



PATIENT

Casey Franks

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed female

AGE

5 years

WEIGHT

20.3 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Green

HOSPITAL NAME

Stanglein VC

REFERRING VET

Dr. Hoffman

INVOICE

42263

DATE

11/1/22

PRESENTING CLINICAL SIGNS

History: Several week history of recurrent diarrhea with mucus and possibly small amounts of blood, patient improves somewhat on metronidazole, but the issues return as soon as meds stopped (patient was just started on another course of metronidazole on Friday, has not had a bowel movement over the weekend.) Owner reports nausea at home (frequent lip-smacking, gurgling noises from the gut etc) but has not observed any significant vomiting and patient's appetite seems relatively normal, eating a bland diet of boiled chicken and rice.... currently on Metro, fortiflora, cerenia injection given
Abnormal PE/Chem/CBC/UA Results: In house CBC/chem on 10/3/22 CBC relatively unremarkable (although band neutrophils are suspected), Chem was WNL.... Rads: 10/31/22 relatively unremarkable no obvious foreign bodies or obstructive patterns, no obvious masses or organomegaly

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 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 right kidney measures 5.5 cm.

Adrenal Glands

The left adrenal gland was subnormal in size and measures 1.19 x 0.39 cm. The right adrenal gland was in the lower limits of normal and measures 1.4 x 0.38 cm at the caudal pole and 0.5 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 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. 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



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lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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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.

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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

Structurally unremarkable abdomen with subjectively subnormal adrenal size.

WEIGHT

20.3 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Screening for Addison's is warranted with ACTH stimulation or baseline cortisol if not already performed. Fecal test, diet change to hydrolyzed diet, probiotics, +/- Metronidazole trial are all indicated.

IMAGING PERFORMED BY

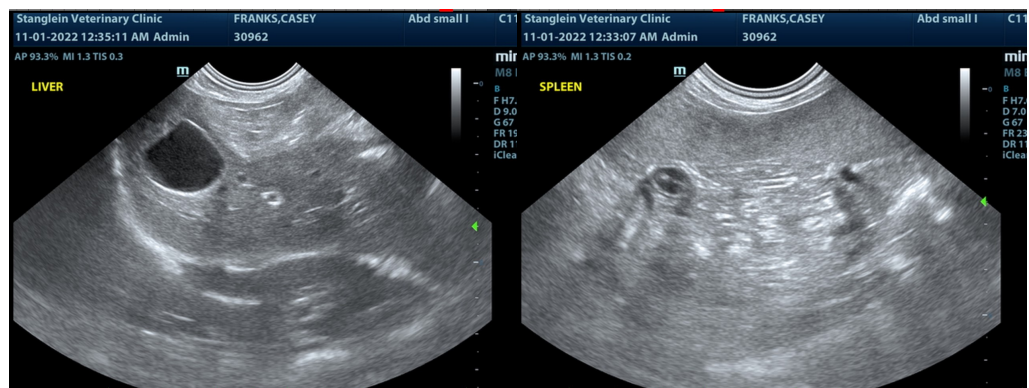
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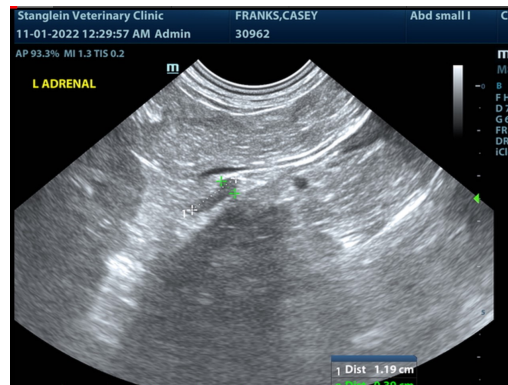
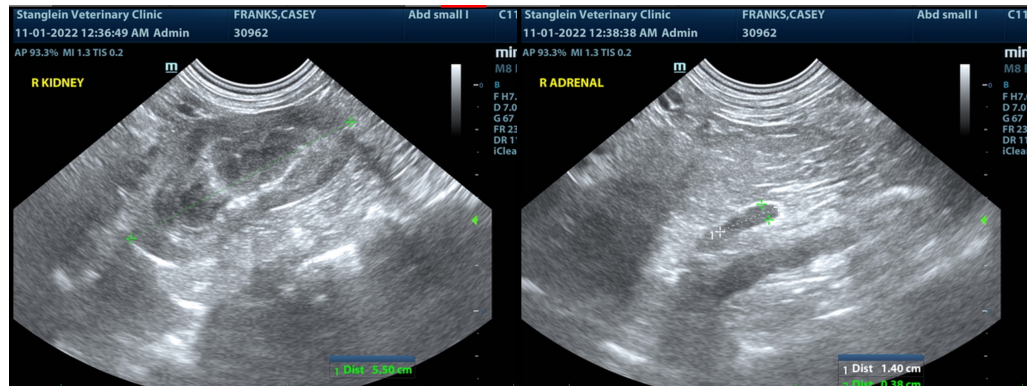
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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