

**DATE**

3/25/22

PRESENTING CLINICAL SIGNS**PATIENT**

Dixie Stansbury

Dixie presented on 3/9/2022 for yelping in pain when moving and being unresponsive. When Pet came she was shaking her head, having trouble getting up, not eating or drinking and panting a lot. All these signs started 4 days prior when Dixie fell out of the bed. At that time the owner gave 1 baby aspirin which did not seem to help. Dixie has a bilateral stifle thickening and few new masses. Dixie had a CBC/Chemistry, UA+T4 preformed followed by surgery for excisional biopsy of the 3 masses. Additionally, while anesthetized radiographs of Dixie's spine, hips and stifles were obtained.

SPECIES

Canine

Current Medications: Starting 3/9/2022 Dasuquin Advanced and 300mg of Gabapentin, Starting 3/14/2022 Galliprant 60mg: 1 by mouth every 24 hours., Gabapentin 600mg: 1 pill by mouth every 12 hours. 3/17/2022 Gabapentin decreased to 200mg by mouth every 12 hours.

BREED

Boxer

Lab Results: Amylase 1838 U/L (RR 290-1125), Precision PSL 536 U/L (RR 24-140). Radiographs: Diffuse thoracolumbar discospondylosis with bridging. Bilateral hip dysplasia and stifle effusion with increase opacity of the patellar fat pad. Osteophyte seen of the right stifle.

SEX

Spayed Female

Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

AGE

6/3/14

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**WEIGHT**

69.5 lbs

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.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS

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 6.71 cm. The left kidney measured 7.13 cm.

HOSPITAL NAME

Bel Air VH

Adrenal Glands

The **left adrenal gland** was 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 3.59 cm x 0.57 cm at the caudal pole and 0.63 cm at the cranial pole.

REFERRING VET

Dr. Young

The region of the **right adrenal gland** revealed no evident pathology.

INVOICE

14517

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 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.

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

Pancreas

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.

Free Abdomen

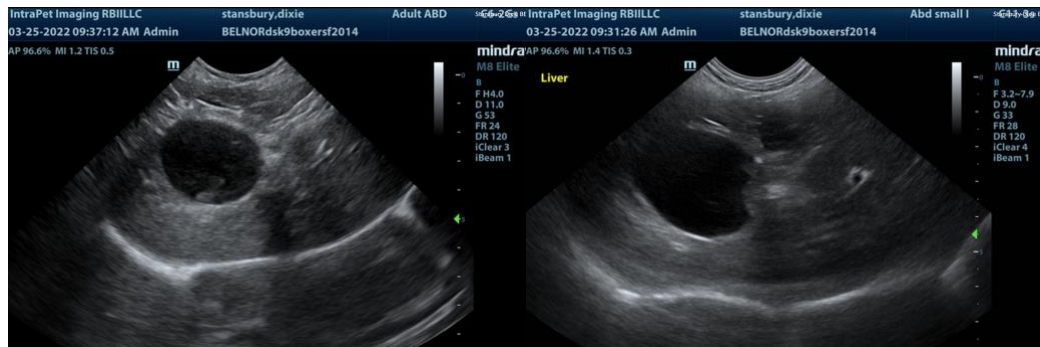
A mesenteric root **lymph node** (2.52 cm x 0.58 cm) presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia.

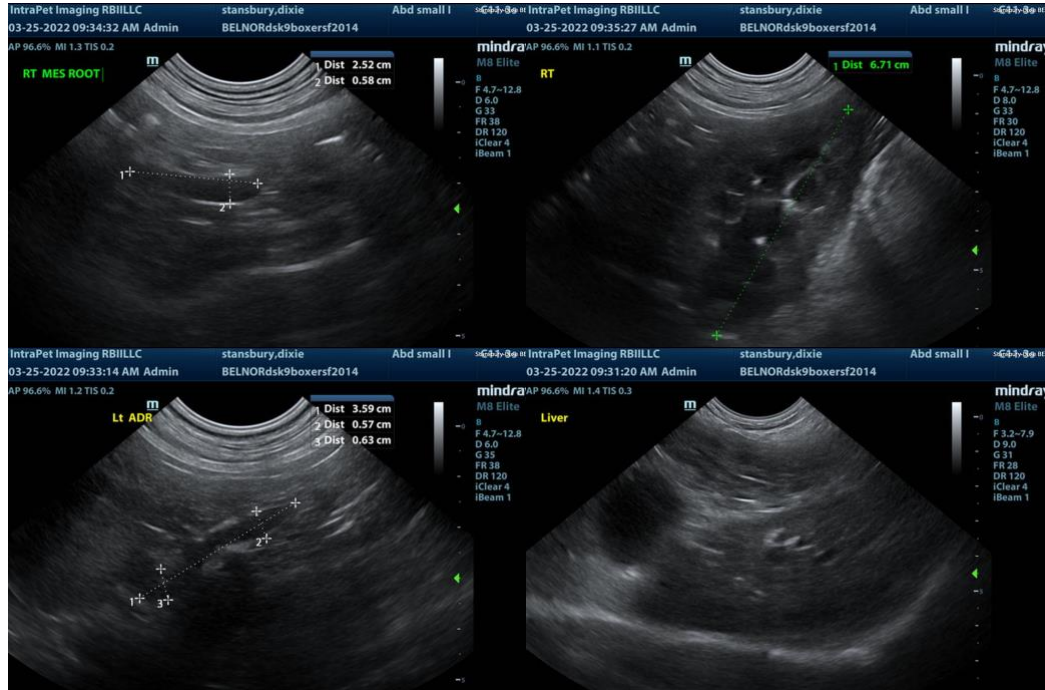
ULTRASONOGRAPHIC FINDINGS

- Structurally normal abdomen
- Reactive mesenteric root lymph node

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of visceral disease to be directly influencing the clinical signs in this patient.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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