

**DATE**

12/2/22

PRESENTING CLINICAL SIGNS

History: 11/15/2022- O notice blood from rectum/ some diarrhea increase BM frequency (fecal pending). Pt has history apparent pancreatitis (diet I/D since Dx via ABN snap cpl) 8/29/22 Hx of vomiting and diarrhea.

PATIENT

Mac Kinsler

Current Medications: 11/15/22 metronidazole 250mg- 1 po BID x 7d #14.

Lab Results: 8/29/22 + 11/15/22: Sl. decreased BUN, Increase ALT/ ALKP, sl. Increase CHOL, Increase N TP, ALB, GLOB, increase RBC/MGB/HCT

SPECIES

Canine

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

BREED

Scottish Terrier

Imaging Performed By: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SEX**

Neutered Male

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. Wall thickness measured 0.57 cm. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal. This is a mild change.

AGE

28.1 Pounds

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex. Slight pyelectasia was noted. Pinpoint mineralizations were noted. The left kidney measured 5.78 cm. The right kidney measured 5.52 cm.

WEIGHT**INTERPRETED BY**Eric Lindquist, DMV
DABVP, Cert. IVUSS**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 left adrenal gland measured 2.33 cm x 0.73 cm at the caudal pole and 0.61 cm at the cranial pole. The right adrenal gland measured 2.66 cm x 0.74 cm at the caudal pole and 0.62 cm at the cranial pole.

HOSPITAL NAME

Bel Air VH

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. Caudal folding of the spleen was noted.

REFERRING VET

Dr. Stevenson

INVOICE

18941

Liver

The **liver** was mildly swollen with heterogenous hypoechoic nodular changes. Increased portal markings were noted. The gallbladder and common bile duct were unremarkable.

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

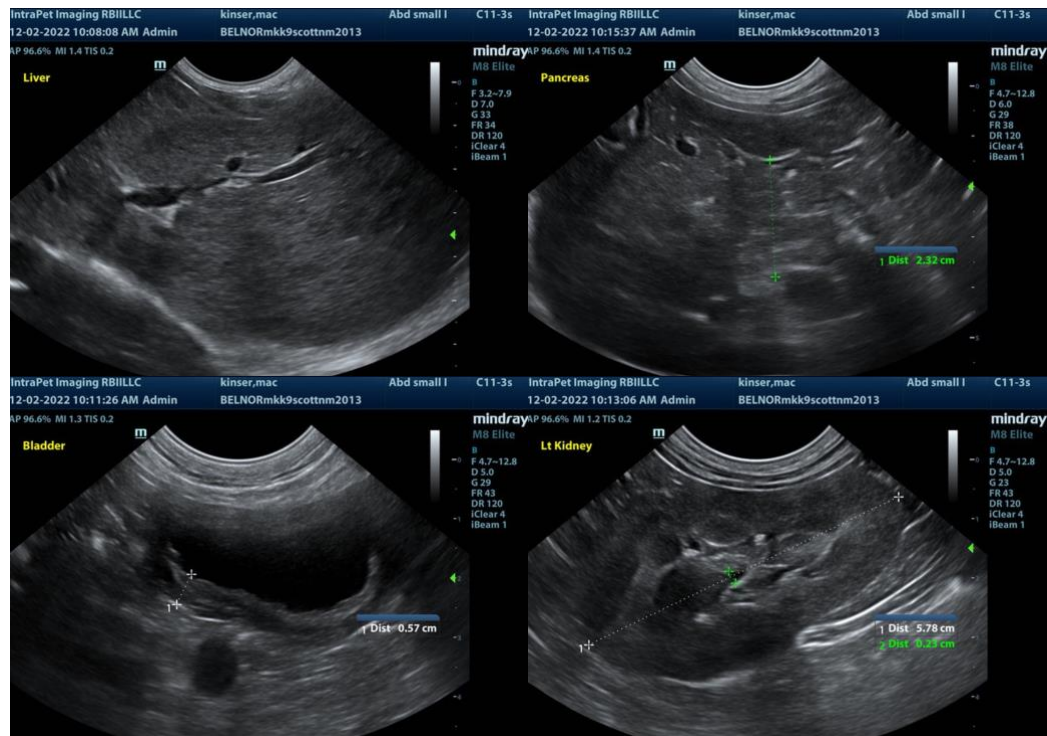
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some mild parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

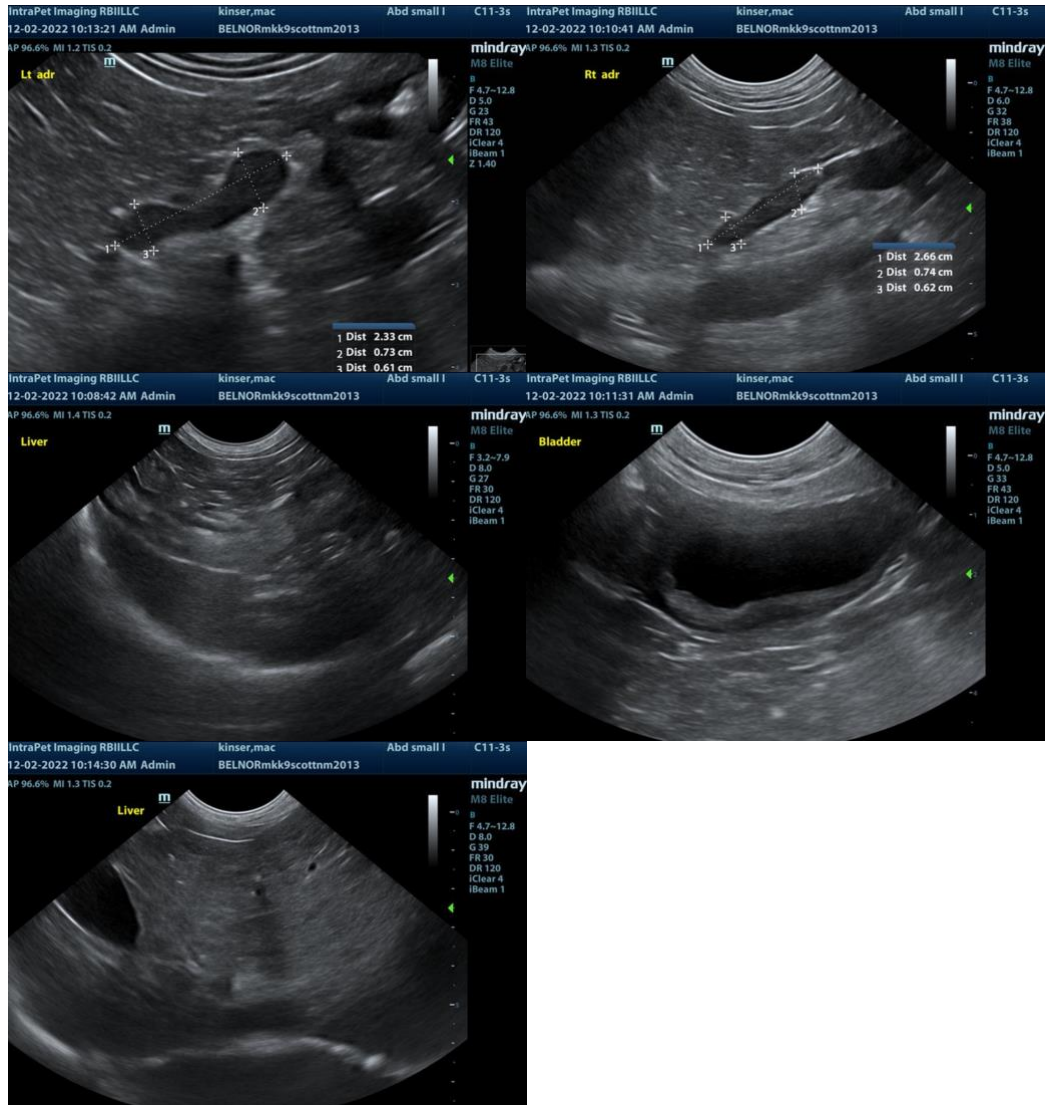
ULTRASONOGRAPHIC FINDINGS

- Subjectively benign hepatopathy with mild nodular hyperplasia pattern
- Minor bladder thickening
- Splenic fold
- Age-related abdominal changes otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant disease. Full urinalysis work up +/- culture is indicated if not already performed, depending upon inflammatory sediment present.





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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