



PATIENT

PRESENTING CLINICAL SIGNS

Sophie McPherson

History: Acute onset of not eating, standing and staring into space since Saturday afternoon. Diarrhea? Treated with IV Saline 0.9% 2xs maintenance yesterday.

SPECIES

Abnormal PE/Chem/CBC/UA Results: Crusty nose. Mild dehydration. OA pain in hips and stifles. CBC = hemoconcentration. Chemistry = inc ALP, AML, BUN, glucose; dec Sodium, Globulin UA = okay Xray abdomen R lateral and VD = gas filled colon, OA hips Quick look U/S = bowel full of liquid material, no blockages noted. Resting cortisol level high - 7.8.

Canine

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Boxer

Urinary System

SEX

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.

Spayed Female

AGE

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 5.0 cm.

6 ½ years

WEIGHT

53 lbs

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Spleen

Dr. Beard

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 was noted.

HOSPITAL NAME

West Prince AH

REFERRING VET

Dr. Beard

Liver

INVOICE

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 revealed a minor amount of debris, yet was not pathological.

96594

DATE

3/7/22



PATIENT

Gastrointestinal

Sophie McPherson

The **stomach** was severely over distended with chyme and dilated upper small intestine followed by empty small intestine. The distal small intestine revealed a shadowing, fabric type of foreign body. Soft stool was noted in the colon. Reactive mesentery was noted associated with the upper GI tract.

SPECIES

Canine

Pancreas

BREED

Boxer

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.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

Gastrointestinal obstruction with jejunal foreign body and variable intestinal thickening. Underlying inflammatory disease is likely.

AGE

6 ½ years

Emerging peritonitis.

WEIGHT

53 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Immediate exploratory surgery is warranted with expectations towards enterotomy and GI biopsies. Abdominal lavage is recommended given the trace amounts of free fluid.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

According to SonoPath research presented at ECVIM 2016 (Stockholm, Sweden), Advances in Small Animal Medicine and Surgery (May 2017), and EVDI 2017 (Verona, Italy), concurrent underlying chronic inflammatory neoplastic intestinal disease can often reside in PICA patients. Therefore, surgical biopsies are essential in this case regardless of the exploratory findings.

IMAGING PERFORMED BY

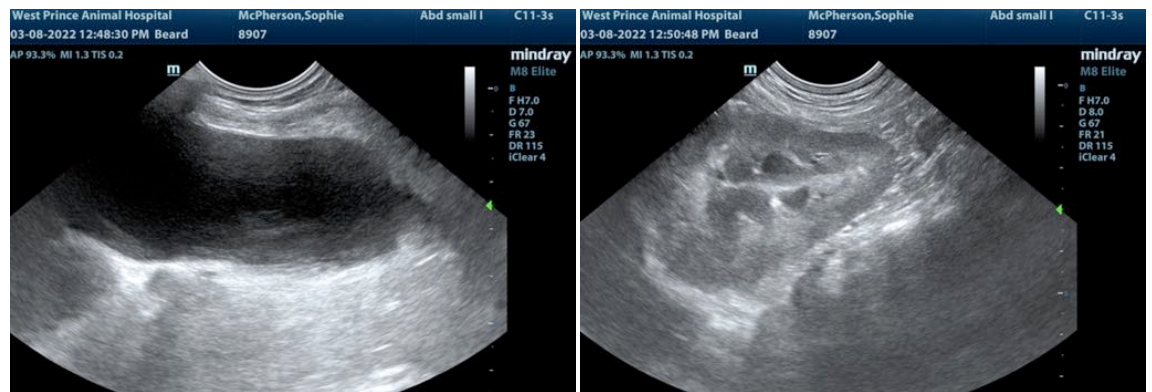
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SPECIES

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Boxer

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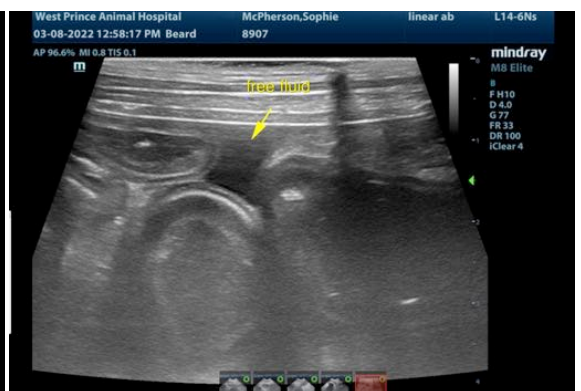
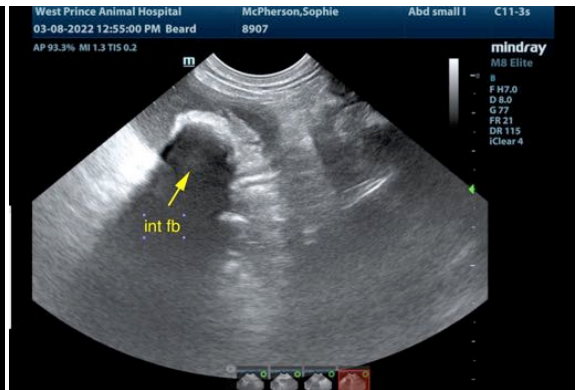
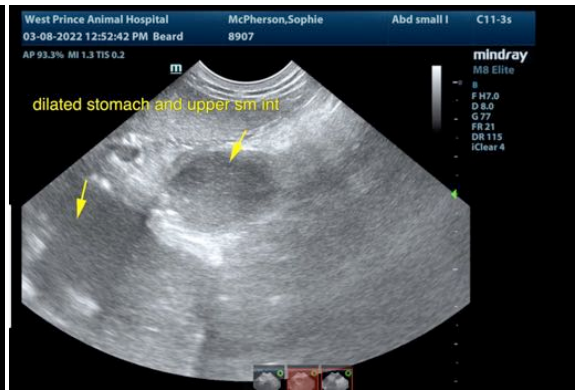
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PATIENT

Sophie McPherson

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.

SPECIES

Canine

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.

BREED

Boxer

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

SEX

Spayed Female

AGE

6 ½ years

WEIGHT

53 lbs

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**IMAGING
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