

PATIENT PRESENTING CLINICAL SIGNS

Koda Sparks

SPECIES

Canine

BREED

Aussie X

SEX

Spayed Female

AGE

12 Years

WEIGHT

20 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Hamilton Region Vet
Emergency Clinic

REFERRING VET

Dr. Grewal

INVOICE

45133

DATE

2/15/23

Clinical Exam Findings: Patient presented to HREVC on 2/14/2023 for Vomiting > 10x that day + diarrhea + anorexia. No recent change in diet. No raw food. No known toxin ingestion or foreign material ingestion ~1 month ago, pet was vomiting blood. She improved with medical management by her family veterinarian. Has had a history of vomiting 10x within one day previously, although this was self-limiting and responded to anti emetic therapy. PE: - Painful abdomen - Blood on rectal exam. Current Medications IVF PLA 2XM @ 64 ml/hr, Cerenia 1 mg/kg SubQ q24hr, Methadone 0.2 mg/kg IV q6hr, Sucralfate 1 g PO q8hr, Metronidazole 7.5 mg/kg IV q12hr, and Pantoprazole 0.7 mg/kg IV q12hr
Abnormal PE/Chem/CBC/UA Results: 2/14/2023 (CBC, Biochemistry, electrolytes): lymphopenia, mild ALT elevation (242 RI 0-125), electrolytes WNL Resting Cortisol: 138 nmol/L Radiographic Findings Possible soft tissue opacity + gas in stomach, gas in colon and small intestine? No radiopaque FB. Cannot rule out soft tissue opacity FB.

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 5.99 cm. The right kidney measured 5.95 cm.

Adrenal Glands

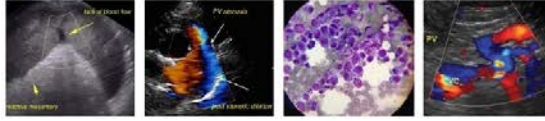
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 1.79 cm x 1.31 cm at the cranial pole and 0.46 cm at the caudal pole. The left adrenal gland measured 2.29 cm x 0.51 cm at the cranial pole and 0.51 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.

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.



PATIENT

Gastrointestinal

Koda Sparks

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. There were minor areas of luminal fluid noted. There was no evidence of obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable. No evidence of foreign bodies. Fluid filled colon noted. Reactive mesenteric lymph nodes noted up to 1.5 cm x 0.50 cm.

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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

- Enterocolitis pattern with reactive mesenteric lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Supportive care for intestinal upset warranted. No evidence of foreign body or surgical disease. I recommend a fresh fecal smear and fecal floatation analysis. Treatment for enterotoxin, plasma expanders, GI protectants all indicated as well as anti-parasitic protocol.

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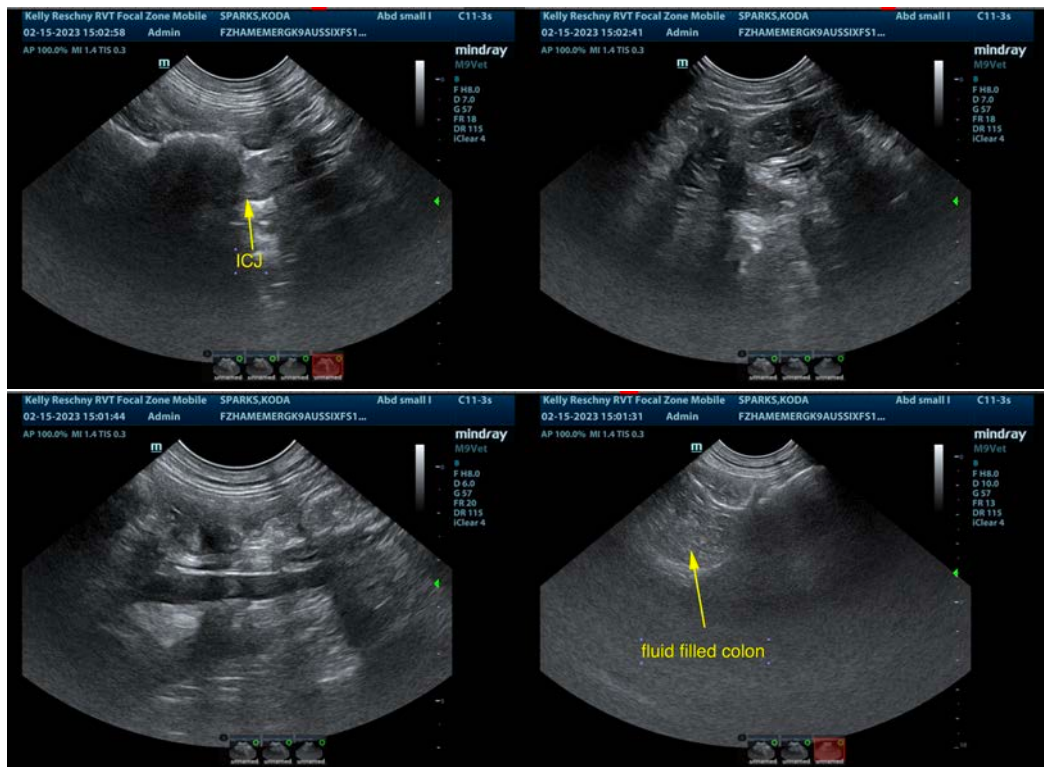
Dr. Grewal

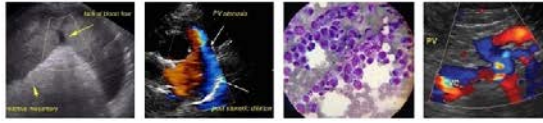
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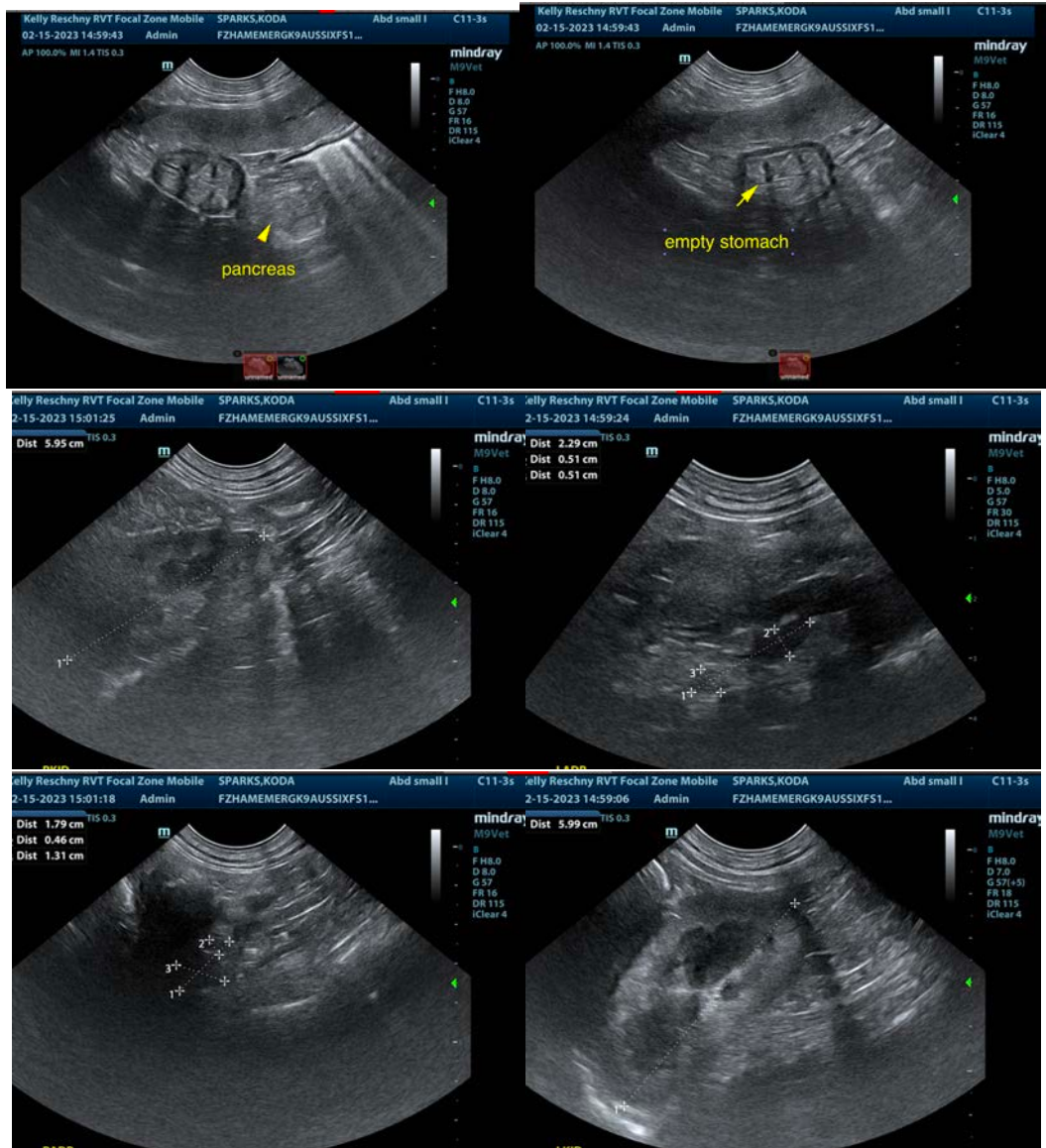
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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