

**DATE PRESENTING CLINICAL SIGNS**

11/12/21

History: Vomiting, Lethargic, & Not Eating.

PATIENT

Date: 11-11-2021 Notes: Olive- referral from rDVM for vomiting, lethargy, not eating. History of dietary indiscretion Saturday, vomited

Olive Bromley

Monday. on bland diet, vomiting, lethargy gave simparica trio rDVM records: pet poison for plant- According to owner - heart change risk, if acute ingestion would have cleared CBC/CHEM/Lytes: lymphopenia, no increase in WBC, glucose 60, Crea 6.0; BUN 72; Phos 9.9, Na 136;

SPECIES

Potassium 8.4; Na/K ratio 16; Chloride 105, ALKP 19, chol low, amylase high radiographs- nsf UA- 1028, pH 6 nsf Resting cortisol- 1.99 4dx- 9/3/21- Negative - on simparica trio Fecal- negative on 9/3 HAS been leptovaccinated in the past Plant: African False Hosta - Drimiopsis Maculata ATO- vomited Sunday Plant ingested-

Canine

leaves bitter- kept eye on it Ate less but ate rice scrambled eggs improved Tuesday this am vomited again bright yellow. Now not eating, drank water, lethargic, went to rDVM today rDVM called pet poison.

BREEDNova Scotia Duck
Trolling Retriever

Current Medications: Amp/Sulb (Unasyn) 1.5gm Injection (Per mL), Buprenorphine 0.6mg/mL, Dexamethasone SP 4mg/mL Injection (Per mL), Maropitant Citrate (Cerenia) 10mg/mL Solution Injection (Per mL), Pantoprazole (Protonix) 40mg/vial Injection (Per mL)

SEX

Lab Results: Attached.

Spayed Female

PCV 55 % (37 - 55)

AGE

TS 6.2 g/dL (5.0 - 8.0)

5/11/2020

Glucose 82 mg/dL (80 - 120)

Na 140 mmol/L (144 - 160)

K 7.4 mmol/L (3.5 - 5.8)

WEIGHT

Na/K = 19

43.8 lbs

Cl 105 mmol/L (109 - 122)

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required for scan.

Stat Report: Not requested.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUS**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.**IMAGING PERFORMED BY**

Rachel Brillhart RDMS

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 5.28 cm. The right kidney measured 5.28 cm.**HOSPITAL NAME**

Animal Emergency H

Adrenal GlandsBoth **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 2.2 cm x 0.74 cm at the caudal pole and 0.84 cm at the cranial pole. The left adrenal gland measured 2.21 cm x 0.45 cm at the caudal pole and 0.51 cm at the cranial pole.**REFERRING VET**

Dr. Kalwa

Spleen**INVOICE**

12503

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** revealed mild increased portal marking and uniform parenchyma. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

The **stomach** was empty. Minor soft stool was noted in the colon.

Pancreas

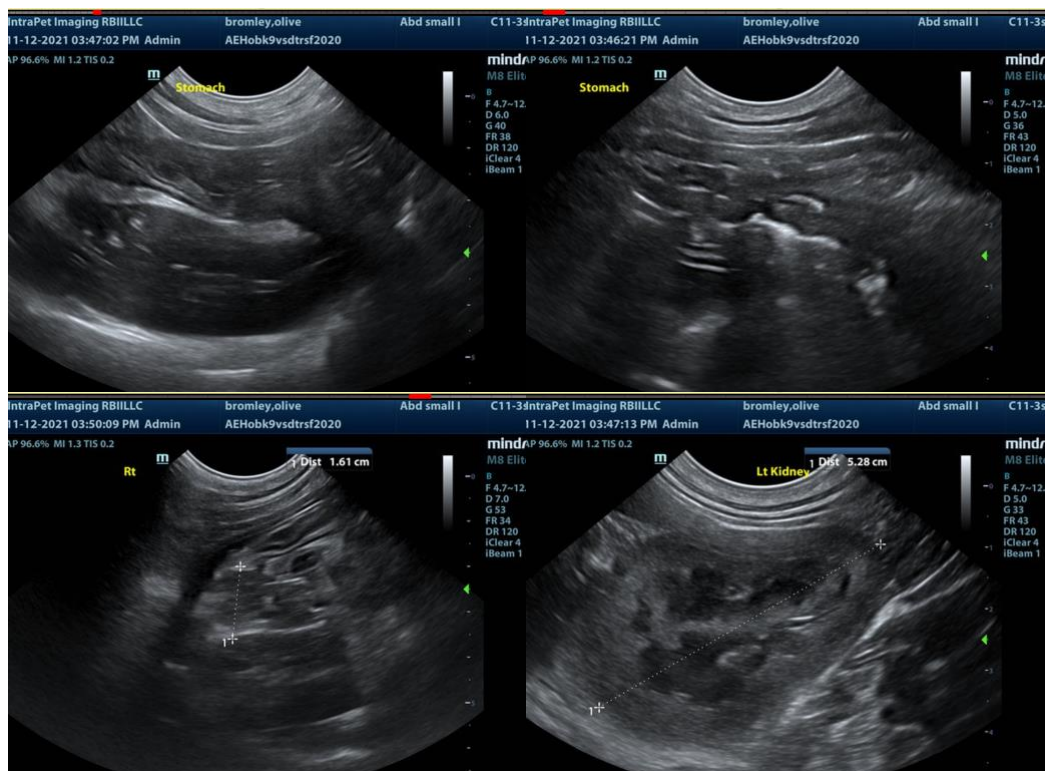
The **pancreas** revealed minor heterogeneous parenchymal changes.

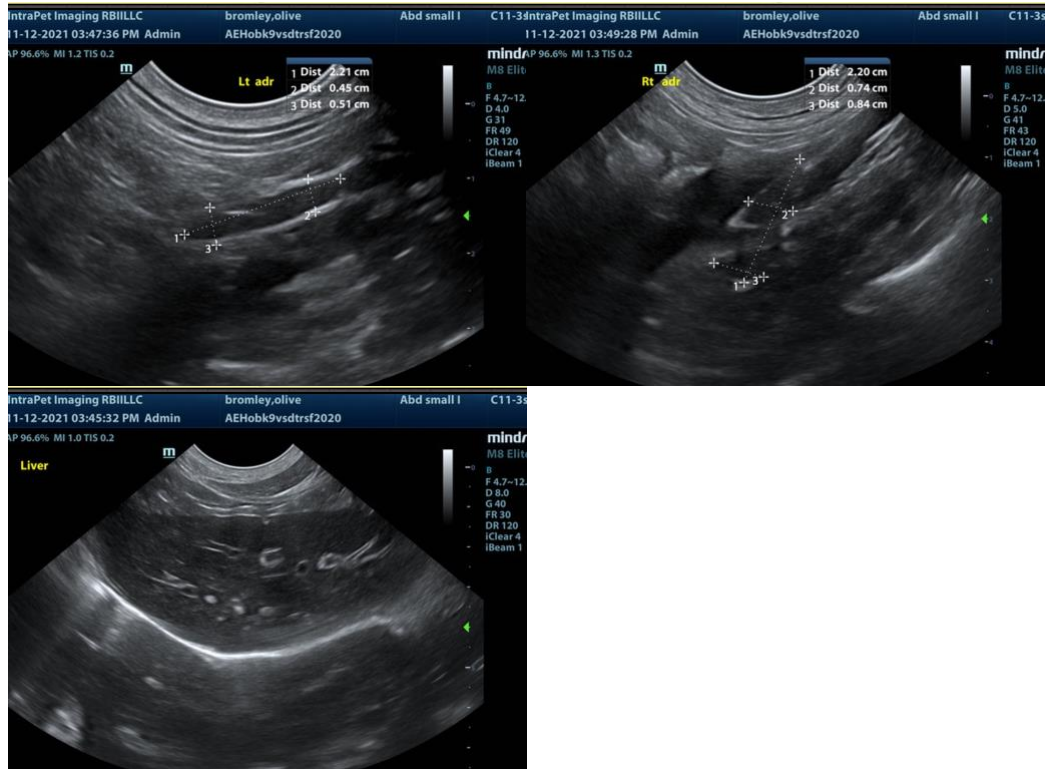
ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis
- Minor pancreatitis
- Liver, increased portal markings

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

History of cholangitis likely. No evidence of significant disease.





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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