



PATIENT

Zeus Dalstolfo

SPECIES

Canine

BREED

Pit Bull Mix

PRESENTING CLINICAL SIGNS

History: 9yo MN Pit mix that presented on 4/4/23 for not moving well and not acting himself. Pt was still eating, but is a picky eater normally. On physical exam, pt seemed tense in his abdomen and was QAR. Bloodwork was submitted and revealed dehydration and elevated PSL (669). Pt returned the following day for subcutaneous fluids, an injection of cerenia and simbadol, as well as being sent home with oral cerenia and gabapentin. He had still not improved and was eating less the following day (4/6), so was hospitalized on IV fluids, cerenia, metronidazole. He improved and was sent home after several hours. Since then, his appetite has continued to dwindle until he stopped eating two days ago and he is very weak. On physical exam, he is dehydrated and tense on abdominal palpation. Abdominal ultrasound prior to hospitalization to confirm pancreatitis diagnosis vs other cause for inappetence and weakness.

SEX

Neutered male

AGE

9 years

WEIGHT

58.2 lbs

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 was 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 7.0 cm. The left kidney measured 6.76 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

The regions of the **adrenal glands** were imaged with no evidence of pathology.

IMAGING PERFORMED BY

Dr. Harris

Spleen

HOSPITAL NAME

TotalBond VH

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.

REFERRING VET

Dr. Harris

Liver

INVOICE

43817

DATE

4/12/23

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.



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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. Minor gas accumulation was noted in the stomach obscuring some visibility. Transit of chyme appeared to be normal in the small intestine. 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.

ULTRASONOGRAPHIC FINDINGS

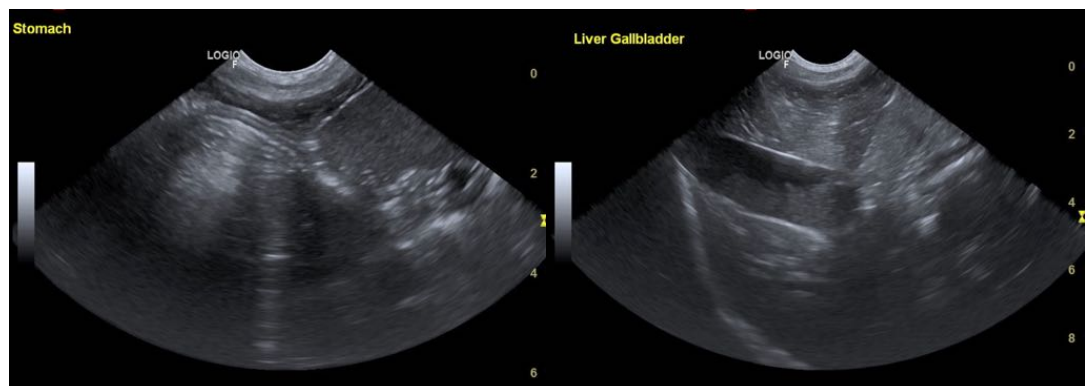
Structurally unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of visceral pathology related to the clinical signs.

CT Screen Autotext

There is no evidence of pathology. If suspicion of pathology in the CNS, thorax, or orthopedic regions is present, then CT of the region would be indicated.





PATIENT

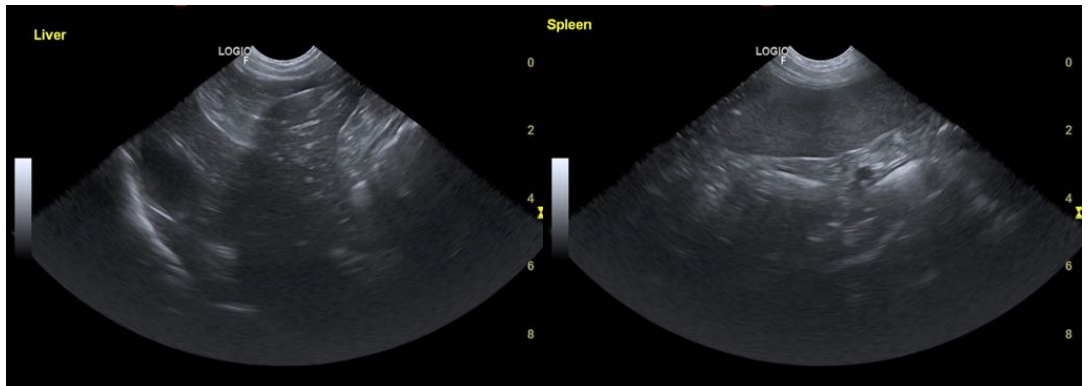
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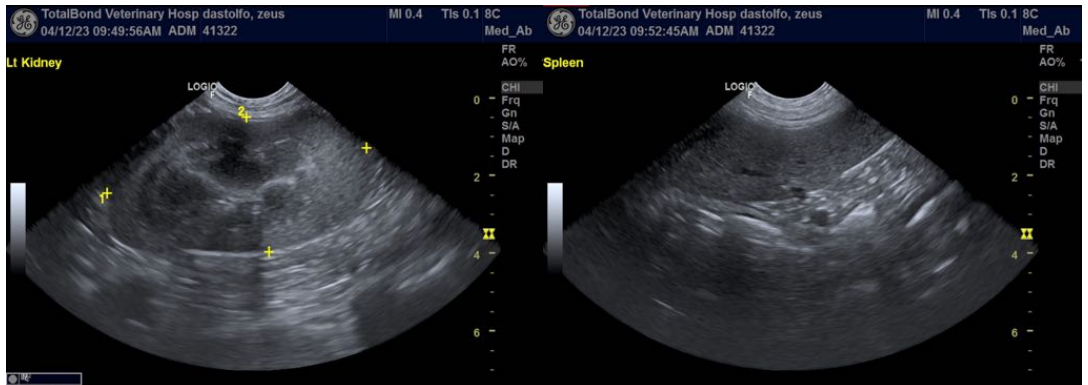
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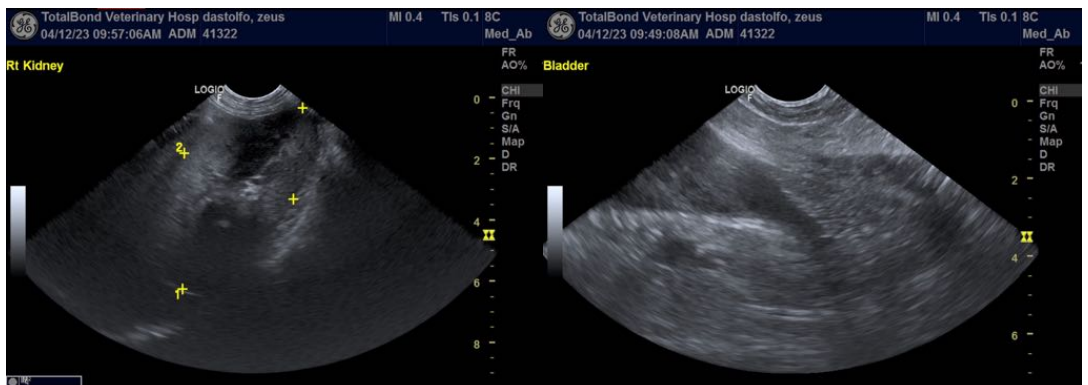
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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