

**DATE PRESENTING CLINICAL SIGNS**

3/3/22

History of chronic skin allergies. Presented 2/28 with allergies flaring up again, severe alopecia, and generalized pyoderma, however had also lost 7lbs rapidly, BCS 3/9. Radiographs showed poor abdominal contrast but no obvious masses or FB present. Bloodwork returned with NSF today. Stool has been normal consistency according to O.

PATIENT

Bruno Clements

SPECIES

Canine

BREED

French Bulldog

SEX

Neutered Male

AGE

7/8/18

WEIGHT

19.5 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Rachel Brilhart RDMS

HOSPITAL NAME

Healing Paws VWC

REFERRING VET

Dr. Preston

INVOICE

35890

Current Medications: Douxo Chlorhexidine Mousse- massage 3-4 pumps into entire body avoiding eyes and mouth once a day. No other meds currently.

Lab Results: Trace protein in urine and pH 9, otherwise NSF.

Radiographs: poor abdominal contrast but no obvious masses or FB present. Excessive GI gas.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

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 4.78 cm. The left kidney measured 5.28 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 left adrenal gland measured 2.25 cm x 0.48 cm at the caudal pole and 0.47 cm at the cranial pole. The right adrenal gland measured 2.05 cm x 0.63 cm at the caudal pole and 0.78 cm at the cranial pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen was folded upon itself caudally. 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** was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

Gastrointestinal

The **gastric** wall was slightly thickened at 0.8 cm. Some luminal ingesta was present. The small intestine and colon were unremarkable. Intestinal wall thickness measured up to 0.38 cm.

Pancreas

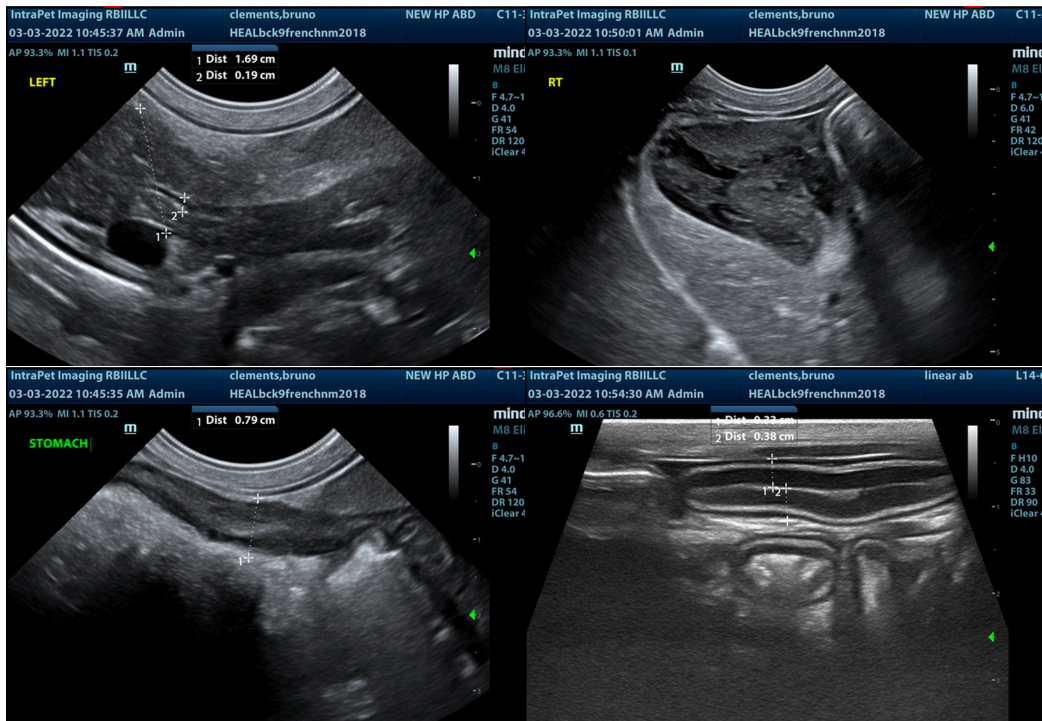
The **pancreas** was prominent and hypoechoic with undulating contour measuring up to 1.69 cm in the right base.

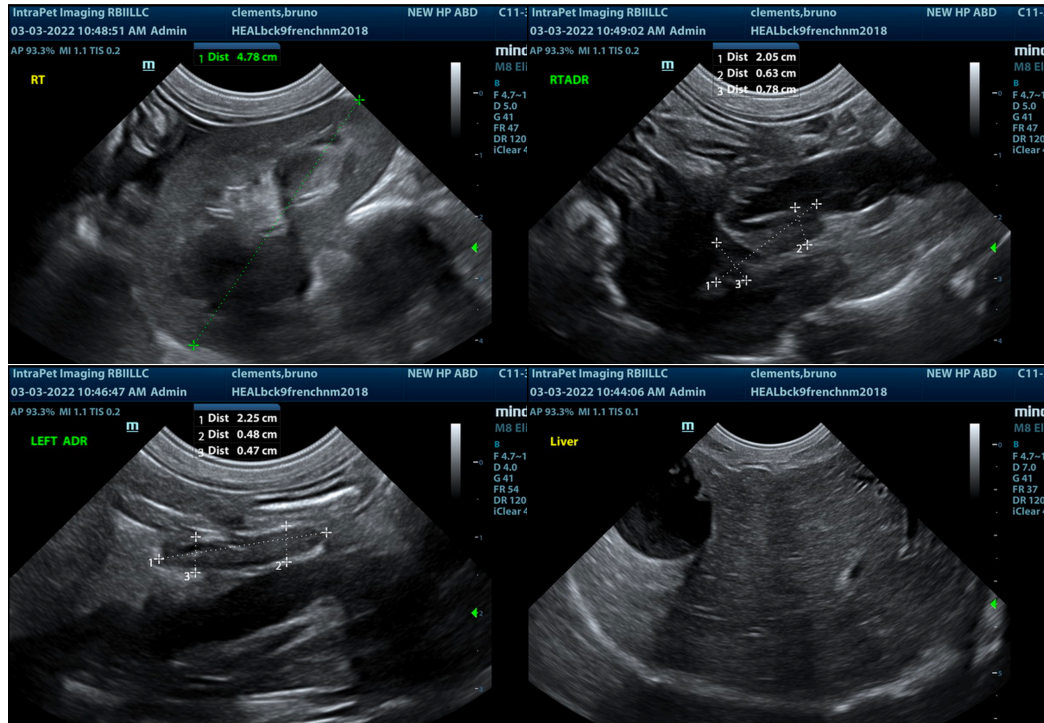
ULTRASONOGRAPHIC FINDINGS

- Minor gastric thickening and prominent pancreas

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of neoplasia or direct cause of weight loss. 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. Globulin elevation may be owing to the chronic skin issues reported.





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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