



**PATIENT PRESENTING CLINICAL SIGNS**

Cork Hoffman

Lethargy x 2-3w w intermittent bilious vomiting and hyporexia. Monday acutely worse: refused breakfast, vomited dark brown liquid w blood, more lethargic. Single episode of diarrhea Monday. AXR yesterday: Mild multifocal GI mineral debris, suggestive of recent dietary indiscretion. The gastric soft tissue content may represent normal ingesta if the patient has recently eaten. Soft tissue foreign material must also be considered, although no obvious evidence of a GI obstructive pattern is appreciated. Mild splenomegaly.  
Abnormal PE/Chem/CBC/UA Results: 2/7 (VEG): - CBC: WNL - Chem: WNL 2/8: - 4DX neg - UA/fecal pending \*dehydrated on exam this am\*

**SPECIES**

Canine

**BREED**

WHWT

**SEX**

Neutered male

**AGE**

3 ½ years

**WEIGHT**

20.2 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Sorbo

**HOSPITAL NAME**

Back Bay VC

**REFERRING VET**

Dr. Wheeler

**INVOICE**

95897

**DATE**

2/8/22

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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.

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. Both kidneys measured 4.0 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 left adrenal gland measured 0.3 cm. The right adrenal gland measured 0.6 cm at the cranial pole and 0.4 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 was 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



**PATIENT**

lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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**SPECIES**

**Gastrointestinal**

Canine

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Minor retention of ingesta was noted in the stomach. Transit of chyme appeared to be normal in the small intestine. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. The mesenteric lymph nodes are reactive and minor. The largest measured 2.0 x 0.4 cm.

**BREED**

WHWT

**SEX**

**Pancreas**

Neutered male

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.

**AGE**

3 ½ years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

Structurally unremarkable abdomen.

20.2 lbs

Minor reactive mesenteric lymph nodes.

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

Supportive care should prove effective. Anti-parasitic protocol is warranted. Given the patient's breed and vague clinical signs screening for Addison's is warranted.

**IMAGING PERFORMED BY**

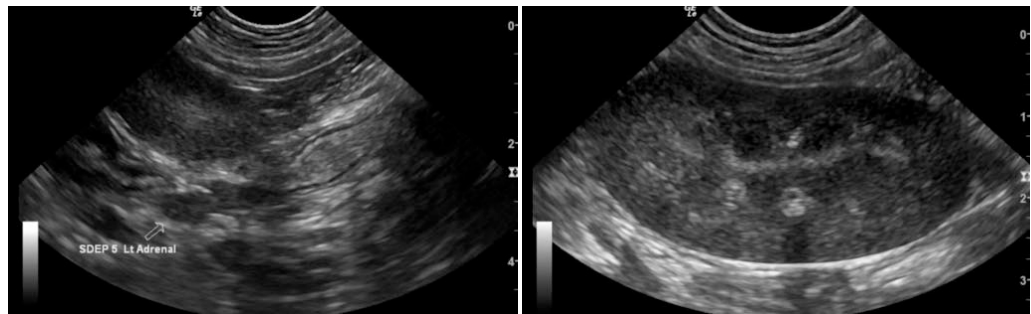
Dr. Sorbo

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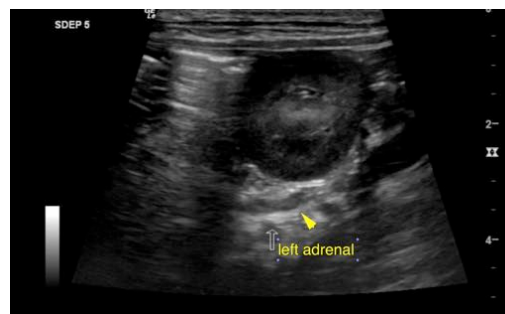
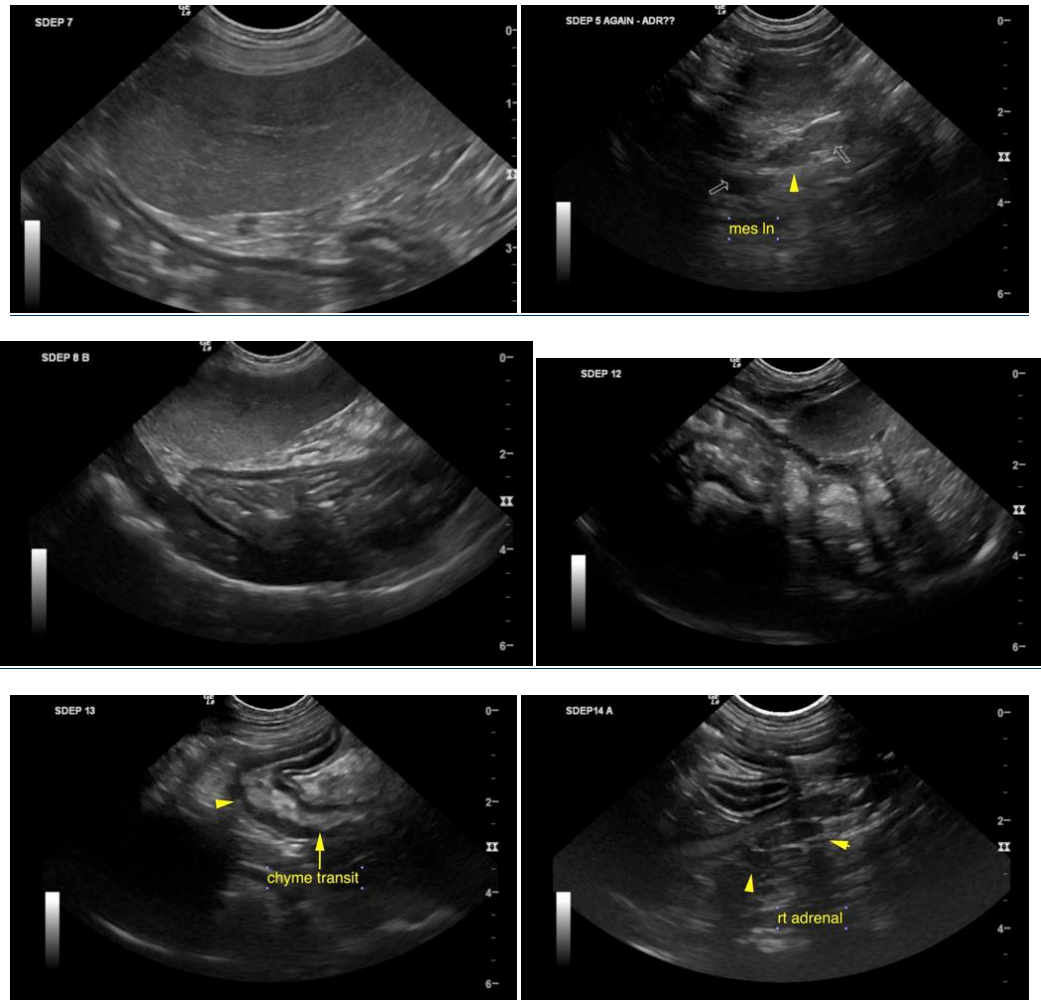
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**  
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