

**DATE**

11/4/22

PATIENT

Whisky Slutzky

SPECIES

Canine

BREEDAustralian
Labradoodle**SEX**

Intact Male

AGE

6/13/22

WEIGHT

27.4 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Animal Emergency
Hospital**REFERRING VET**

Dr. Hicks

INVOICE

17960

PRESENTING CLINICAL SIGNS

History: Spoke to rDVM about referral - 1 hour prior to arrival at rDVM P was tremoring and urinated on himself - 2pm - diazepam 5mg/mL was given 0.8 mL (0.32 mg/kg) IV - 2:45 pm - second dose diazepam 0.5 mLs given - temp 104.7, RR 42, HR 140 -tremoring, wobbly/weak - K 5.7 (H), CI 121 (H) - Glu, CREA, BUN, PHOS, ALT, ALP, GGT, TBIL all wnl - DHPP vaccines 10/11/22, 9/13/22, 8/23/22 According to O - picked dog up from his son and he was completely normal, at breakfast, normal u/d - started to bob his head on the car ride - 2 weeks ago the same thing happened with Os son (goes to Temple University) but clinical signs resolved on their own, no treatment sought - reports a similar episode happened when P was 9 wks old and also resolved on its own - Per Mr sometimes P will get hyperexcited, run around, jump and then fall over - Bravecto was given a few days ago, was normal the day of administration

Current Medications: Lactulose, Metronidazole, Methocarbamol. Famotidine, Ondansetron.

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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. The prostate was uniform, measuring 1.0 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. The left kidney measured 6.3 cm. The right kidney measured 5.59 cm.

Adrenal Glands

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 2.71 cm x 0.51 cm at the cranial pole and 0.5 cm at the caudal pole. The left adrenal gland measured 2.28 cm x 0.44 cm at the caudal pole and 0.42 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 were 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 lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident. The portal vein measured 0.8 cm. The vena cava measured 0.8 cm. The aorta measured 0.8 cm. No evidence of portosystemic shunting.

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.

Pancreas

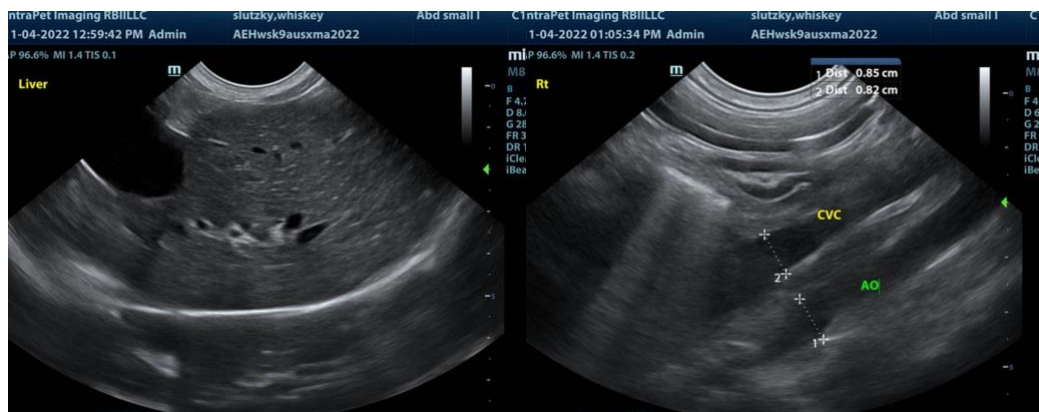
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

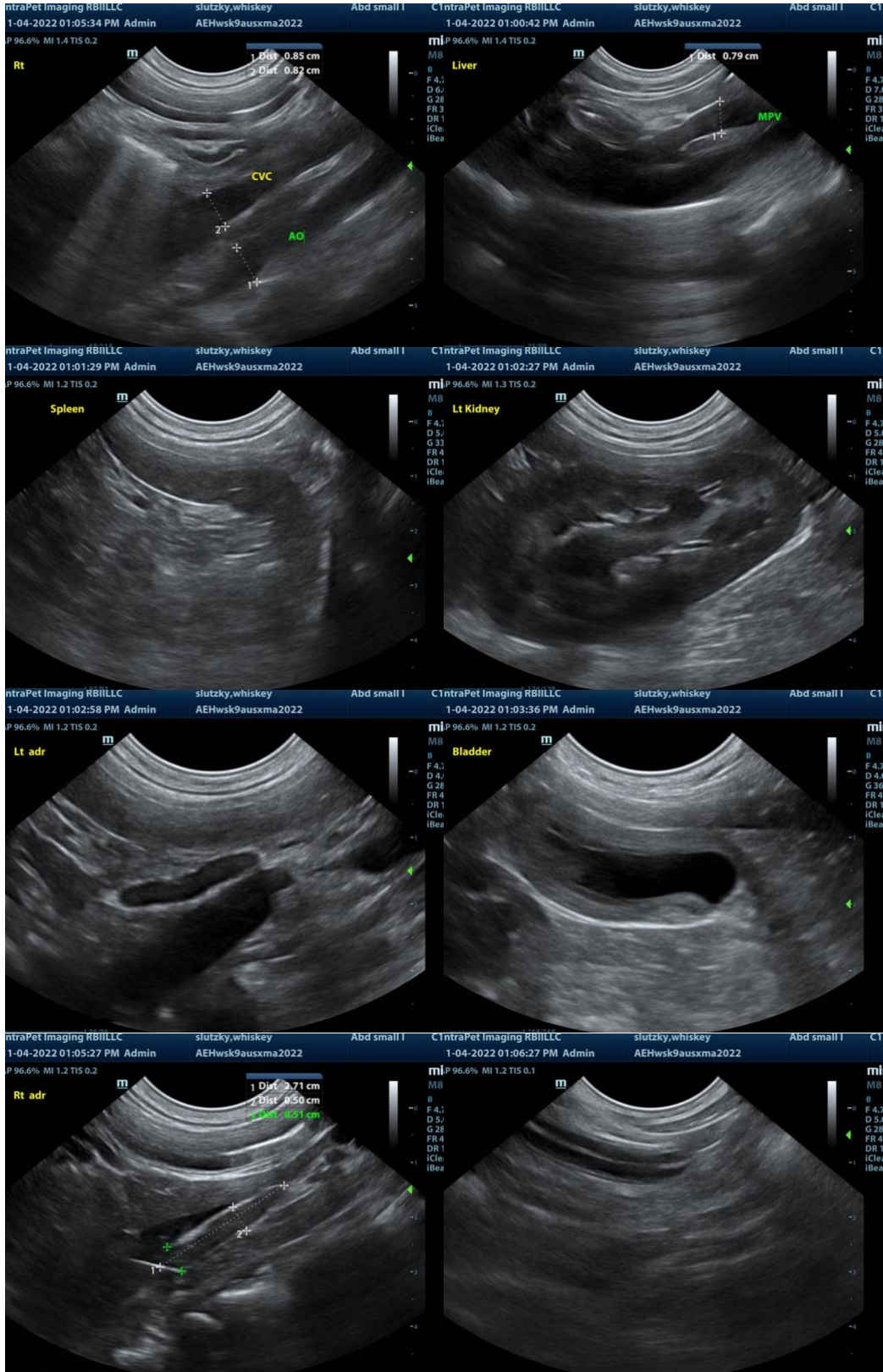
ULTRASONOGRAPHIC FINDINGS

- Structurally normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of pathology. Behavioral issues, CNS or orthopedic disease should all be considered.





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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com