



PATIENT

Jessie O'Byrne
Stretton

SPECIES

Canine

BREED

Mixed

SEX

Female

AGE

13yr

WEIGHT

48.2

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Haghighat

HOSPITAL NAME

Beaches Fallingbrook
Veterinary Clinic

REFERRING VET

Dr. Haghighat

INVOICE

13127ag

DATE

03/06/2023

PRESENTING CLINICAL SIGNS

Jessie was presented initially for hematochezia in mid Feb,2023, which was resolved with oral anti bacterial medication and probiotic. She was presented again 2 weeks later for vomiting and diarrhea that seems to be recurrent right after the medication was finished. Her blood result on Feb, 28, 2023 did not reveal any significant changes apart from a mild hypoalbuminemia that worsened since November, 2022. On the physical exam, no specific changes were noted and she was comfortable on abdominal palpation.

***17 still images and 6 videos submitted for review.

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 left kidney measured 5.63 cm in length. The right kidney measured 6.0 cm in length.

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 0.74 cm. The right adrenal gland measured 0.71 cm caudal pole width by 1.2 cm cranial pole width.

Spleen

The spleen was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active 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



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Examination of the gastrointestinal tract revealed variable jejunal thickening with loss of mural detail and regional enhanced mesentery consistent with inflammatory bowel or intestinal neoplasia.

Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

- Infiltrative intestinal jejunal pattern

SEX

Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory surgery with resection and anastomosis is recommended. Focal intestinal lymphoma vs complicated inflammatory bowel suspected. Carcinoma is less likely. No overt evidence of metastatic disease present in the images provided.

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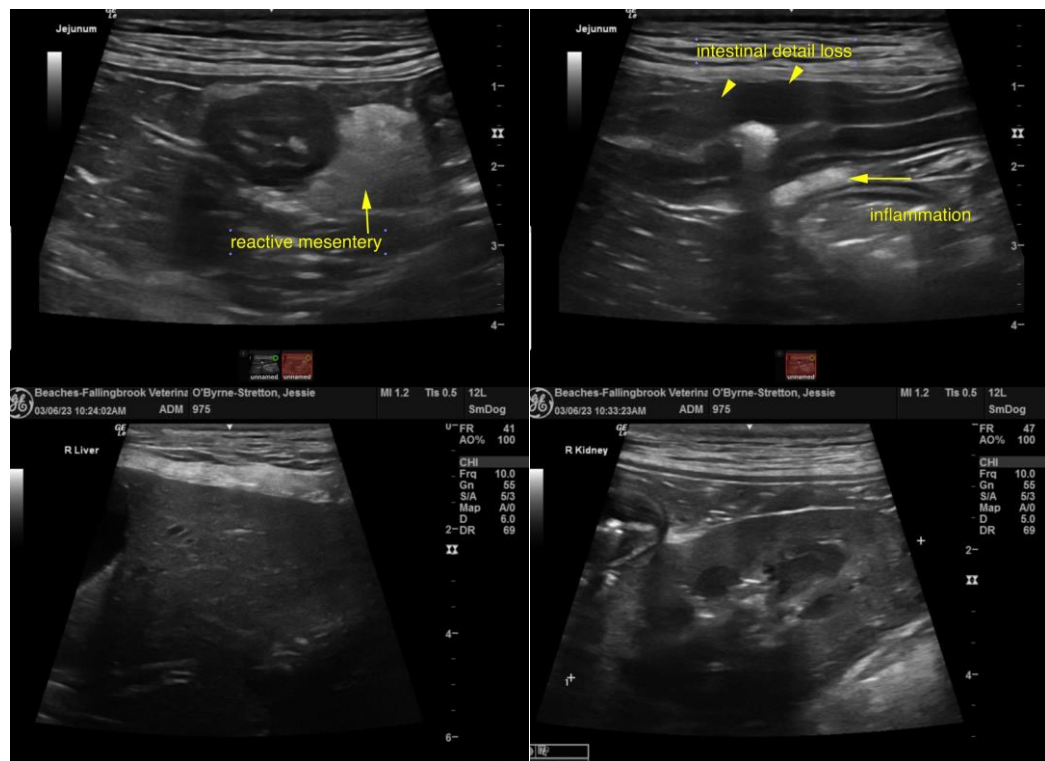
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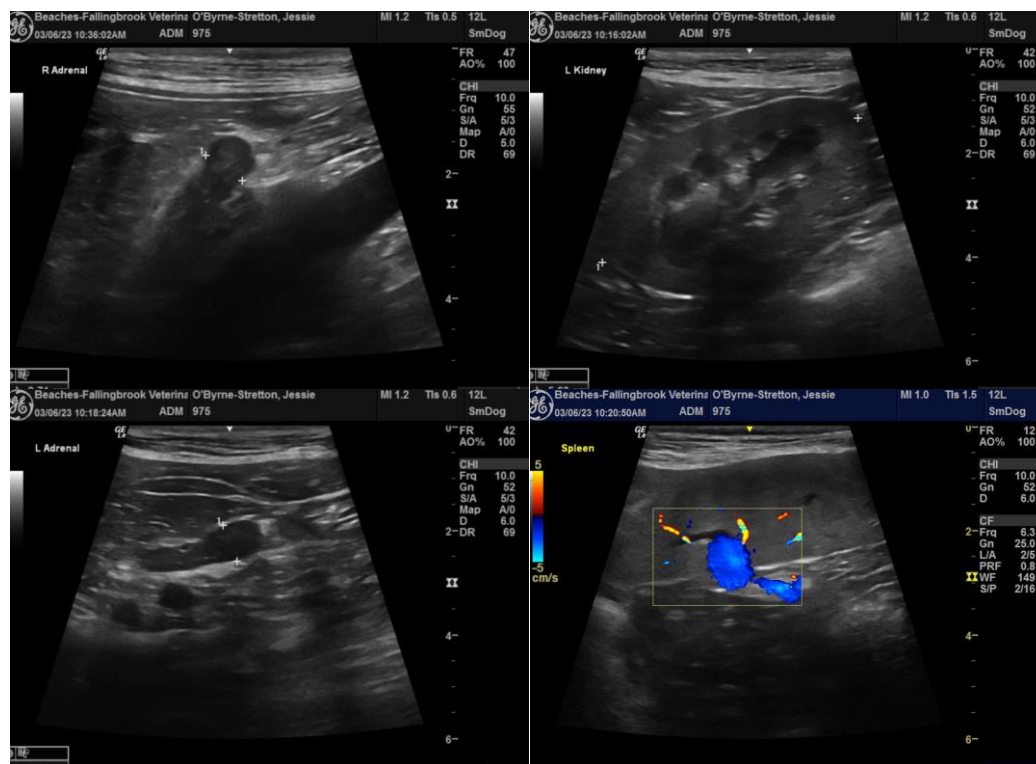
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

IMAGING PERFORMED BY

Dr. Haghighat

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