



**PATIENT**

Tyee Thomas

**SPECIES**

Canine

**BREED**

German Shorthaired  
Pointer

**SEX**

Neutered Male

**AGE**

5 Years

**WEIGHT**

61 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Dr. Erica Harmon

**HOSPITAL NAME**

Willamette VH

**REFERRING VET**

Newport Vet Hospital

**INVOICE**

33164

**DATE**

12/2/21

**PRESENTING CLINICAL SIGNS**

3 year history of seizures, with cluster events. Medically managed with Phenobarbitl 64.2mg- 2.5 tab po BID, Keppra 500mg-3 tabs po TID, Gabapentin 300mg - 1 po BID, over last 2 weeks increase in seizure activity, especially worse in last 7 days, 3 seizures yesterday. Presented as a referral ultrasound from rDVM for concern for possible pancreatitis, (concern that pancreatitis could be causing blood glucose fluctuations and leading to seizures) BG normal on rDVM labs, and normal on spot check inhouse associated with u/s appointment (116). Mild decrease in appetite and mild increase in water intake, no vomiting/diarrhea, no abdominal pain appreciable on exam.

Abnormal PE/Chem/CBC/UA Results: rDVM labs 12/1: BG 92 N, ALT 206 H, ALKP 935 H, Amyl 3656 H, Lipate 5658 H, indirect Bili 0.2 H, Chol 343 H, Trig 266 H, T4 0.87 L, HCT 54% N, Phenobarbital level 42.4 (15-45; >30 possible toxicity) \* cPL not performed\*, 12/2 BG 116 N

**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 **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 5.0 cm.

**Adrenal Glands**

The **adrenal glands** were not visualized.

**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** presented heterogenous parenchyma with increased portal markings and coarse architecture. Slight undulating capsular contour was noted. The gallbladder and common bile duct were unremarkable. This is consistent with chronic inflammatory hepatopathy.

**Gastrointestinal**

Some retention of ingesta was noted in the **stomach**. A large amount of enhancement artifact noted throughout the GI tract. Transit of chyme appeared to be normal.

**Pancreas**

The **pancreas** was largely unremarkable. However, low-grade inflammation cannot be completely ruled out. Minor coarse architecture noted throughout the pancreatic parenchyma, yet changes were considered minor.



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**ULTRASONOGRAPHIC FINDINGS**

- Non-specific low-grade chronic inflammatory hepatopathy
- Possible low-grade gastroenteritis/pancreatitis, yet structurally unremarkable

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of significant disease.

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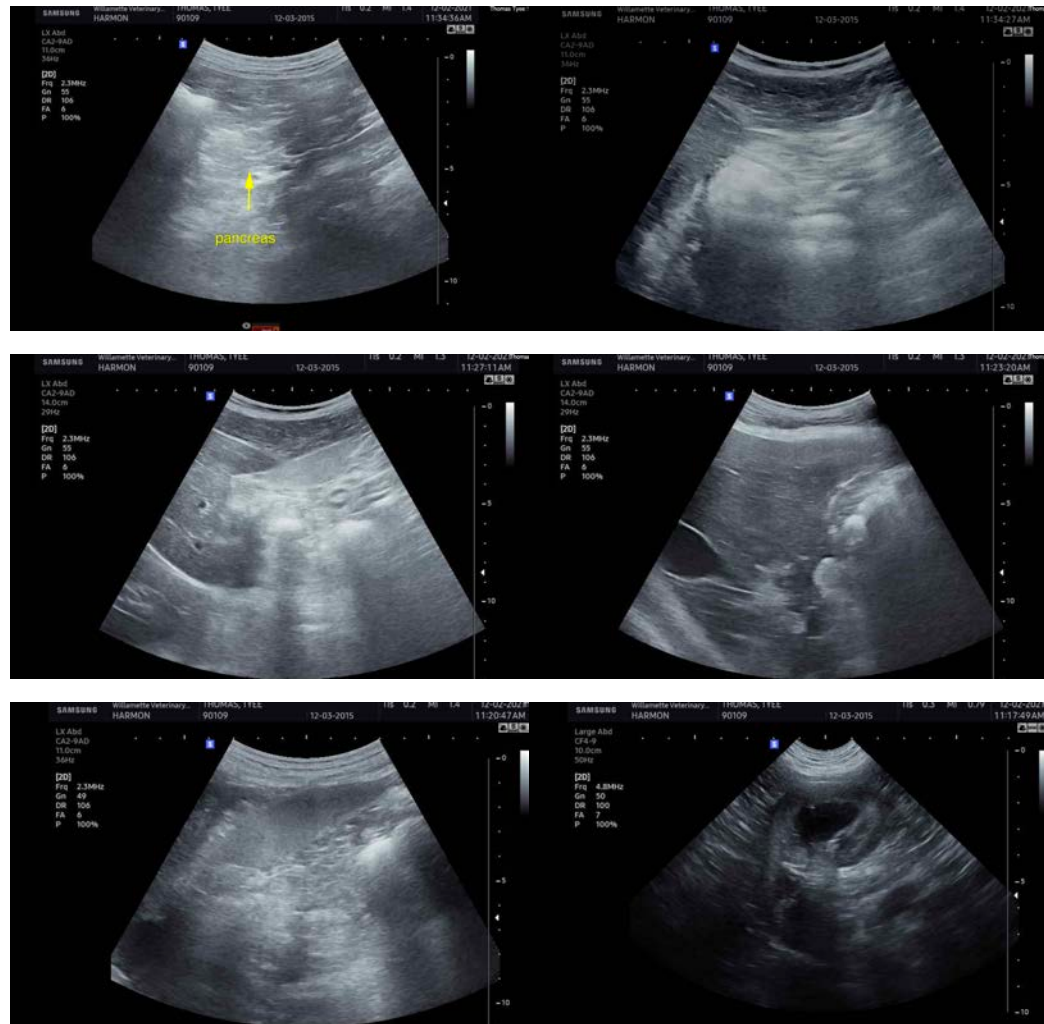
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)