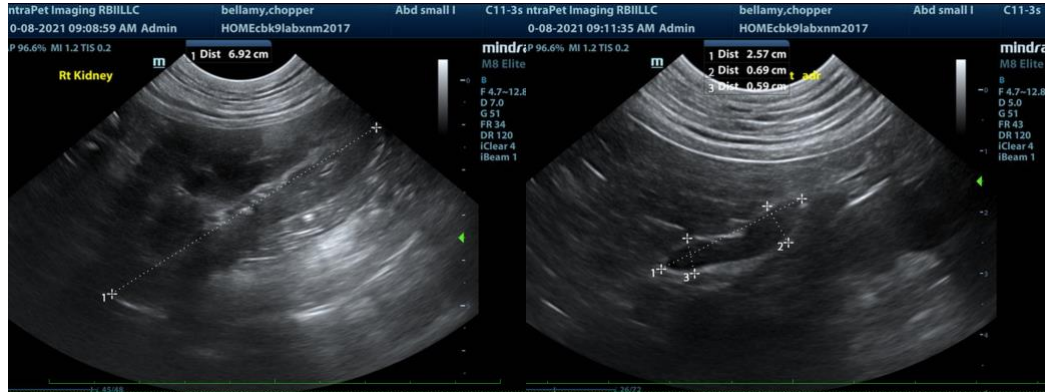
ULTRASONOGRAPHIC FINDINGS

- Minor Microhepatica
- Unremarkable abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt link of abdominal pathology to the clinical signs. Bile acid profile could be considered yet no evidence of intrahepatic or extrahepatic shunting.





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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