



PATIENT

Lulu Chi

SPECIES

Canine

BREED

Dachshund

SEX

Spayed Female

AGE

2010

WEIGHT

8.1 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Brooklyn Heights VH

REFERRING VET

Dr. Thomson

INVOICE

97095

DATE

3/22/22

PRESENTING CLINICAL SIGNS

History: History of PLE/IBD - is on Pred 2 x weekly Hx hematochezia (+) Clostridium - currently on Metronidazole, Gabapentin, Ursodiol 50mg Sid TLI/B12/Folate - pending
Abnormal PE/Chem/CBC/UA Results: Labs, Rads, previous AUSx2 attached

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 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 3.82 cm. The left kidney measured 3.59 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 right adrenal gland measured 1.47 x 0.28 cm at the caudal and 0.29 cm at the cranial pole. The left adrenal gland measured 1.81 x 0.49 cm at the caudal pole and 0.38 cm at the cranial pole.

Spleen

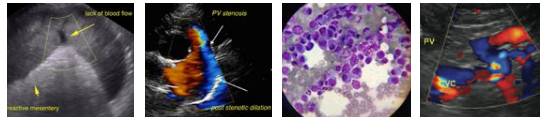
The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The **liver** was otherwise, structurally unremarkable. The gallbladder was over distended with suspended debris. There was some striation and it measured 4.4 x 1.7 cm in long axis. This is consistent with emerging mucocele.

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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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Pancreas

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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.

BREED

Dachshund

ULTRASONOGRAPHIC FINDINGS

SEX

Emerging gallbladder mucocele.

Spayed Female

Unremarkable abdomen otherwise.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

2010

There was no evidence of significant pathology. Treatment for clostridium is indicated such as Enrofloxacin +/- Clindamycin. Diet change may be in this patient's best interest. Ursodiol is recommended as a preventative over the next 6 weeks given the emerging mucocele formation.

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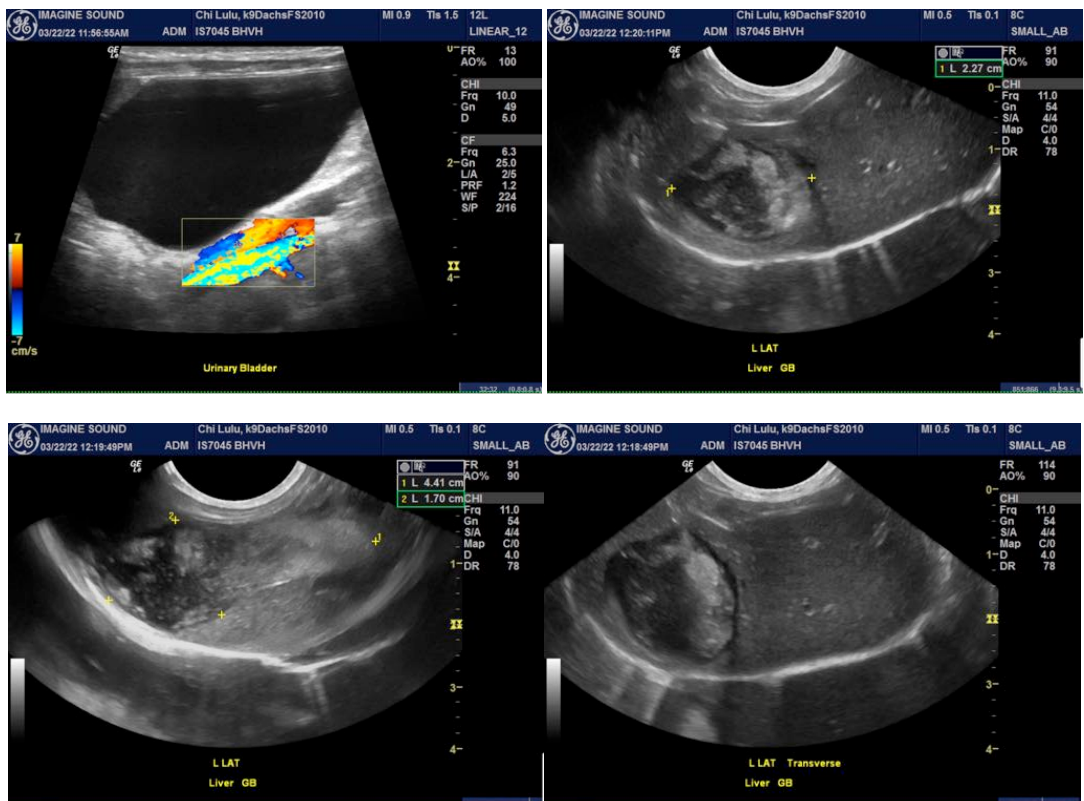
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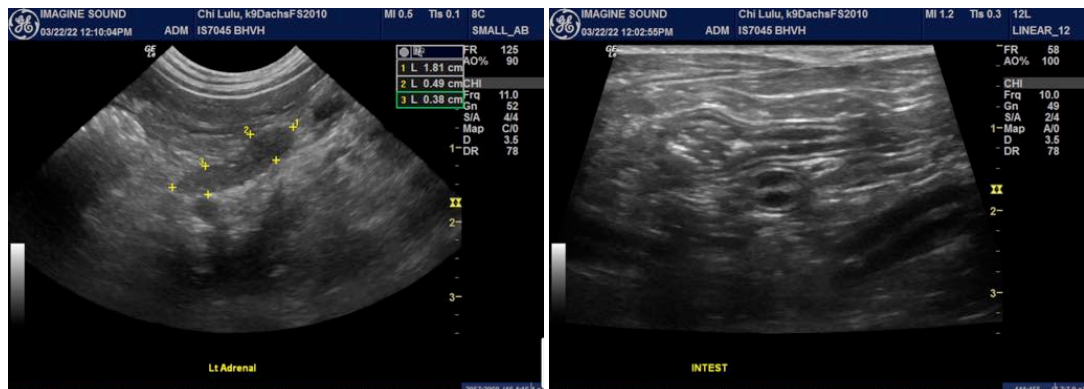
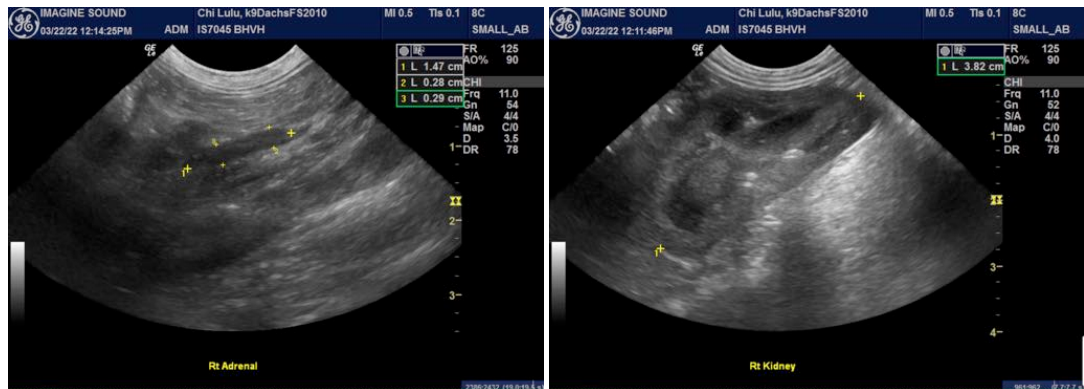
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Eric.Lindquist@SonoPath.com