



**PATIENT PRESENTING CLINICAL SIGNS**

Lucy Hutchens eating off and on for 3-4 weeks along with a gurgling stomach and now is straining to defecate. She seems very lethargic and hasn't eaten in 3-5 days. She is vomiting more frequent as well.  
**SPECIES** Abnormal PE/Chem/CBC/UA Results: BW - chem/cbc/t4/UA wnl ACTH stim: PRE-ACTH 1.7 ug/dL POST-ACTH 10.5 ug/dL

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED *Urinary System***

Shar Pei 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 pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

**SEX**

Spayed Female

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 6.0 cm. The right kidney measured 6.0 cm.

**AGE**

10 Years

***Adrenal Glands***

**WEIGHT**

60 Pounds

The **adrenal glands** were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.5 cm. The right adrenal gland measured 0.4 cm.

***Spleen***

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The **spleen** presented slight irregular contour at the caudal pole. Uniform parenchyma otherwise.

***Liver***

**IMAGING PERFORMED BY**

Dr. Christina Sitton

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

**HOSPITAL NAME**

Sherwood Family PC

***Gastrointestinal***

**REFERRING VET**

Dr. Christina Sitton

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***

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.

**DATE**

11/3/21

***Free Abdomen***

A large amount of abdominal fat was noted in this patient.



**PATIENT**

Lucy Hutchens

**ULTRASONOGRAPHIC FINDINGS**

- Structurally unremarkable abdomen

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of pathology related to the clinical signs. Orthopedic, CNS or thoracic pathology should be considered. Structurally the GI tract appears unremarkable. Underlying food intolerance and gastritis possible, yet without structural changes.

**BREED**

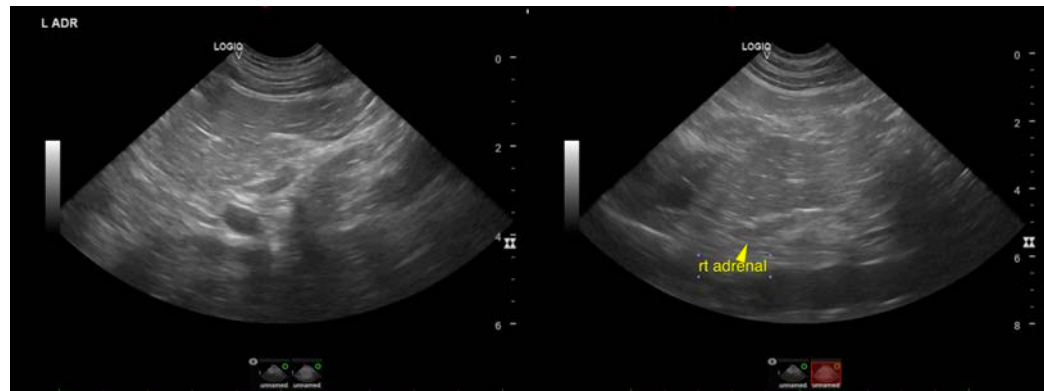
Shar Pei

**SEX**

Spayed Female

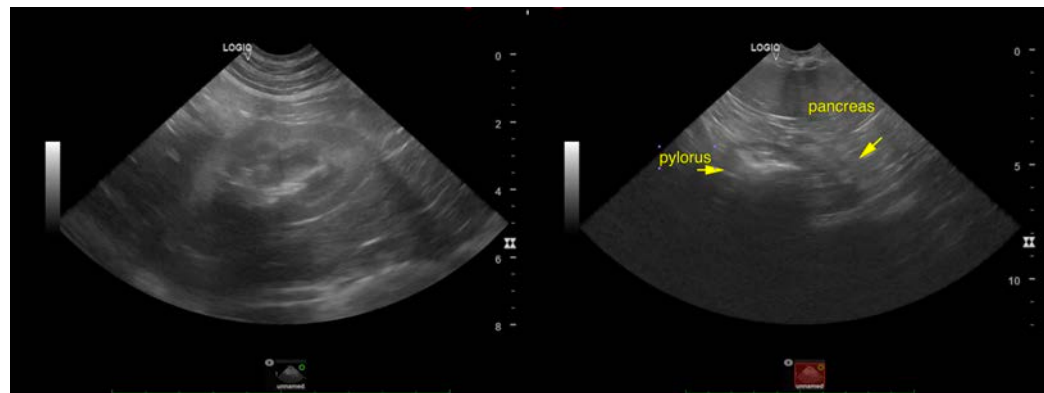
**AGE**

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**WEIGHT**

60 Pounds



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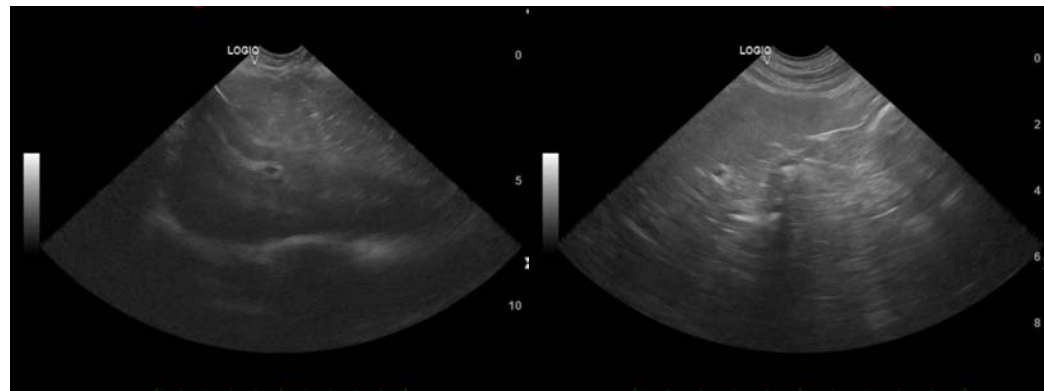
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**PATIENT**

Lucy Hutchens

**SPECIES**

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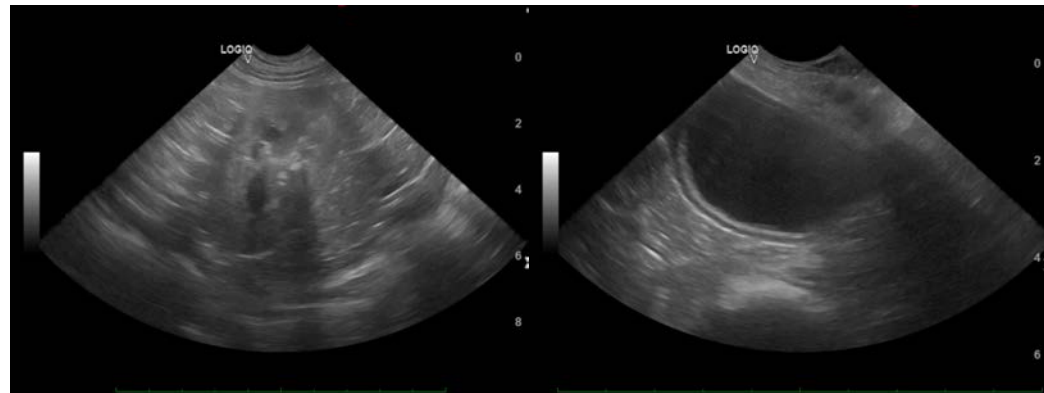
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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