

**DATE**

2/3/23

PATIENT

Simba Zukowski

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

11/11/12

WEIGHT

37.9 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Animal Emergency
Hospital**REFERRING VET**

Dr. Ruby

INVOICE

44768

PRESENTING CLINICAL SIGNS

Simba is a 10 year 3 month MN American Eskimo. P had a TPLO procedure at Banfield on Monday. O took Simba to Thrive Pet Urgent Care in Catonsville, MD for vomiting. The Urgent Care facility did Chem/Cbc/Lytes, ALT= 238 took radiographs, gave SQ fluids, pain medication and, gave injectable Cerenia on 2/1/23. Simba was sent home after treatment and O was told if pet continues to vomit through the Cerenia, pet should seek follow up care. Pet is still vomiting after getting Cerenia. Presented to RDVM today for GI issues. Referral for continued care and abdominal US

Current Medications: Buprenorphine, Cerenia, Protonix.

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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 1.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 and no evidence of pelvic dilation was present. The left kidney measured 5.68 cm. Slight areas of cortical mineralization noted.

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 2.18 cm x 0.78 cm at the caudal pole and 0.81 cm at the cranial pole. The left adrenal gland measured 1.82 cm x 0.64 cm at the caudal pole and 0.52 cm at the cranial pole.

Spleen

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** presented mild increased portal markings. The gallbladder was overdistended with suspended immobile debris. Gallbladder polyps also noted.

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

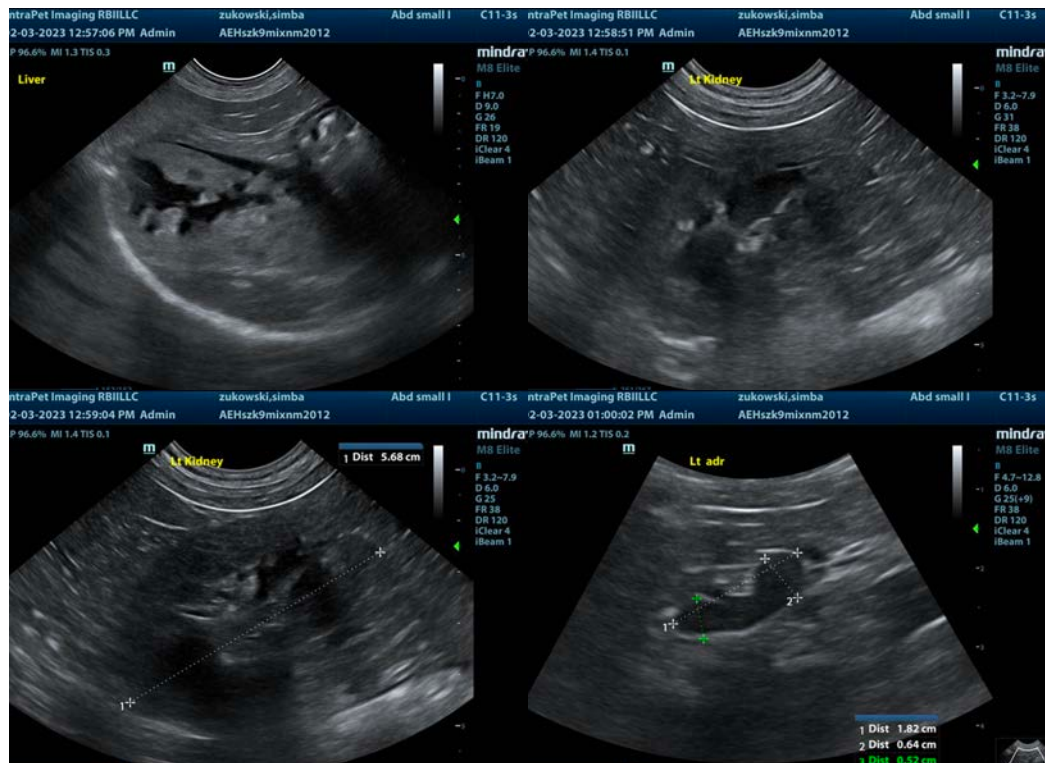
The **pancreas** was hypoechoic and irregular in the right limb, measuring up to 1.7 cm in width.

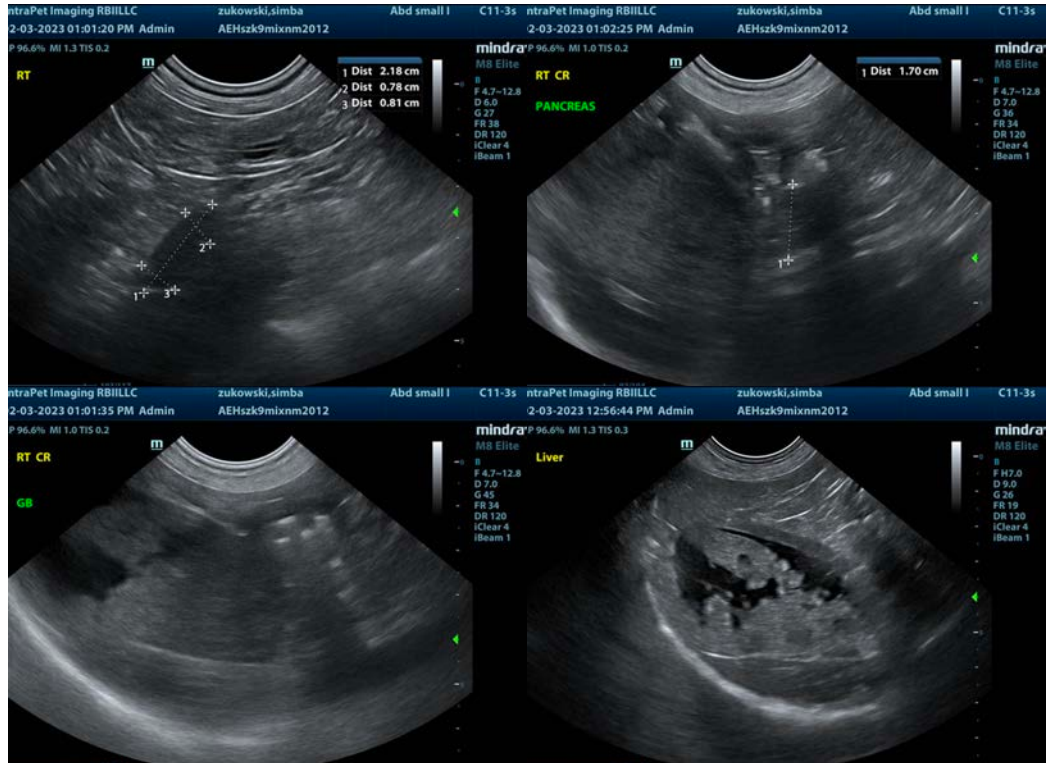
ULTRASONOGRAPHIC FINDINGS

- Immature gallbladder
- Minor heterogeneous pancreatic changes
- Moderate degenerative renal changes
- Age related splenic changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Both the gallbladder and pancreatic presentation could be contributing to the clinical signs. Ursodiol therapy warranted over the next 6 weeks with recheck sonogram at that time. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas. Full urinary workup warranted if not already performed. No evidence of neoplasia or evidence of foreign body.





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.

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