



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Leo Elsier
SPECIES Anorexia and intermit vomiting for approx 1 week. Prev hx of decreased appetite. Treated on 3/16 for vomiting with supportive care. At that time AST: 105, ALT: 232 otherwise WNL. Approx 3lbs wt loss. T=103.7 today. Did get into the trash which had tampons last Friday

Canine Abnormal PE/Chem/CBC/UA Results: ALK: <10, ALT: 75, RBC: 6.58, HCT: 41.4, WBC: 16.8,

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Cocker Spaniel **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 were noted. Ureteral papillae were normal.

Neutered Male

AGE The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.78 cm. The right kidney measured 4.24 cm.

10 Years

WEIGHT

22 Pounds

INTERPRETED BY Adrenal Glands

Eric Lindquist, DMV 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 2.13 cm x 0.78 cm. The right kidney measured 1.7 cm x 0.76 cm.

DABVP, Cert. IVUSS

IMAGING PERFORMED BY Spleen

Dr. A Rodriguez 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 were noted.

HOSPITAL NAME

Foxfield Vet Services

REFERRING VET Liver

Dr. A Rodriguez 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.

INVOICE

46639

DATE

4/13/23

Gastrointestinal

Stasis was present from the **stomach** through the duodenum. A 3.0 cm intestinal foreign body was noted with edematous wall. Chronic thickening of the intestine noted with reactive surrounding mesentery. Regional peritonitis present without free fluid.



PATIENT

Pancreas

Leo Elsier

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

- Obstructive 3.0 cm foreign body with chronic gastrointestinal thickening
- Regional reactive mesentery/early peritonitis

Cocker Spaniel

SEX

I strongly recommend enterotomy with GI biopsies as soon as possible. Broad-spectrum antibiotics and plasma expanders indicated as well to stabilize the patient. Underlying chronic GI disease likely. Hepatic biopsy warranted as well, given the liver enzyme elevations, yet likely reactive.

Neutered Male

AGE

10 Years

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.

WEIGHT

22 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. A Rodriguez

HOSPITAL NAME

Foxfield Vet Services

REFERRING VET

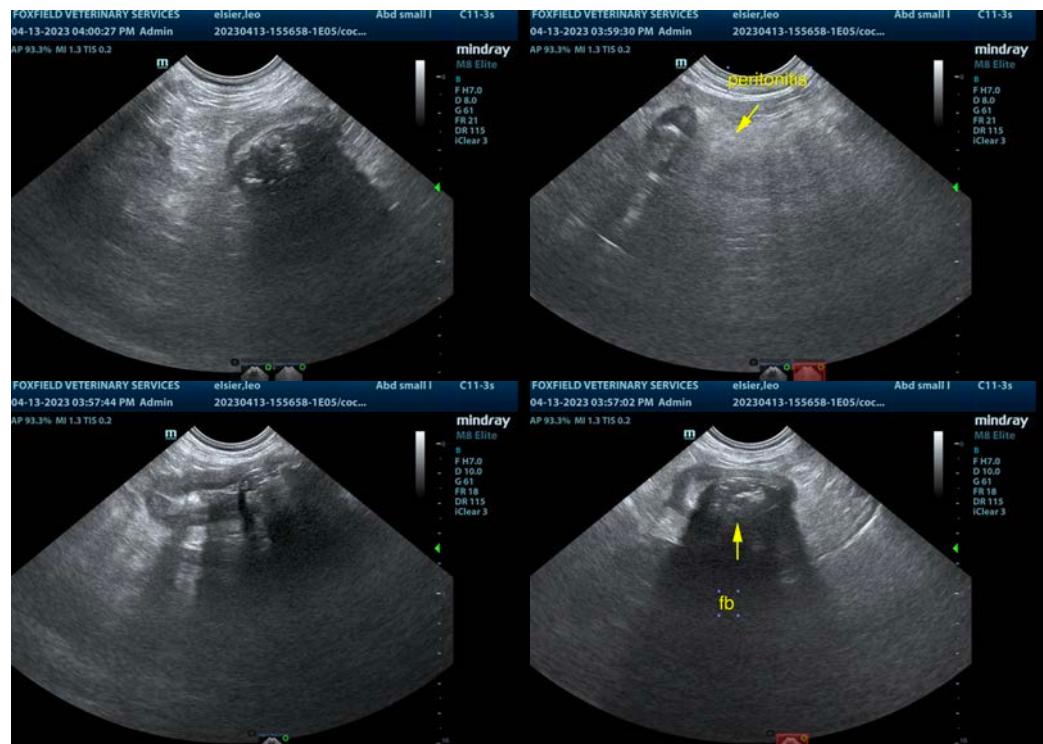
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PATIENT

Leo Elsier

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Neutered Male

AGE

10 Years

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22 Pounds

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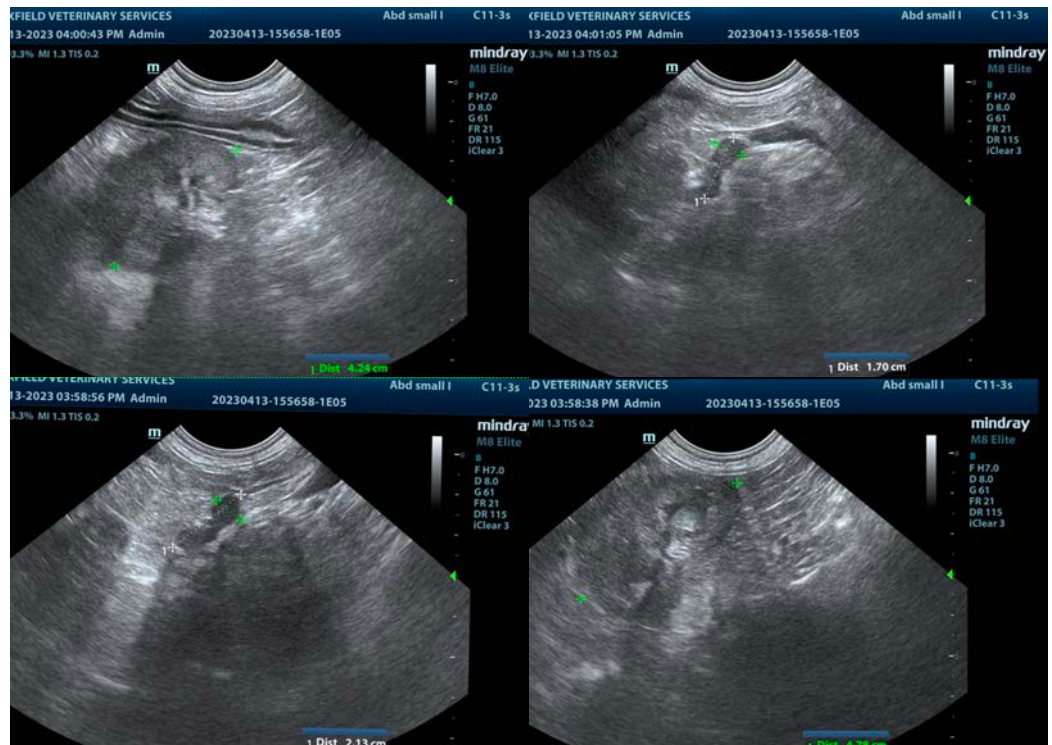
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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