



PATIENT PRESENTING CLINICAL SIGNS

Jager Rost

History: Patient has long-term history of intermittent GI symptoms (diarrhea and vomiting) with presumed diagnosis of IBD. Had been doing well on Budesonide (0.7 mg SID), Provable, Vitamin B12 injections, and interittant treatment with metronidazole (50 mg BID) and lomotil but recently has been having severe diarrhea unresponsive to this treatment. Note also hx of Grade 3/6 heart murmur since 2018 and

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Elevated ALT/ALP/GGT in November suspected to be due to longterm steroid use. Started Denamarin at that time, values decreased to normal aside from mild elevation of ALP (156) on follow up CBC/chemistry performed 2/15/2022 which also showed decreased BG (66) and mild monocytosis.

BREED

Shorthair Dachshund

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

Neutered male

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.

AGE

14 years

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. The right kidney measured 4.2 cm. The left kidney measured 3.88 cm.

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 0.5 cm. The right adrenal gland measured 0.6 cm.

IMAGING PERFORMED BY

Dr. Brady

HOSPITAL NAME

Shiloh VH

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.

REFERRING VET

Dr. Onstott

INVOICE

96549

Liver

The **liver** revealed lobar biliary mineralization and increased portal markings. The gallbladder revealed an echogenic wall with sand and mineralization. This is consistent with porcelain gallbladder/chronic cholecystitis. The visible common bile duct was thickened and echogenic but measured within normal limits at 0.4 cm.

DATE

3/2/22



PATIENT

Gastrointestinal

Jager Rost

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. The pylorus revealed soft shadowing. This is consistent with ingesta; however, shadowing material measured 1.0 cm. 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.

SPECIES

Canine

BREED

Pancreas

Shorthair Dachshund

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.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

AGE

14 years

Chronic cholangitis pattern with porcelain gallbladder.

Biliary and gallbladder mineralization.

Otherwise, unremarkable abdomen.

WEIGHT

10.2 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The gastrointestinal tract was unremarkable. however, the cortisone treatment may be suppressing a more significant presentation. Geriatric hydrolyzed diet should be considered. FNA of the liver would be ideal to assess inflammatory cell type. A clinical trial of Enrofloxacin, Metronidazole over a 7-10 day period and 6-8 weeks of Ursodiol could be considered with a recheck sonogram from an empirical standpoint.

IMAGING PERFORMED BY

Dr. Brady

HOSPITAL NAME

Shiloh VH

REFERRING VET

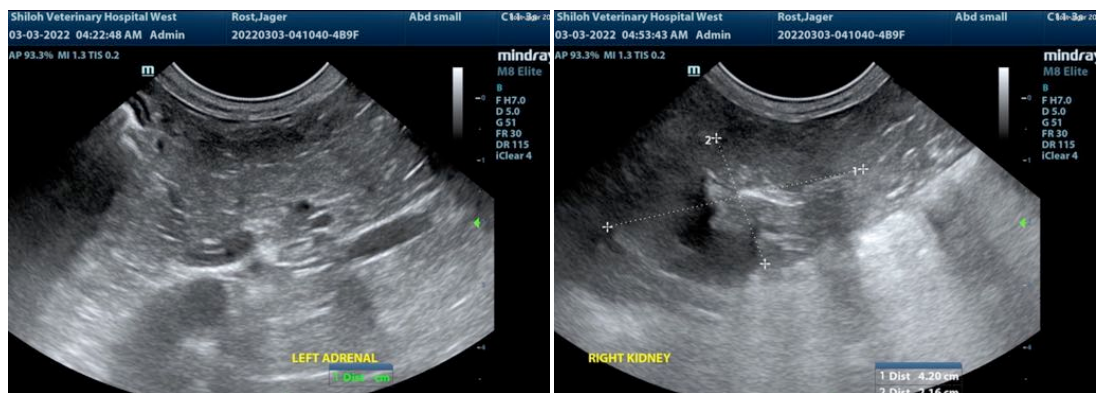
Dr. Onstott

INVOICE

96549

DATE

3/2/22





PATIENT

Jager Rost

SPECIES

Canine

BREED

Shorthair Dachshund

SEX

Neutered male

AGE

14 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Brady

HOSPITAL NAME

Shiloh VH

REFERRING VET

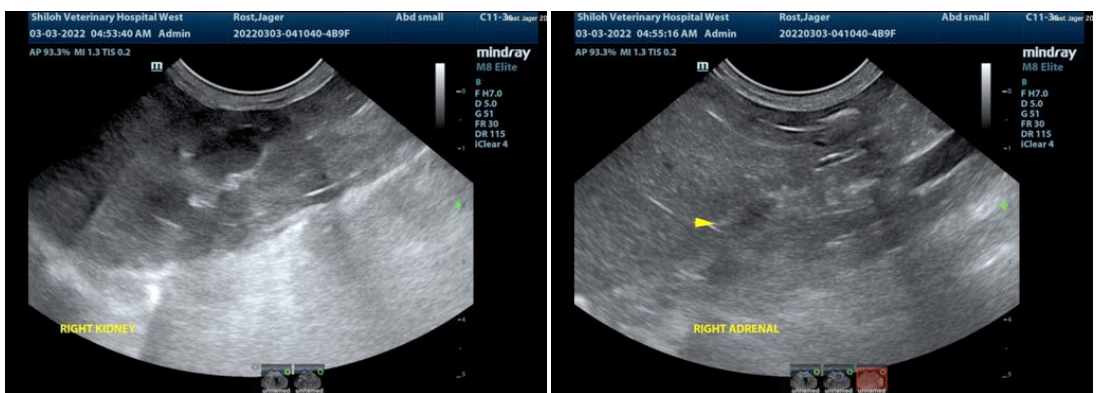
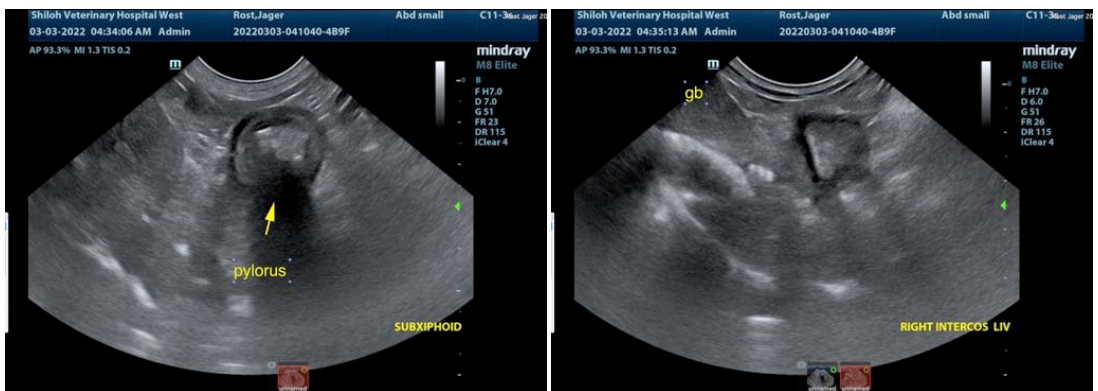
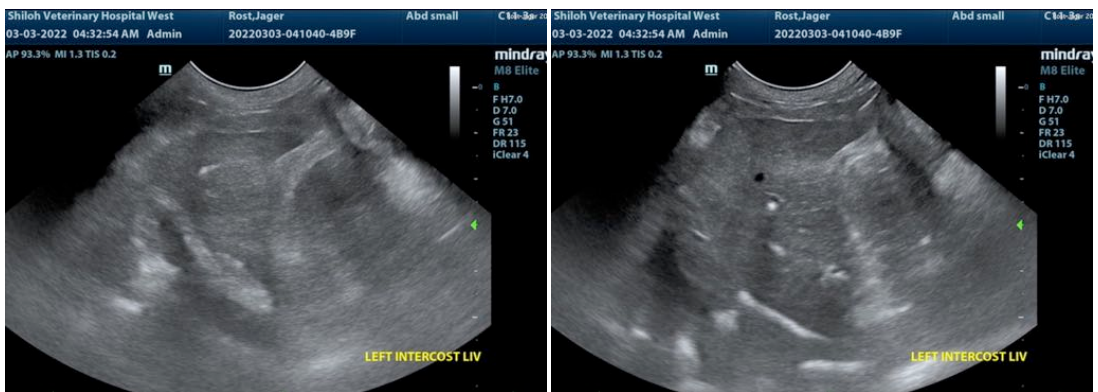
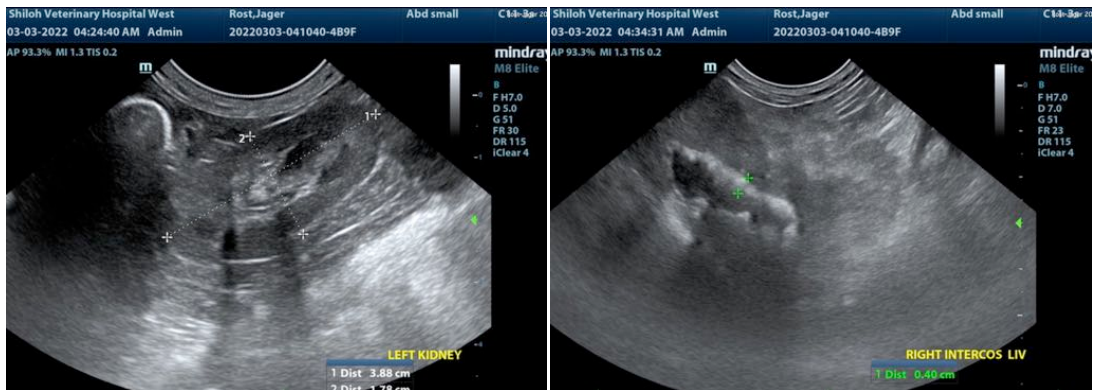
Dr. Onstott

INVOICE

96549

DATE

3/2/22





PATIENT

Jager Rost

SPECIES

Canine

BREED

Shorthair Dachshund

SEX

Neutered male

AGE

14 years

WEIGHT

10.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Brady

HOSPITAL NAME

Shiloh VH

REFERRING VET

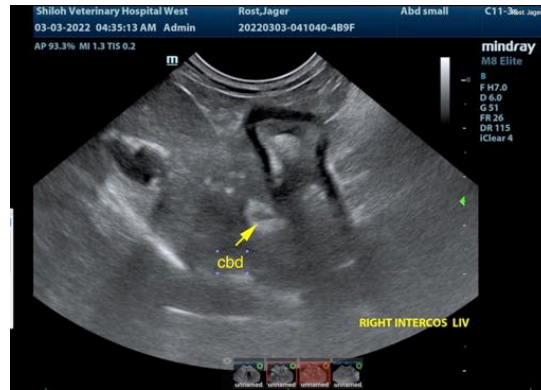
Dr. Onstott

INVOICE

96549

DATE

3/2/22



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
info@SonoPath.com