



## PATIENT PRESENTING CLINICAL SIGNS

**Coco Humes**  
**SPECIES** Canine  
**BREED** Toy Poodle  
**SEX** Spayed Female  
**AGE** 10 years  
**WEIGHT** 7.4 kg

**History:** Presented at our hospital for vomiting, diarrhea, and not eating. Patient has not been eating for 2 days. Patient is now starting to vomit up water. Owner says last night patient had bowel movement that was one chunk of solid and then followed by a lot of liquid bloody diarrhea. Patient is more lethargic and having an increase in thirst. Patient chewed up owner's wicker basket on Sunday. Previous Health Concerns: enlarged heart; leaky valves Current Medications: Dasuquin; Metacam; omega oil; hydroxyzine

**Abnormal PE/Chem/CBC/UA Results:** Cardiovascular: Grade III/VI L systolic murmur. Normal pulses. Abdominal: Soft, non-painful. No plication/fb noted. CBC- wbc 26.26 high, neu 25.20 high, lym 0.24 low, eos 0.01 low, neu% 96 high, lym% 0.9 low, eos% 0 low; BUn 40.9 H, Calcium 8.1 L, Albumin 4.1 H, Glucose 566 H, ALT 468 H, ALP > 993 H, GGT 16 H, Amylase 2237 H, Lipase to high to calculate; EPOC Bicarbonate 5.9 L, pH 7.078 L, Sodium 126 L, Calcium Ionized 1.07 L, Glucose 510 H Radiographs: No signs of GI FB/obstruction. Large liver. Normal detail. No signs of mass effect, etc. Normal urinary bladder with no signs of calculi. UA blood +10; Ketone 50++; Protein 30+; GLU 1000; PH 5.0; SG 1.022; Ascorbic Acid 20; WBC 0-1/hpf; RBC 1-2/hpf; Casts 0-1/lpf; Epithelial <1; bacteria ++; granular; cocci

## 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 was noted. Ureteral papillae were normal.

The **kidneys** revealed idiopathic hyperechoic medullary rim sign noted in the kidneys. Assessment for proteinuria is warranted. Slight pinpoint mineralization was noted. The right kidney measured 5.11 cm. The left kidney measured 4.63 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 2.05 x 0.76 cm at the cranial pole and 0.57 cm at the caudal pole. The right adrenal gland measured 1.81 x 0.47 cm at the caudal pole and 0.8 cm at the cranial 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.

## INTERPRETED BY

Eric Lindquist, DMV  
 DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Erin Wicks

## HOSPITAL NAME

Shores VEC

## REFERRING VET

Dr. Moser

## INVOICE

96747

## DATE

3/11/22



**PATIENT**

**Liver**

Coco Humes

The **liver** revealed diffusely hyperechoic parenchyma compared to the falciform fat with attenuating sound beam. Gallbladder debris was noted with striating bile. This is consistent with emerging mucocele formation.

**SPECIES**

Canine

**Gastrointestinal**

**BREED**

Toy Poodle

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.

**SEX**

Spayed Female

**Pancreas**

**AGE**

10 years

The **pancreas** revealed extensive, hypoechoic, irregular undulating contour with enhanced surrounding mesentery and edematous parenchyma in the right and left limbs.

**WEIGHT**

7.4 kg

**Free Abdomen**

Slight areas of free fluid were noted adjacent to the liver.

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**ULTRASONOGRAPHIC FINDINGS**

Pancreatitis pattern in the right and left limbs with metabolic hepatopathy.  
Emerging mucocele.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Bile acid profile is warranted. Ultrasound-guided FNA is warranted. There was no evidence of obstruction. Treatment for pancreatitis, pain management, broad spectrum antibiotics and fluid therapy is all indicated. Recheck sonogram is recommended in 48-72 hours. Ursodiol therapy is recommended long term. There was no obvious evidence of neoplasia, yet this cannot be definitively ruled out.

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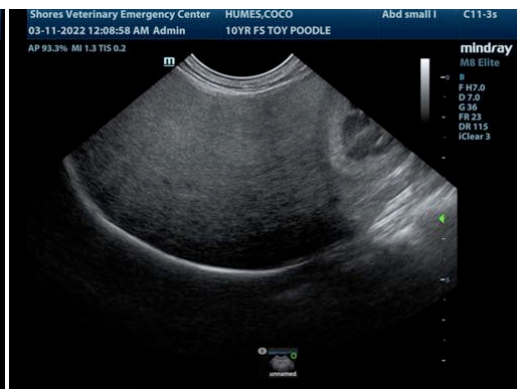
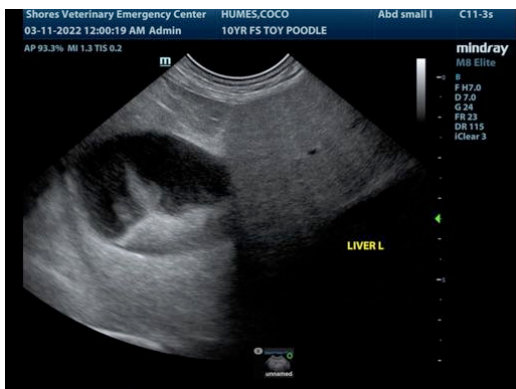
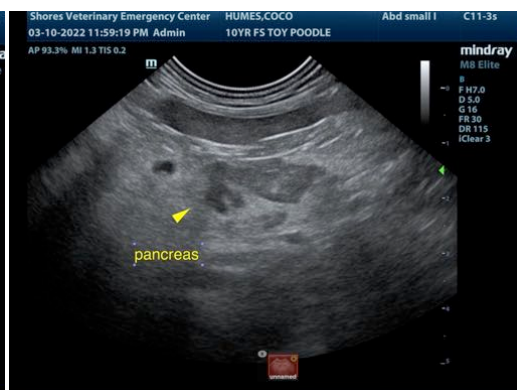
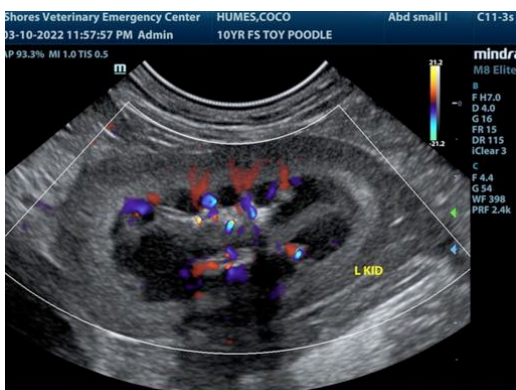
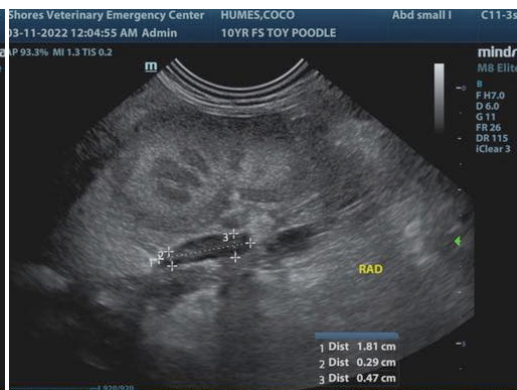
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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