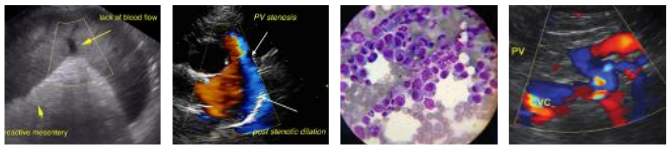
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Apollo Lee

SPECIES

Canine

BREED

Staffordshire Bull Terrier

SEX

Neutered Male

AGE

3 Years

WEIGHT

70.4 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kim Leidberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Resop, MVS

INVOICE

13157

DATE

12/27/21

PRESENTING CLINICAL SIGNS

History: Presented for vomiting on 12/13/21 returned for anorexia on 12/24/21m still not interested in food or water, regurgitated 10 mls on 12/26/21. check for FB

Abnormal PE/Chem/CBC/UA Results: Chem WNL CBC slightly elevated RBC

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 6.59 cm. The right kidney measured 5.81 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 0.72 cm at the cranial pole and 0.66 cm at the caudal pole. The left adrenal gland measured 0.61 cm at the cranial pole and 0.55 cm at the caudal 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. Cranial folding of the spleen was noted, positional variant.

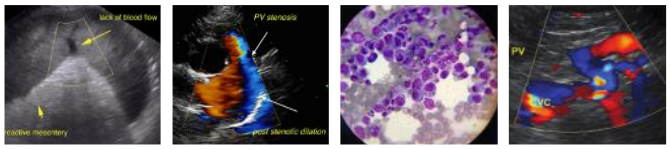
Liver

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.

Gastrointestinal

The **gastrointestinal tract** revealed some stasis in the stomach as well as distal small intestine revealed a stasis pattern with shadowing material followed by empty small intestine creating an obstructive pattern. Trace amounts of free fluid were noted. The colon appeared to have a minor amount of soft stool.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Apollo Lee

SPECIES

Canine

BREED

Staffordshire Bull Terrier

SEX

Neutered Male

AGE

3 Years

WEIGHT

70.4 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kim Leidberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Resop, MVS

INVOICE

13157

DATE

12/27/21

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.

Free Abdomen

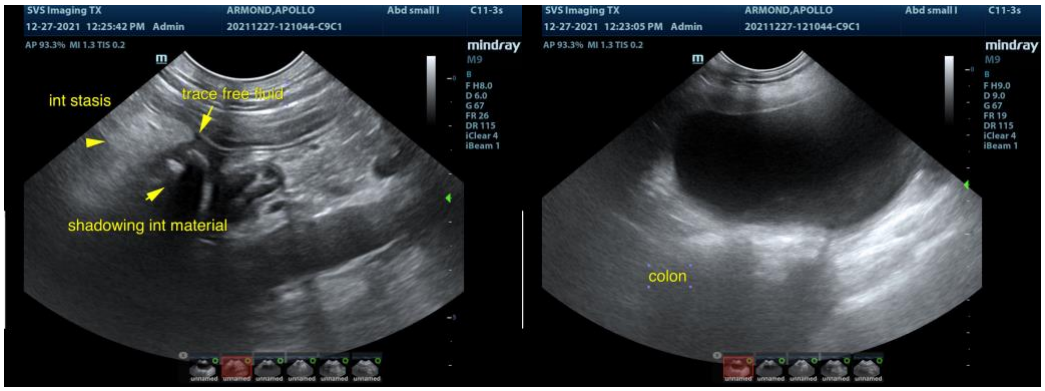
The mesenteric **lymph nodes** (an example measured 2.83 cm x 0.92 cm) presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia.

ULTRASONOGRAPHIC FINDINGS

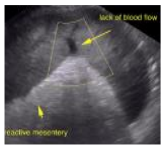
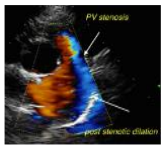
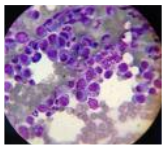
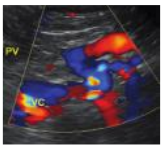
- Distal small intestinal obstructive pattern with shadowing material and trace free fluid
- Reactive mesenteric lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory surgery recommended. GI biopsies warranted to rule out underlying disease.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Apollo Lee

SPECIES

Canine

BREED

Staffordshire Bull Terrier

SEX

Neutered Male

AGE

3 Years

WEIGHT

70.4 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kim Leidberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

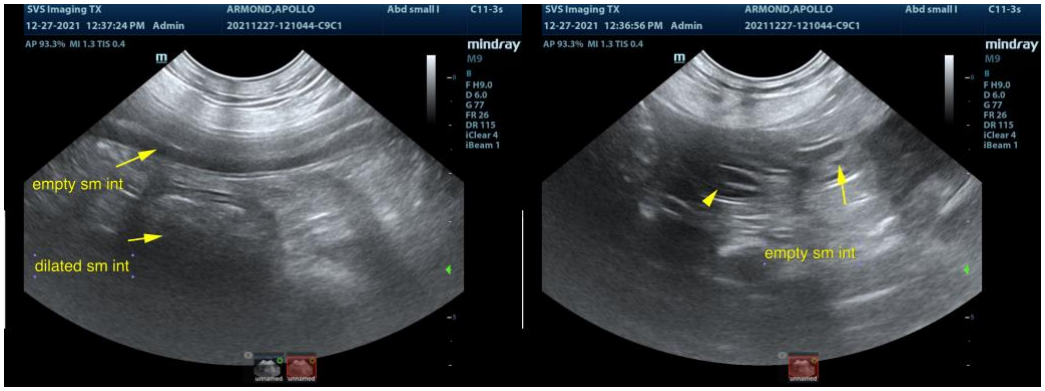
Dr. Resop, MVS

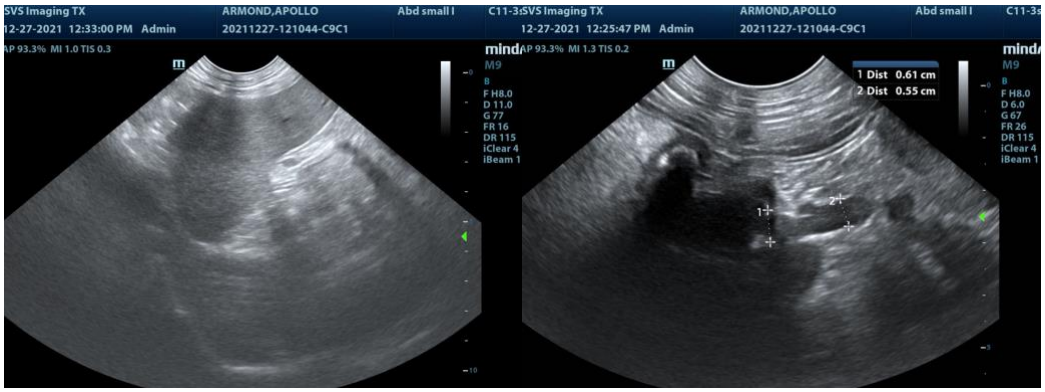
INVOICE

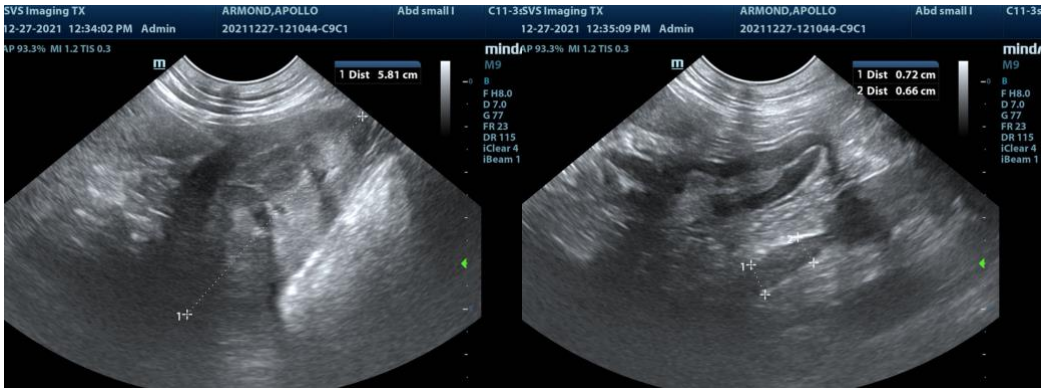
13157

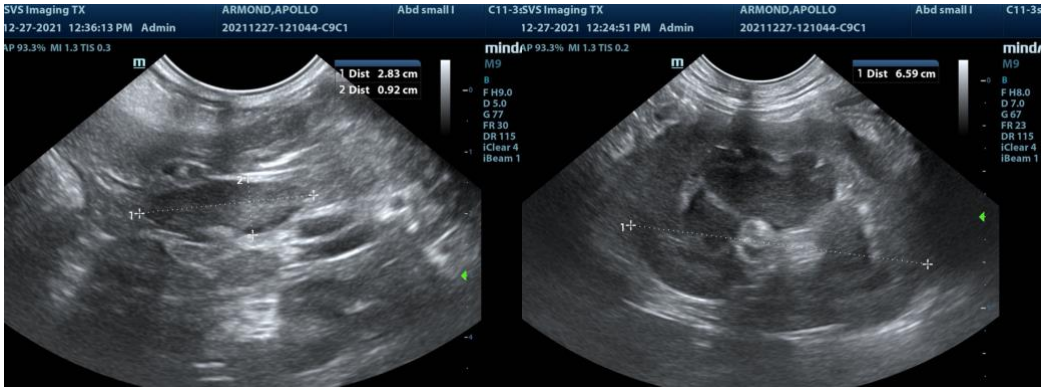
DATE

12/27/21

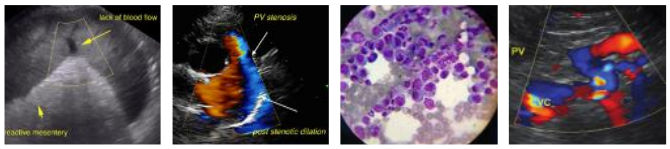








SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Apollo Lee

SPECIES

Canine

BREED

Staffordshire Bull Terrier

SEX

Neutered Male

AGE

3 Years

WEIGHT

70.4 Lbs.

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kim Leidberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Resop, MVS

INVOICE

13157

DATE

12/27/21

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