



PATIENT PRESENTING CLINICAL SIGNS

Remi O'Connor
SPECIES History: vomiting, diarrhea, anorexia; not responding to out patient care. On cerenia, metronidazole, pantoprazole.
 Abnormal PE/Chem/CBC/UA Results: CPL abnormal; neuts 15 (12.3 H), lymphs 0.82 (0.83L), ALT 136 (120H), ALKP 362 (140H), K 3.1 (3.8L), CI 98 (102L)

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Brittany Spaniel
SEX 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.

Neutered male
 The residual prostate measured 0.5 cm.

AGE 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 6.87 cm. The right kidney measured 6.96 cm.

WEIGHT

53.2 lbs

Adrenal Glands

INTERPRETED BY 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 2.37 x 0.7 cm at the caudal pole and 0.66 cm at the cranial pole. The right adrenal gland measured 2.55 x 1.45 cm at the cranial pole and 0.63 cm at the caudal pole.

Eric Lindquist, DMV
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IMAGING PERFORMED BY

Diane McFadden, RVT

Spleen

HOSPITAL NAME 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.

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Liver

The **liver** revealed increased portal markings and coarse architecture. The gallbladder and common bile duct were unremarkable.



PATIENT

Gastrointestinal

Remi O'Connor

The **stomach** was over distended with chyme. The upper duodenum was enveloped by the pancreatic pathology causing delayed outflow. The remainder of the intestinal tract was unremarkable.

SPECIES

Canine

Pancreas

The right and left limbs of the **pancreas** revealed mixed, hypoechoic, extensive parenchymal changes with hyperechoic surrounding fat. This is consistent with pancreatic necrosis and pancreatitis.

BREED

Brittany Spaniel

ULTRASONOGRAPHIC FINDINGS

SEX

Neutered male

Extensive pancreatitis, pancreatic necrosis pattern with envelopment of the upper duodenum and delayed outflow.

AGE

9 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

24-hour n.p.o., IV fluid support, broad spectrum antibiotics and pain management is all indicated followed by eventual slurry feeding. However, eventual surgical debridement of the pancreatic pathology may be necessary in order to liberate the duodenum. A recheck sonogram is recommended in 48-72 hours.

WEIGHT

53.2 lbs

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HOSPITAL NAME

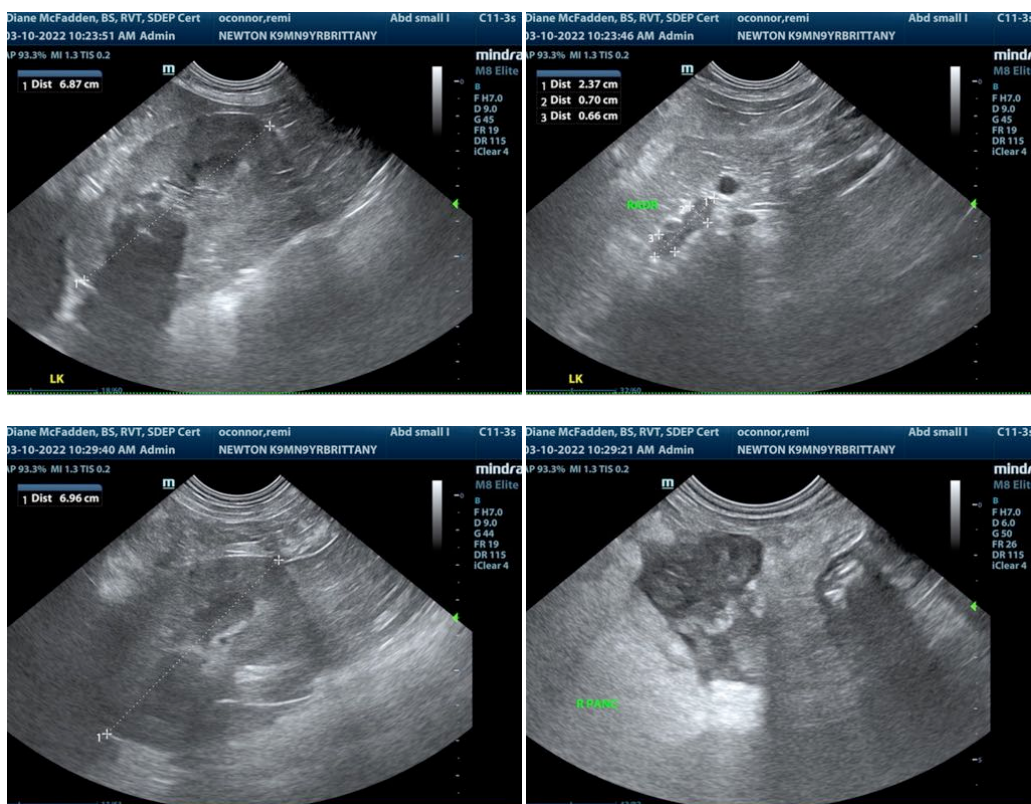
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Neutered male

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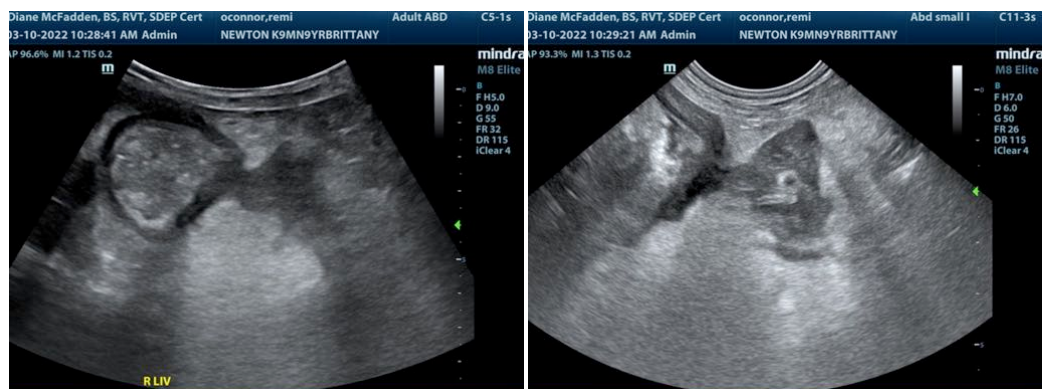
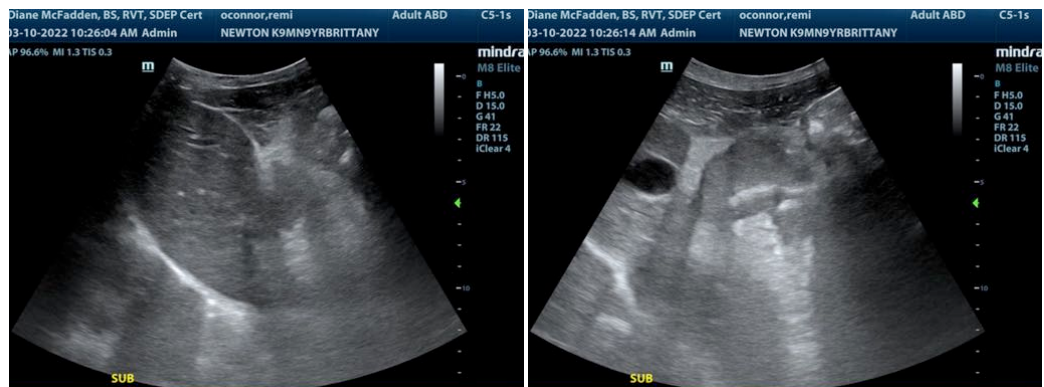
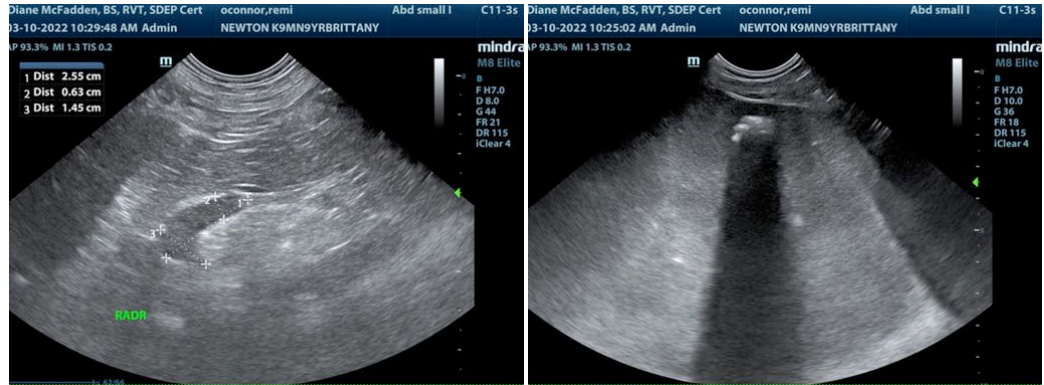
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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