**DATE**

03/11/2022

PRESENTING CLINICAL SIGNS**PATIENT**

Oliver Buranen

History: 3 days ago Oliver vomited in the morning but then ate later that day and the following day. Then yesterday he vomited 2-3 times and did not want to eat at all. This morning would not eat but did not vomit. Went to rDVM; treated with SQ fluids and started Sucralfate; also sent home with Hill's i/d canned food and they have been giving him 1 tbs at a time every few hours this afternoon; he has been eating that ok and has not vomited.

SPECIES

Canine

Current Medications: Cerenia.

Lab Results: ALT 4954, ALKP 2365.

Radiographs: Gallstones.

BREED

Maltipoo

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.

SEX

Neutered male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN***Urinary System*****AGE**

13 years

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.

WEIGHT

6.3 pounds

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some mildly increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight subcapsular fluid was noted in portions of both kidneys. The left kidney measured 3.2 cm. The right kidney measured 3.05 cm.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS***Adrenal Glands*****HOSPITAL NAME**Animal Emergency
Hospital

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 1.43 cm x 0.52 cm caudal x 0.48 cm cranial. The right adrenal gland measured 1.2 cm x 0.45 cm caudal x 0.48 cm cranial.

REFERRING VET

Dr. Martinoli

Spleen**INVOICE**

10156ag

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 from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related mild parenchymal remodeling was noted but likely not

clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some minor gallbladder sand with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

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 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.

Other

The caudal thorax revealed a slight amount of pleural effusion.

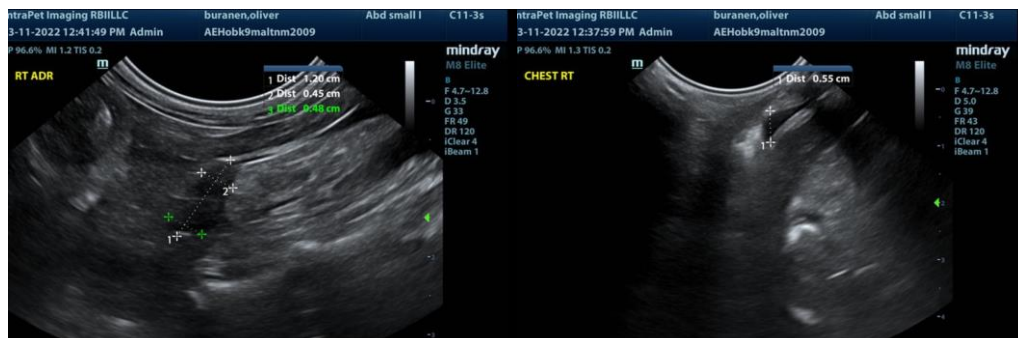
A cardiac rapid view revealed no evident pathology.

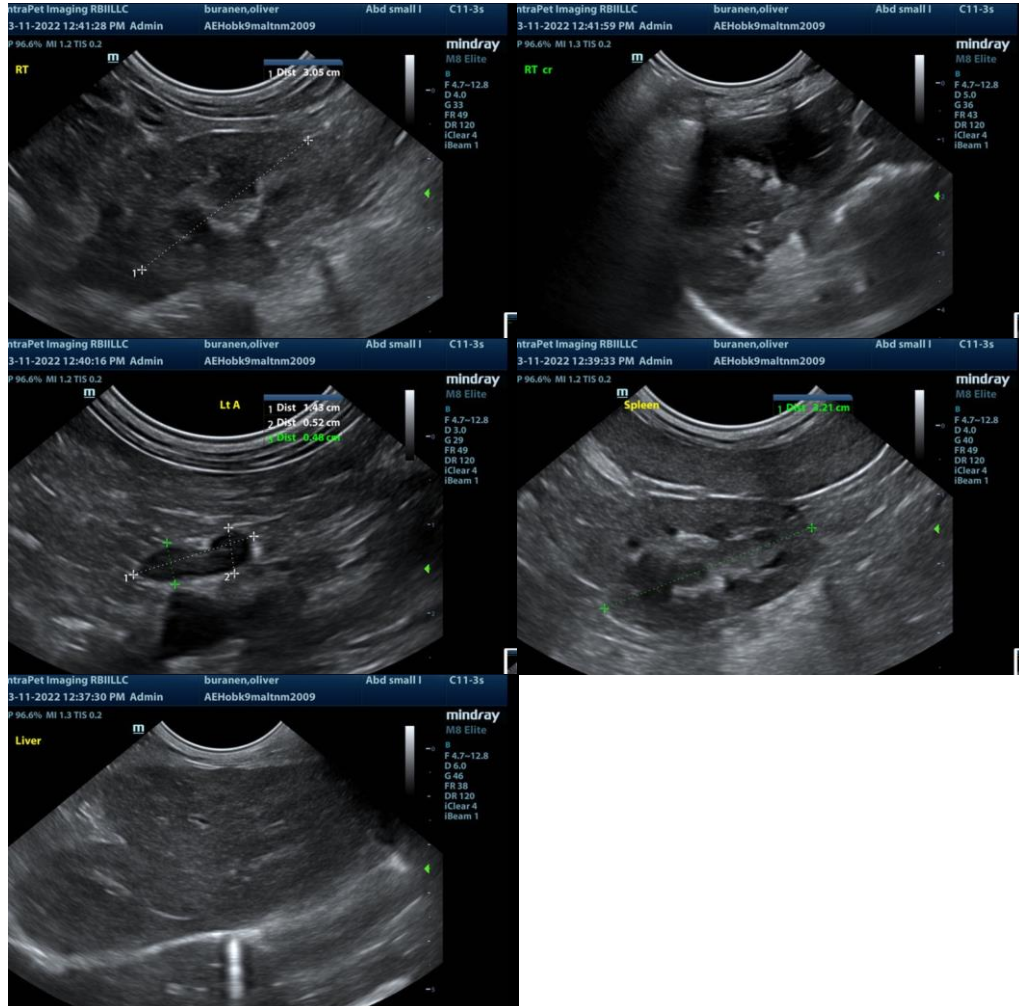
ULTRASONOGRAPHIC FINDINGS

- Slight pleural effusion.
- Hepatic remodeling.
- Age related renal changes.
- Minor gallbladder sand.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Three view chest radiographs recommended to assess for thoracic pathology.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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
 Eric.Lindquist@SonoPath.com