



**PATIENT**

Rudy Hoza

**SPECIES**

Canine

**BREED**

West Highland Terrier

**SEX**

Neutered male

**AGE**

12 years

**WEIGHT**

20.7 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Dr. Buss

**HOSPITAL NAME**

King VH

**REFERRING VET**

Dr. Buss

**INVOICE**

42637

**DATE**

11/21/22

**PRESENTING CLINICAL SIGNS**

History: Originally presented on 7/22 for vomiting and diarrhea. Bloodwork was normal and started on HP diet and metronidazole. No improvement. Added Tylan and showed some of improvement. Represented this month with diarrhea again. Put back on Tylan, bland diet and proviable. Recheck after 2 weeks today on 11/21 and had u/s and repeated bloodwork, continued diarrhea.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** presented a minimal amount of urine present with polypoid changes in the cystourethral junction and ventral wall measuring up to 0.8 cm.

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.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**Spleen**

The **spleen** revealed micronodular changes, yet the spleen revealed uniform contour. This is likely hyperplasia.

**Liver**

The **liver** was enlarged with minor, heterogenous changes. The gallbladder was over distended with immobile bile and sand. The gallbladder was thickened. This is consistent with atypical mucocele.

**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. There were minor areas of luminal fluid noted. There was no evidence of obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable.

**Pancreas**

The **pancreas** revealed heterogenous parenchymal changes.



**PATIENT**

**Free Abdomen**

Rudy Hoza

Reactive mesentery was noted associated with the GI tract.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

Atypical gallbladder mucocoele.

**BREED**

Non-specific gastroenteritis otherwise.

West Highland Terrier

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

Neutered male

The gallbladder mucocoele is likely contributing to the clinical signs. The liver values should be monitored carefully in this patient. Treatment for gastroenteritis and gallbladder motility study is indicated. If no significant movement from the gallbladder is noted then cholecystectomy and GI biopsies should be considered. Screening for Addison's is indicated given the breed predisposition.

**AGE**

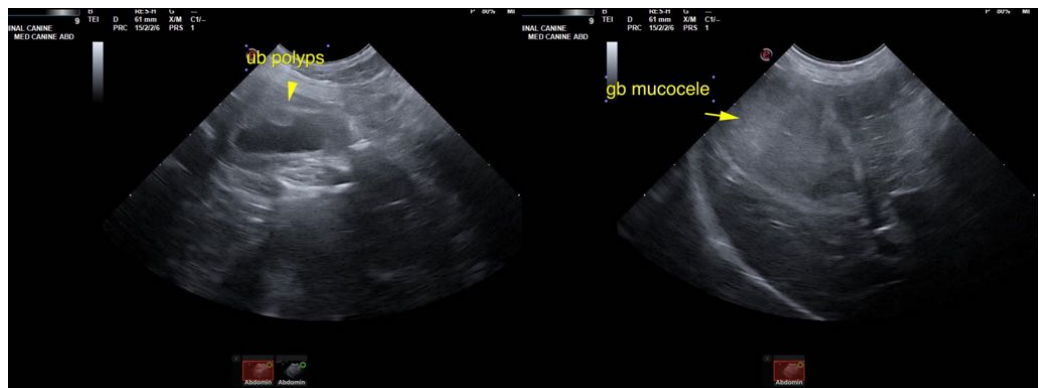
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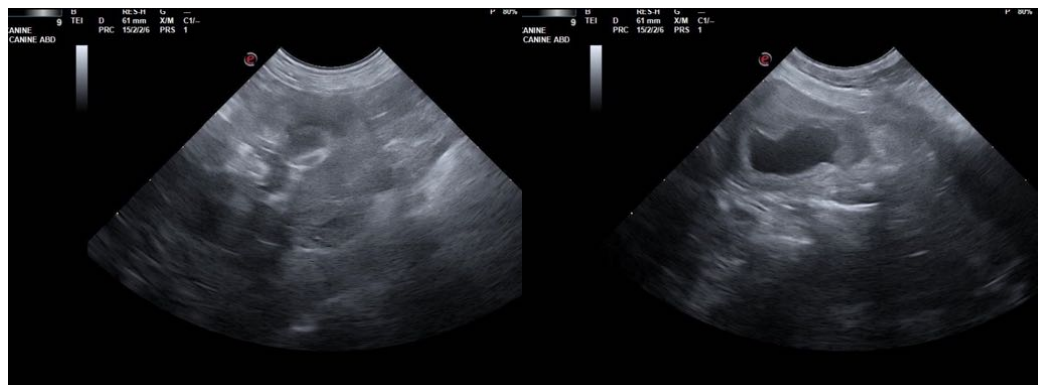
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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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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