



PATIENT

PRESENTING CLINICAL SIGNS

Daisy Ostlund

History: Inappetence, water diarrhea, excessive drinking. On Drummond Island just before clinical signs started. Rabbit hunting dog.

SPECIES

Abnormal PE/Chem/CBC/UA Results: TPR unremarkable CBC - inflammatory leukogram Giardia NEG Gram/Diff - unremarkable Whipworm positive Chem - unremarkable Mass left inguinal region Thoracic rads unremarkable

Canine

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Beagle

Urinary System

SEX

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.

Spayed Female

AGE

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 measured 5.0 cm.

10 years

WEIGHT

20.6 lbs

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 0.4 cm. The left adrenal gland measured 0.5 cm.

IMAGING PERFORMED BY

Dr. Waffle

Spleen

HOSPITAL NAME

Torch Lake VC

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.

REFERRING VET

Dr. Waffle

Liver

INVOICE

93132

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.

DATE

11/16/21



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Gastrointestinal

The **stomach** revealed progressively shadowing soft material. Transit of chyme into the small intestine was noted and appeared to be normal. A large amount of gastrointestinal artifact was present.

SPECIES

Canine

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.

BREED

Beagle

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

Gastric retention. No obvious obstruction; however, soft foreign matter is possible in the stomach.

AGE

10 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend 24 hour n.p.o. A recheck sonogram is recommended of the upper gastrointestinal tract to assess if material is persistently present. There was no other evidence of pathology. Treatment for whipworms and gastroenteritis is indicated followed by reassessment of the clinical status given the fecal results.

WEIGHT

20.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUS

IMAGING PERFORMED BY

Dr. Waffle

HOSPITAL NAME

Torch Lake VC

REFERRING VET

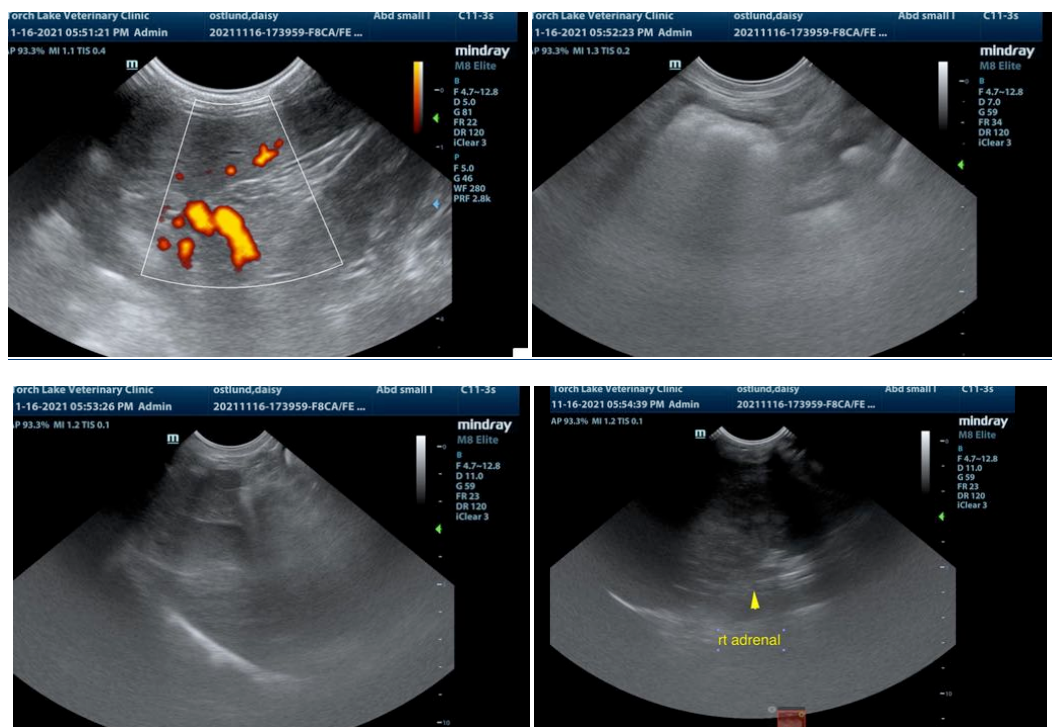
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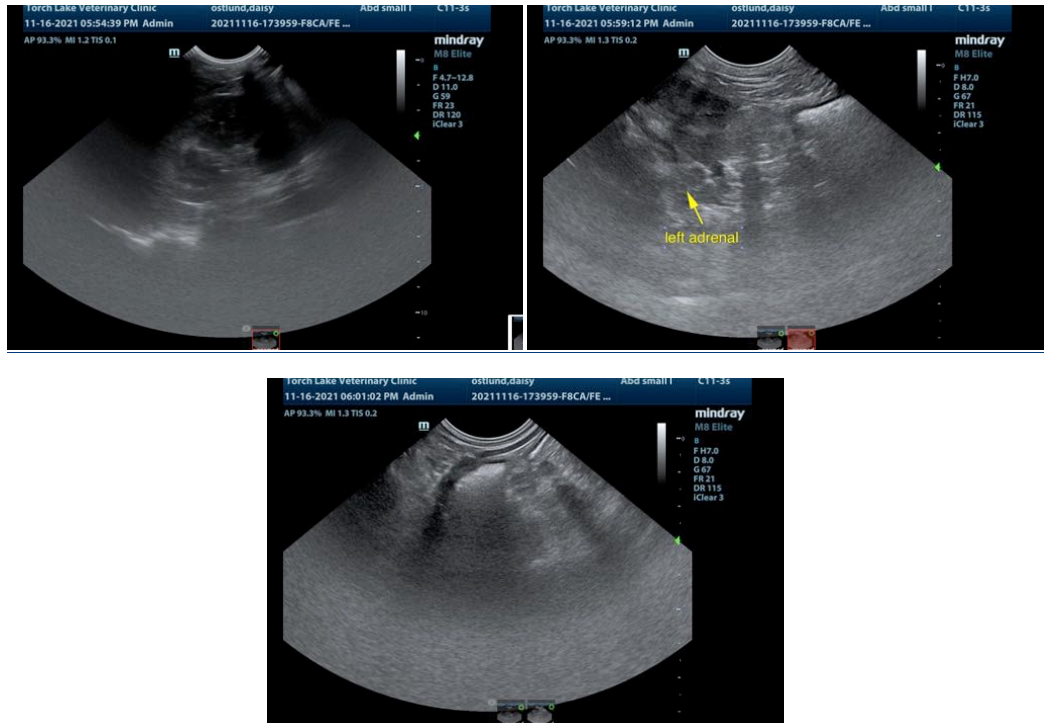
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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