



PATIENT

Belinda Fried

SPECIES

Canine

BREED

Hound X

SEX

Spayed Female

AGE

10 Years

WEIGHT

15.4 kg

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Breymeier

INVOICE

36463

DATE

3/25/22

PRESENTING CLINICAL SIGNS

Presented at our hospital for vomiting, diarrhea, and anorexia today. The patient started with these episodes at the end of January. At that time, her primary care vet ran blood work that was reported to us to be normal. She was started on Hill's ID food at that time and Metronidazole. Her signs resolved until a few weeks ago when she had another episode and was seen at Rossmoyne. A fecal test was run then that was negative but no imaging or bloodwork was done. She improved on Metronidazole again but 4 days ago she began having soft stool and yesterday she started vomiting. There is no known toxin exposure or history of foreign body ingestion. Previous Health Concerns: None
Abnormal PE/Chem/CBC/UA Results: Cbc/chem/lytes – hct 56%, lymphs 0.75, ALP 141, all else wnl
PCV/TS – 65% and 7.6 Right lateral and v/d abdominal radiographs – good serosal detail. Stomach appears to have some gas and fluid but is small in size. No overt foreign body noted in GI tract. Splenomegaly. Gas throughout the intestines but no overt obstructive intestinal pattern. Urinary bladder small and intact. No noted mass effect. Subjective loss of detail/ground glass appearance in right cranial abdominal quadrant.

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 were 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 5.89 cm. The left kidney measured 5.33 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 2.15 cm x 0.50 cm at the cranial pole and 0.44 cm at the caudal pole. The left adrenal gland measured 2.32 cm x 0.46 cm at the cranial pole and 0.66 cm at the caudal pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen was folded upon itself cranially. 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 submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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Gastrointestinal

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The **stomach** was empty. The duodenum presented luminal fluid. The distal small intestine was unremarkable.

SPECIES

Pancreas

Canine

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

Hound X

ULTRASONOGRAPHIC FINDINGS

- Duodenitis pattern

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

24-hour NPO, IV fluid support and GI protectants all indicated. Recheck sonogram if clinical signs persist. Underlying food intolerance, occult parasitism all possible. The pathology appeared to be localized primarily to the duodenum.

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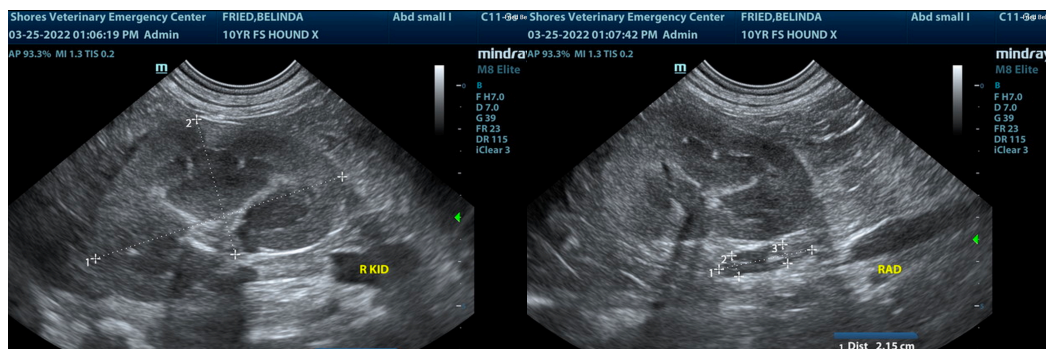
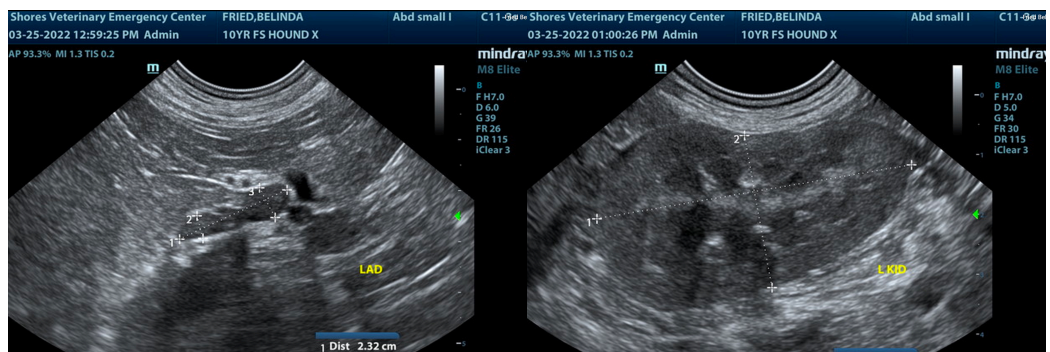
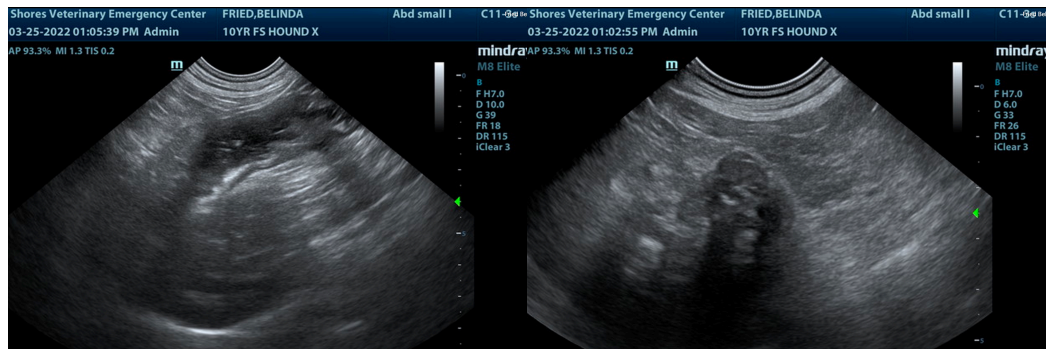
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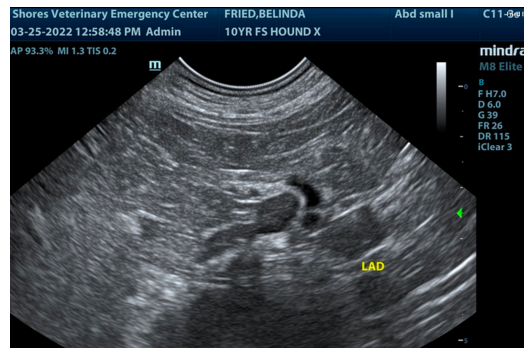
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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