



PATIENT

Teddy Zeuner

PRESENTING CLINICAL SIGNS

History: Vomiting, Diarrhea,
Abnormal PE/Chem/CBC/UA Results: ALP- 933 ALT- Not readable GGT- 77 Abnormal CPL

SPECIES

Canine

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. A focal calculus was noted and measured 0.68 cm and was non-obstructive. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

BREED

Papillion Mix

SEX

Neutered male

The **kidneys** revealed largely normal size and structure. There was some loss of corticomedullary definition and pinpoint mineralization. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Occasional cortical cysts were noted. The left kidney measured 4.5 cm. The right kidney measured 4.5 cm.

AGE

11 years

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 1.76 x 0.6 cm. The left adrenal gland measured 1.4 x 0.5 cm.

WEIGHT

14.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 was noted.

IMAGING PERFORMED BY

Dr. Cerf

HOSPITAL NAME

Veterinary Center of
Hardyston

Liver

The **liver** revealed coarse architecture with increase portal markings. The gallbladder was over distended. Enhanced fat was noted at the neck of the gallbladder. This is consistent with inflamed mucocele. Straiting bile was noted within the gallbladder with rounding.

REFERRING VET

Dr. Cerf

INVOICE

42432

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

DATE

12/30/22



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Pancreas

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Diffuse hyperechoic changes were present in the area of the **pancreas**. The pancreatic remodeling was evident with multifocal to diffuse hyperechoic changes. These changes are consistent with fibrosis, amyloid, saponification of fat and may contain areas of low-grade chronic active inflammation especially if pain on imaging (+ Murphy sign) was present +/- focal subxiphoid palpation reveals pain response. No overt masses were noted.

SPECIES

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ULTRASONOGRAPHIC FINDINGS

Pancreatic remodeling.

SEX

Neutered male

Mildly inflamed gallbladder mucocele.

Cholangiohepatitis liver pattern.

Bladder calculus, non-obstructive.

AGE

11 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend cholecystectomy and common bile duct lavage in this patient as well as liver biopsy. Leptospirosis titers are warranted as well. Some level of pancreatitis is possible. Medical stabilization with Ursodiol, Ampicillin, Metronidazole, nutraceuticals and IV support would all be indicated. If surgery is to be performed then cystotomy and stone removal is recommended. Ursodiol is recommended over the next 6-8 weeks if surgery is not an option. The gallbladder may stabilize; however, it is mildly inflamed at the level of the cystic duct, which is a criteria for surgery.

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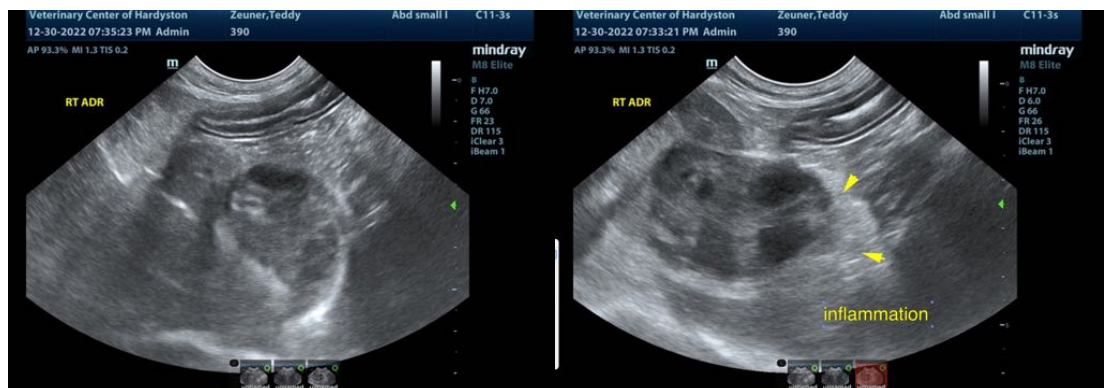
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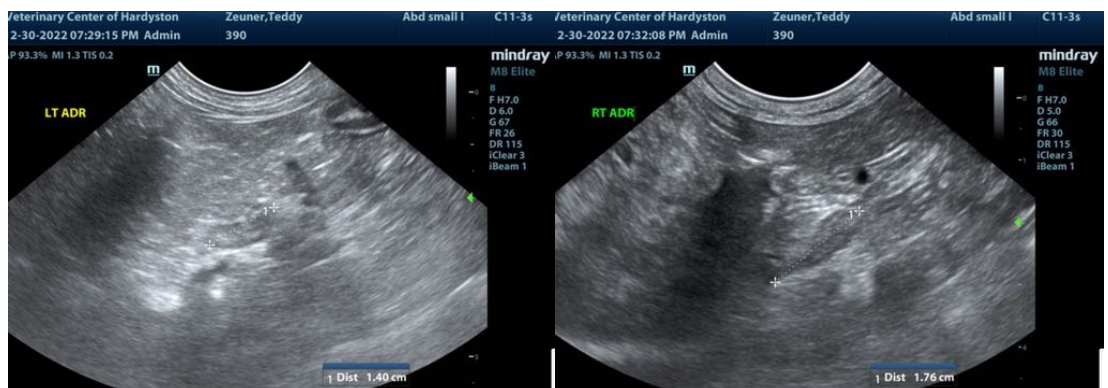
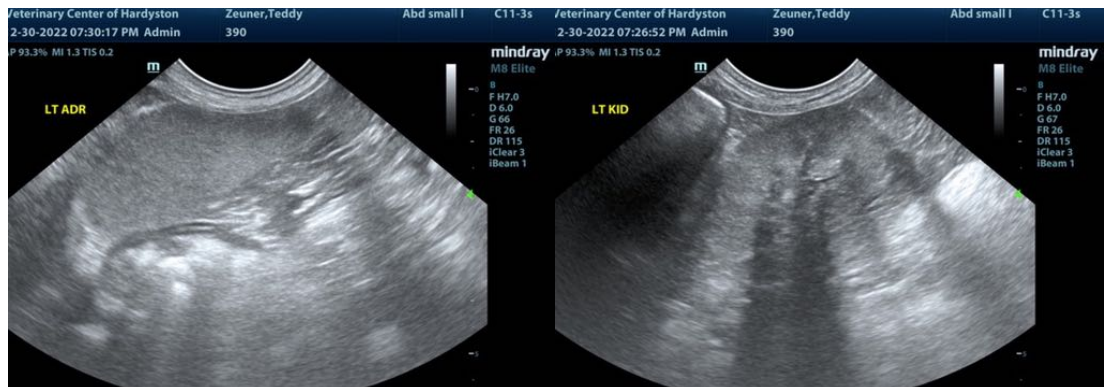
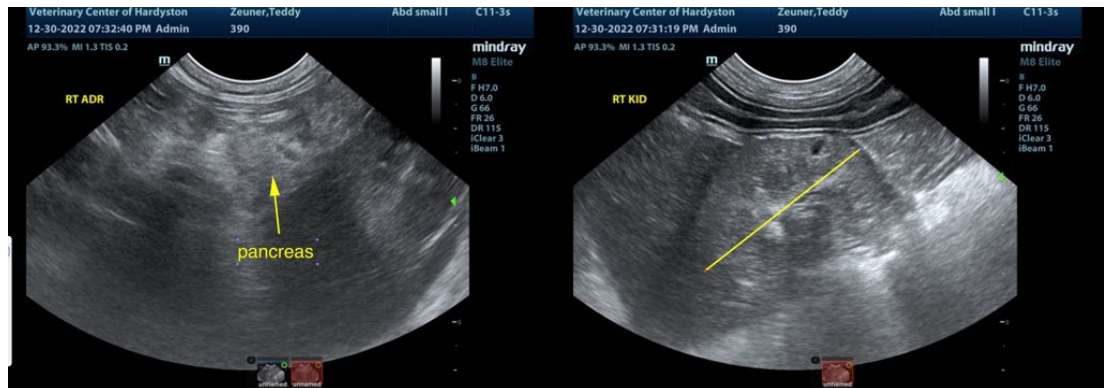
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Papillion Mix

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

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Neutered male

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