



PATIENT

Cooper Watson

SPECIES

Canine

BREED

Puggle

SEX

Neutered male

AGE

9 years

WEIGHT

16.8 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Biederbeck

HOSPITAL NAME

Lomsnes VH

REFERRING VET

Dr. Biederbeck

INVOICE

97778

DATE

3/24/22

PRESENTING CLINICAL SIGNS

History: U/S for neighbouring clinic. Not eating much, vomiting since ~March 11. Barium study done and concern of narrowing of intestine? Tx with metronidazole and metoclopramide, IV fluids
Abnormal PE/Chem/CBC/UA Results: 39.7 rectal, not painful when u/s
pancreas bloodwork not done

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 kidneys measured 5.0 cm each.

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.

Spleen

The **spleen** revealed subtle hypoechoic nodular changes without disruption of architecture.

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 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 dependent debris 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.



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Gastrointestinal

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Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Some retention of ingesta was noted in the stomach. 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.

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Pancreas

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The **pancreas** revealed mixed, hypochoic parenchymal changes with areas of mineralization. A section of approximately 3.0 x 4.0 cm was noted. The pancreas ill-defined in the left limb.

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ULTRASONOGRAPHIC FINDINGS

AGE

9 years

Left limb pancreatitis, pancreatic necrosis presentation. There is a potential for underlying carcinoma.

Subjectively benign splenic changes.

Mild, heterogenous hepatic changes.

WEIGHT

16.8 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA is recommended. Treatment for pancreatitis is warranted until cytology can reveal further info.

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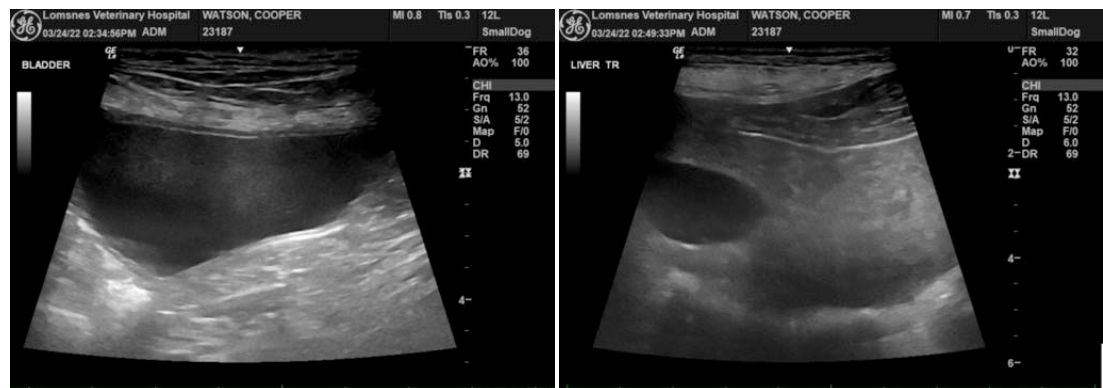
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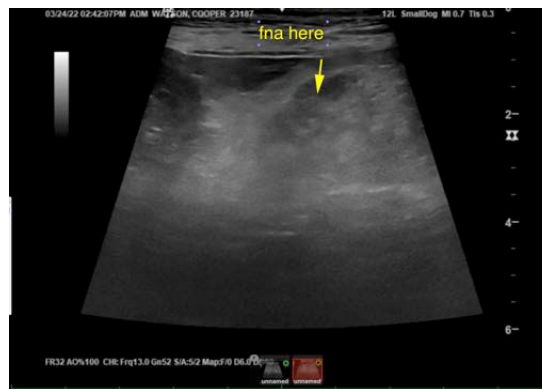
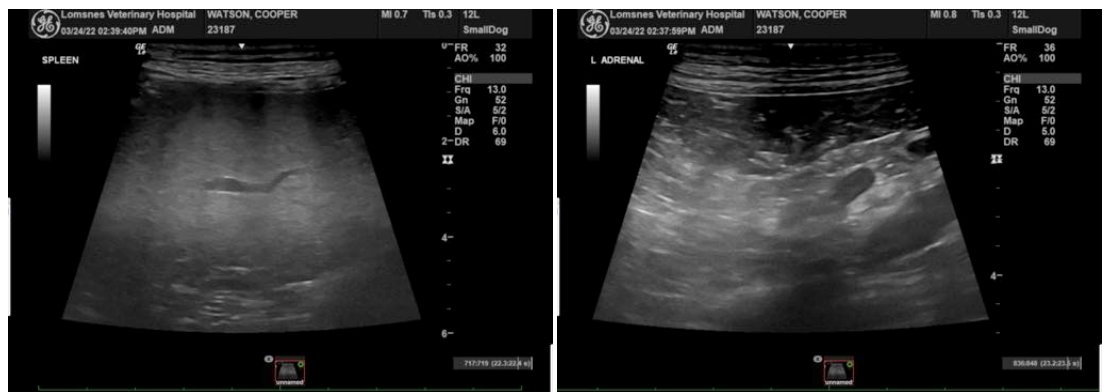
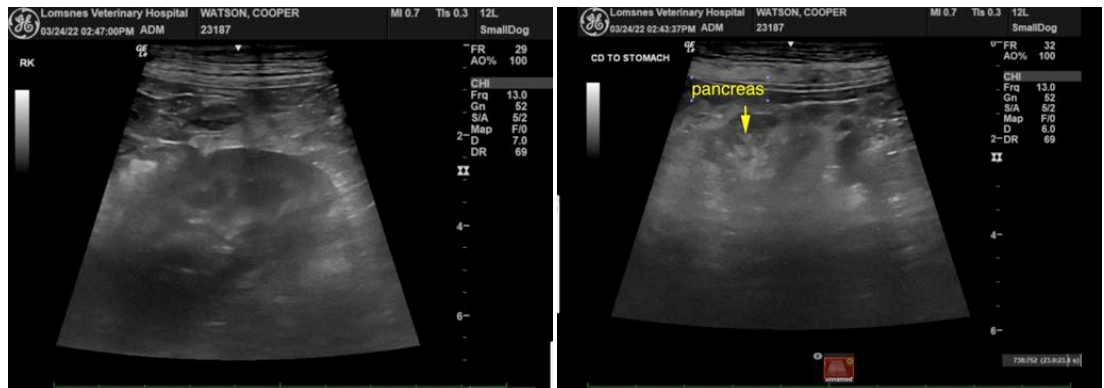
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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