



PATIENT

Sophie Guerrero

PRESENTING CLINICAL SIGNS

Vomiting, not eating, weight loss. Current meds: Mirtaz, Cerenia, Ursodiol.
Abnormal PE/Chem/CBC/UA Results: WNL

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Mini Schnauzer

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.

SEX

Spayed Female

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 his age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 4.22 cm with slight pyelectasia noted. The right kidney measured 4.38 cm.

AGE

12 Years

Adrenal Glands

WEIGHT

12.3 Pounds

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 1.66 cm x 0.86 cm at the cranial pole and 0.76 cm at the caudal pole. The left adrenal gland measured 1.67 cm x 0.62 cm at the cranial pole and 0.53 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV

Spleen

DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Shari Reffi, CVT

Liver

HOSPITAL NAME

Animal Mansion

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

REFERRING VET

Dr. Bertoldo

Gastrointestinal

INVOICE

36398

Some retention of ingesta was noted in the **stomach**. Variable intestinal thickening noted. Jejunal wall measured up to 0.54 cm in maximum thickness. A regional area of intestinal thickening may be developing into early intestinal lymphoma. Areas of mucosal fogging noted in the small intestine.

Pancreas

DATE

3/23/22

The **pancreas** was enlarged and irregular in the right limb with enhanced surrounding mesentery, suggestive for some level of pancreatitis.



PATIENT

Sophie Guerrero

ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis and mucosal fogging with reactive mesentery
- Concurrent pancreatitis pattern

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Lymphangiectasia, inflammatory bowel and pancreatitis likely. Possibility of emerging intestinal lymphoma. This patient should be monitored carefully for clinical decline. Recheck sonogram in one week. Purina HA or Royal Canin HP diet an Enrofloxacin/Metronidazole combination recommend. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered. GI protectants indicated. Full thickness GI biopsies would be ideal, yet would necessitate surgical approach. Albumin levels should be monitored carefully.

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

12 Years

WEIGHT

12.3 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Animal Mansion

REFERRING VET

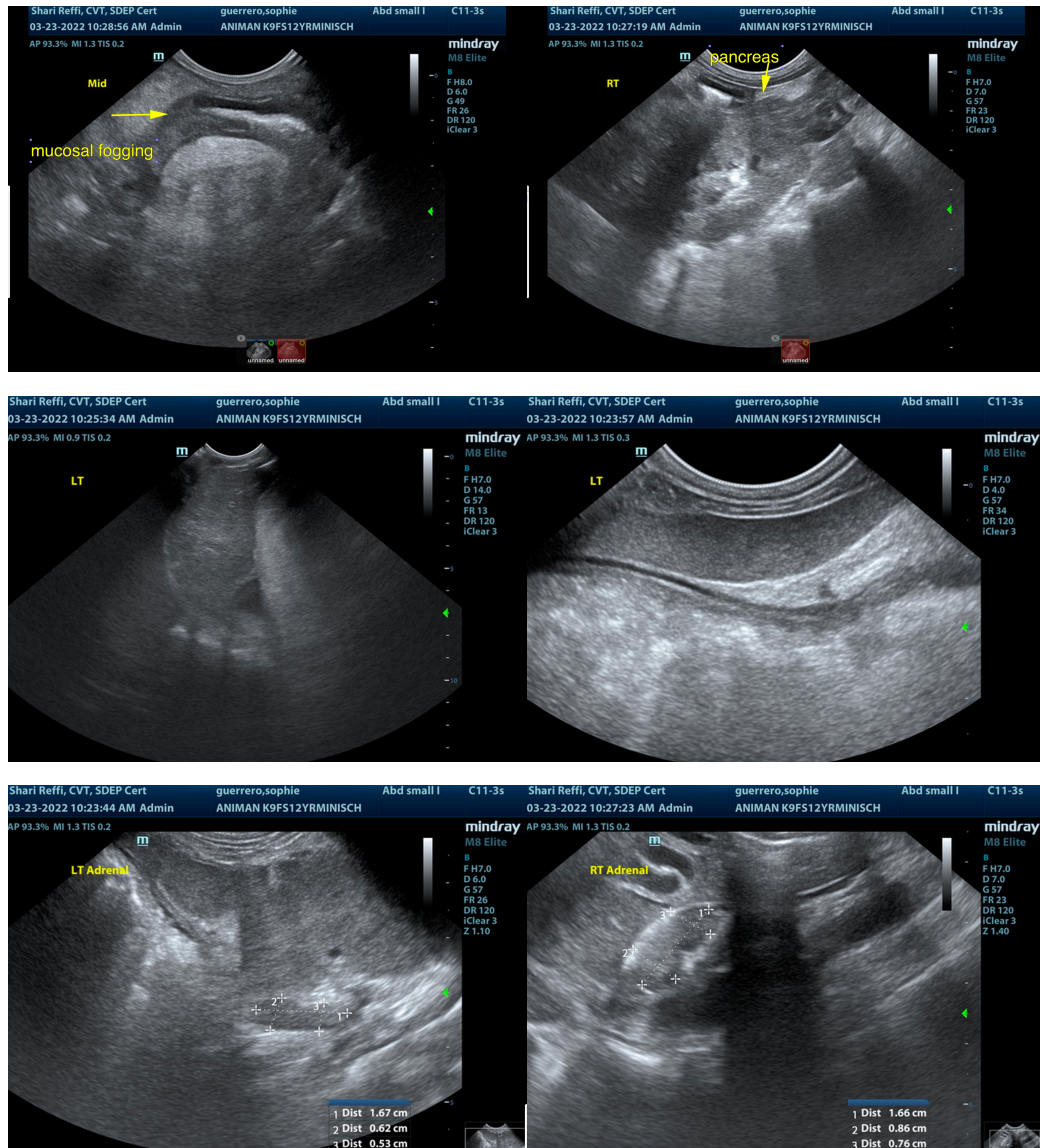
Dr. Bertoldo

INVOICE

36398

DATE

3/23/22





PATIENT

Sophie Guerrero

SPECIES

Canine

BREED

Mini Schnauzer

SEX

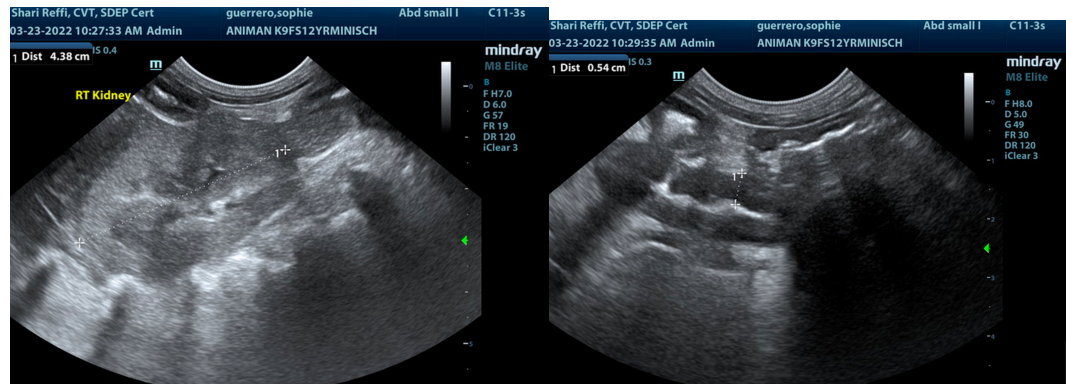
Spayed Female

AGE

12 Years

WEIGHT

12.3 Pounds



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Animal Mansion

REFERRING VET

Dr. Bertoldo

INVOICE

36398

DATE

3/23/22

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