

**DATE**

12/9/21

PRESENTING CLINICAL SIGNS

History: Patient had a foreign body removed with gastropexy on 10/7/2021. Was sent home with Gabapentin for 7 days. Owner was feeding chicken and rice for 2 weeks and the diarrhea started when trying to mix dry dog food back into diet. 10/22/2021: Staples removed. Received Metronidazole but no change with BM's. Eventually BM had mucous and then blood. 11/1/2021: Fecal tested- Negative for Shigella. 11/3/2021: Started 10-day dose of Amoxicillin (Still on chicken and rice diet) O tried changing to ZD diet when BM's became more normal but on 11/12/2021 diarrhea returned with mucous.

PATIENT

Kona Haught

Current Medications: Gabapentin 300 MG #40 (Dispensed on 10/8/21) 1-2 Tablets PO every 8-12 hours. Amoxicillin and Metronidazole- dispensed at another vet-- awaiting records.

SPECIES

Canine

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

BREED

German Shepherd

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System****SEX**

Spayed Female

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 was noted. Ureteral papillae were normal.

AGE

12/17

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 6.37 cm. The left kidney measured 6.83 cm.

WEIGHT

61 lbs

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 2.65 x 1.05 cm at the cranial pole and 0.74 cm at the caudal pole. The left adrenal gland measured 2.02 x 0.73 cm at the caudal pole and 0.65 cm at the cranial pole.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Rachel Brillhart RDMS

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.

HOSPITAL NAME

Celebrie VH

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 was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele. However, the sludge appears to be mildly excessive. No adjunctive inflammation was noted.

REFERRING VET

Dr. Garrett

INVOICE

94452

Gastrointestinal

The **stomach** in this patient presented excessive GI gas and an empty lumen. There was no evidence of foreign matter. Some hyperperistalsis was noted in the small intestine. The colon was unremarkable.

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.

ULTRASONOGRAPHIC FINDINGS

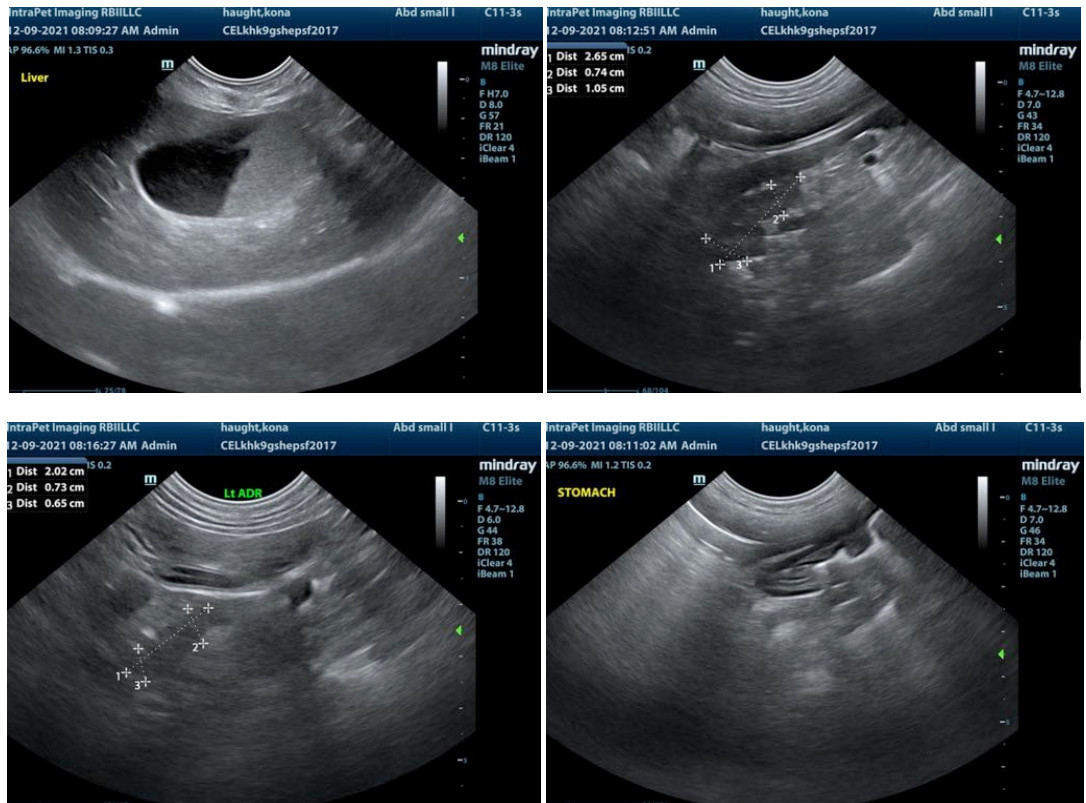
Excessive GI gas.

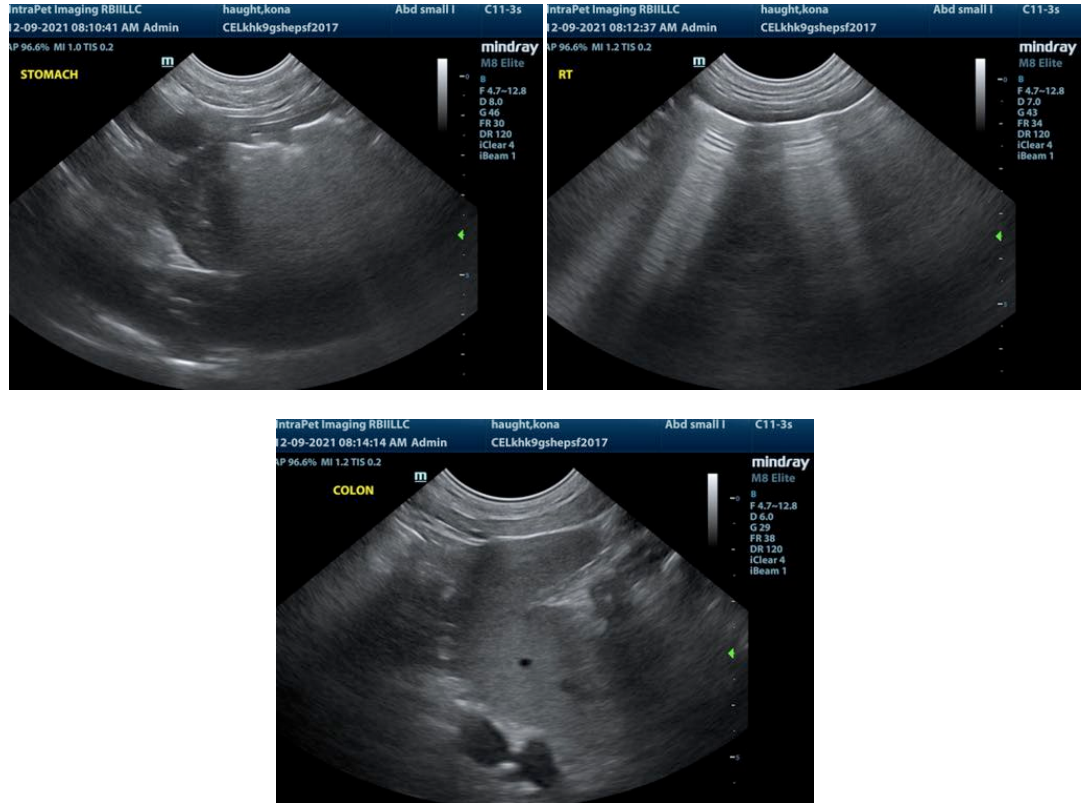
Gallbladder sludge.

Structurally unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. 24 hour n.p.o. canned b.i.d. feedings are recommended. I recommend a fresh fecal smear and fecal floatation analysis. Diet change to a hydrolyzed diet may be in the patient's best interest.





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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