

PATIENT

Blue Gonzalez

PRESENTING CLINICAL SIGNS

History: P is not eating and throwing up on and off for a couple of months. Rads and blood work unremarkable

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Pitbull

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 3.0 cm beyond the cystourethral junction.

SEX

Neutered Male

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 6.7 cm. The left kidney measured 6.57 cm.

AGE

4 Years

Adrenal Glands

WEIGHT

N/A

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 2.34 cm x 1.37 cm at the cranial pole and 0.76 cm at the caudal pole. The left adrenal gland measured 2.81 cm x 0.66 cm at the caudal pole and 0.61 cm at the cranial pole.

Spleen

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS

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.

HOSPITAL NAME

The Pet Clinic

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.

REFERRING VET

Dr. Genova

Gastrointestinal

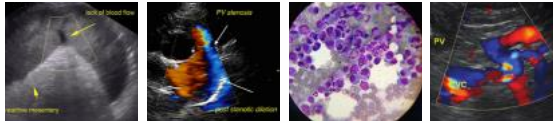
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20193

The **upper gastrointestinal tract** revealed retention of chyme in the stomach with further digested chyme in the mid upper small intestine/jejunum, followed by empty small bowel. A large amount of artifact was present, however, two separate views appeared to reveal luminal foreign matter. Variable small intestinal thickening was noted with increased submucosal layer.

DATE

12/19/22



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Blue Gonzalez **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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Pitbull

- Dilated upper gastrointestinal tract, followed by empty small intestine. Concern for an obstructive pattern, underlying foreign matter, dysfunctional bowel or intestinal rotation all possible.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Neutered Male

Given the appearance of the bowel sonographically, underlying inflammatory bowel or similar chronic inflammatory event is likely. No neoplastic criteria has met. I recommend exploratory surgery with the objective of liberating any luminal material and deobstructing the small intestine. GI biopsies are essential in this patient to assess underlying disease.

AGE

4 Years

WEIGHT

N/A

INTERPRETED BY

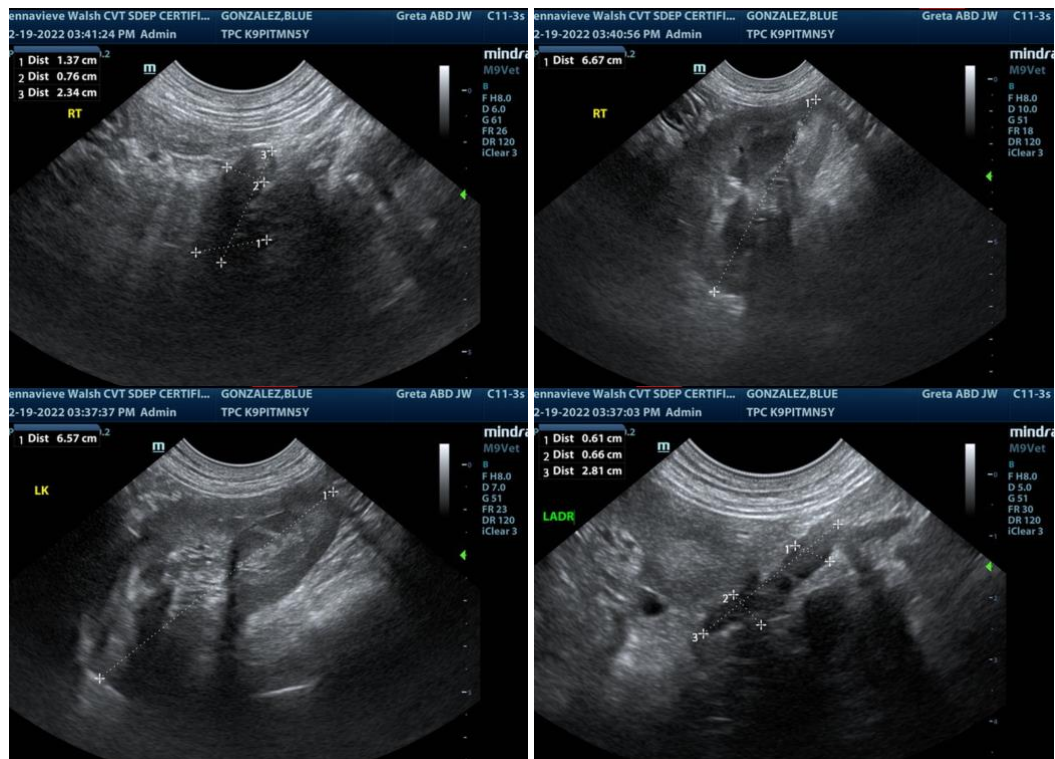
Eric Lindquist, DMV, DABVP, Cert. IVUS

HOSPITAL NAME

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REFERRING VET

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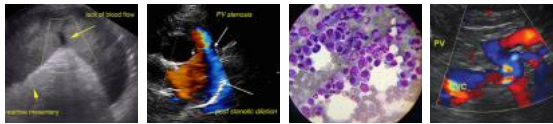


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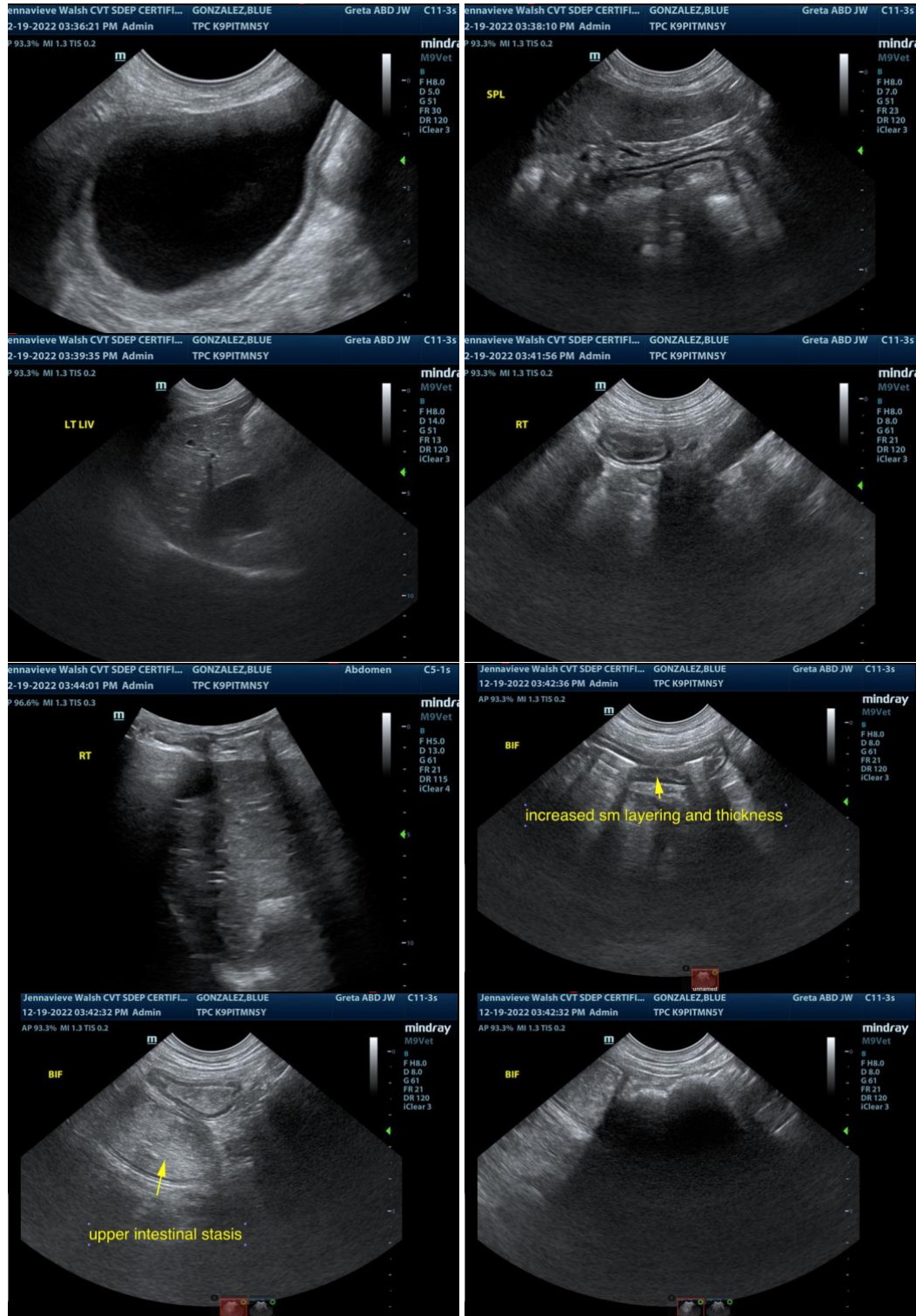
Dr. Genova

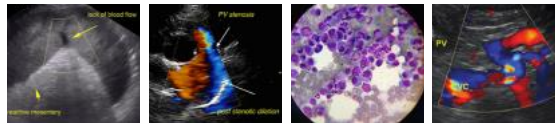
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AGE

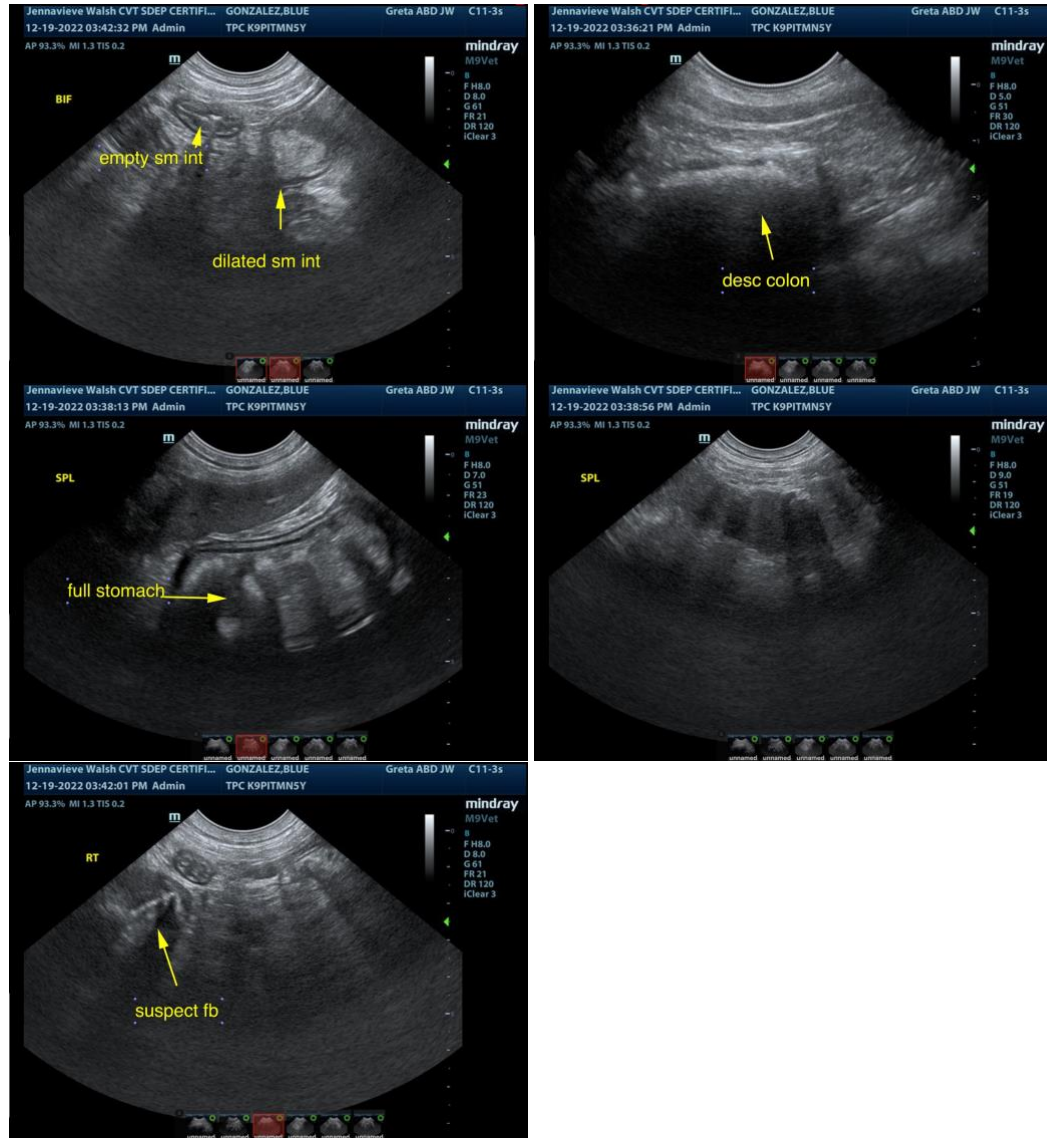
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WEIGHT

N/A

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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.

REFERRING VET

Dr. Genova

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.

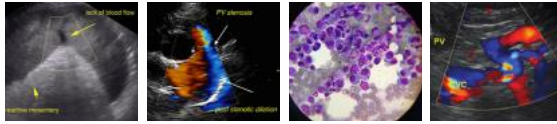
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