



PATIENT PRESENTING CLINICAL SIGNS

Mia Burns
History: Patient has lost 10 lbs in 2 months, no eating well, drinking well
Abnormal PE/Chem/CBC/UA Results: PE: Leaking urine and not eating CHEM: Creat 1.9 mg/dL, ALKP 10 u/L, T.bili 1.1 mg/dL CBC: WNL SDMA: WNL T4: 0.9 mg/dL (euthyroid sick?) in January and ALT at that time was 145 U/L but today it is normal Rads: mild loss of detail in cranial abdomen with slight abnormal gastric axis, no evidence of mass in chest or abdomen U/A: USG 1.012, protein-trace, blood 50, no bacteria present

SPECIES

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

German Shshepherd Mix

Urinary System

SEX

Spayed Female

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.

AGE

12 years

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 both measured 6.0 cm.

WEIGHT

52 lbs

Adrenal Glands

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

The right **adrenal gland** was slightly heterogenous with hyperechoic expansive cranial pole. The right adrenal measured 0.8 cm. The left adrenal gland was uniform and measured 0.5 cm.

IMAGING PERFORMED BY

Dr. Griffin

Spleen

The **spleen** was folded upon itself caudally. This is a positional variant. The parenchyma was fairly uniform with multi-focal, hypoechoic nodular changes that were non-disruptive.

HOSPITAL NAME

Northside VC

Liver

REFERRING VET

Dr. Griffin

The **liver** revealed multi-focal, biliary calculi and increased portal markings that was non-obstructive at the time of the sonogram. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.

INVOICE

96608

Gastrointestinal

The **stomach** presented a moderate amount of luminal fluid. Normal curvilinear mural patterns were noted. There was no evidence of foreign body. The small intestines and colon were unremarkable.

DATE

3/7/22



PATIENT

Pancreas

Mia Burns

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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Cholangiohepatitis liver pattern with biliary calculi, non-obstructive at the time of the sonogram.

German Shshepherd Mix

Gastritis pattern.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

Empirical treatment with Ursodiol therapy is warranted as well as treatment for gastritis. Bilirubin and ALKP values should be monitored carefully. Gastrointestinal protectant protocol is recommended for 4-6 weeks along with Ursodiol therapy. If the patient is stable then a recheck sonogram is recommended at that time. The cause of weight loss is unclear and not evident in the abdomen. Given the nodular splenic changes FNA could be considered from a screening standpoint; however, it appears subjectively benign. No organs present neoplastic criteria.

AGE

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WEIGHT

52 lbs

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.

INTERPRETED BY

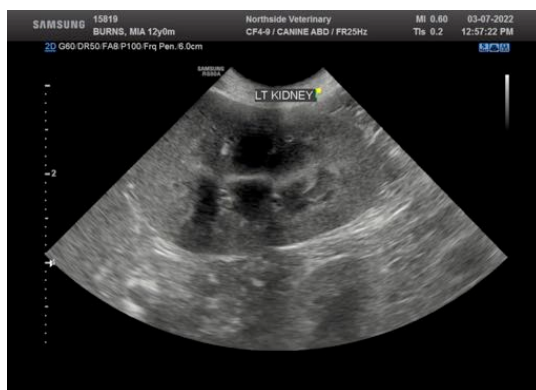
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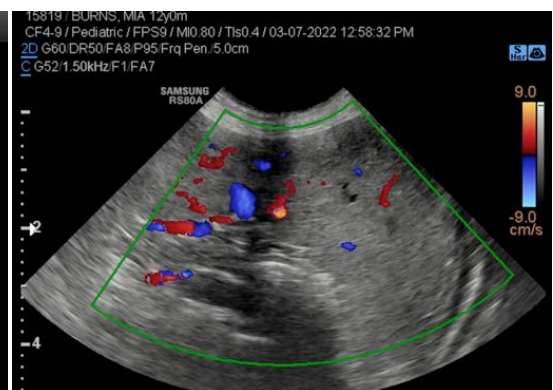
HOSPITAL NAME

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DATE

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PATIENT

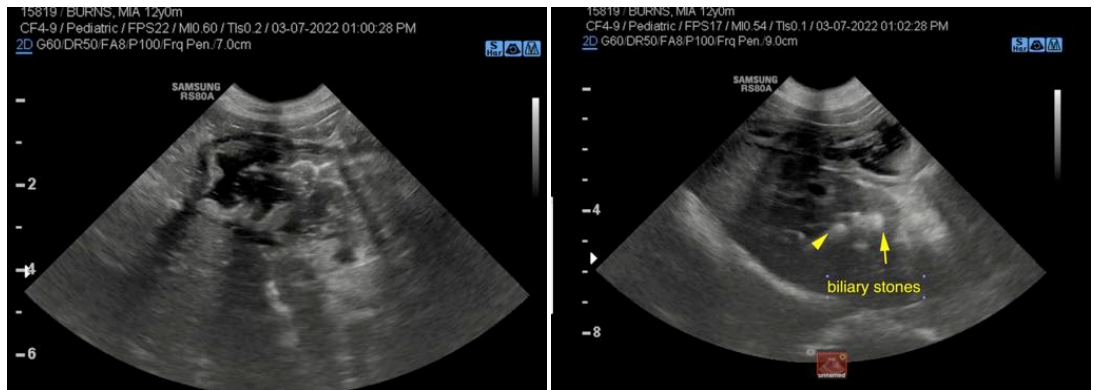
Mia Burns

SPECIES

Canine

BREED

German Shshepherd Mix



SEX

Spayed Female

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.

AGE

12 years

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.

WEIGHT

52 lbs

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