



PATIENT

No Name Jegge

SPECIES

Canine

BREED

Pomeranian

SEX

Female

AGE

2 Months

WEIGHT

2 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Mychajlonka

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr. Mychajlonka

INVOICE

46705

DATE

4/14/23

PRESENTING CLINICAL SIGNS

Just acquired on Tuesday. Presented for wellness exam Wednesday. Had not eaten anything for the owner and vomited 10-15 times overnight. Significant liquid green diarrhea. BAR at that time. Cerenia and metro given. Vomited through cerenia overnight. First rads taken Thursday. QAR at that time and visibly nauseous. Repeat rads taken this morning. Did eat small amount of A/D overnight. Fasted 6 hours before rads this morning. No vomiting overnight. Positive for giardia. Negative parvo test

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 right kidney measured 2.7 cm.

Adrenal Glands

Spleen

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.

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

The **stomach** was fluid filled. The pylorus was patent. The small intestine revealed multiple echogenic structures, presumed to be likely parasites. Hyperperistalsis noted in the small intestine. The colon was dilated with fluid and soft stool.

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.



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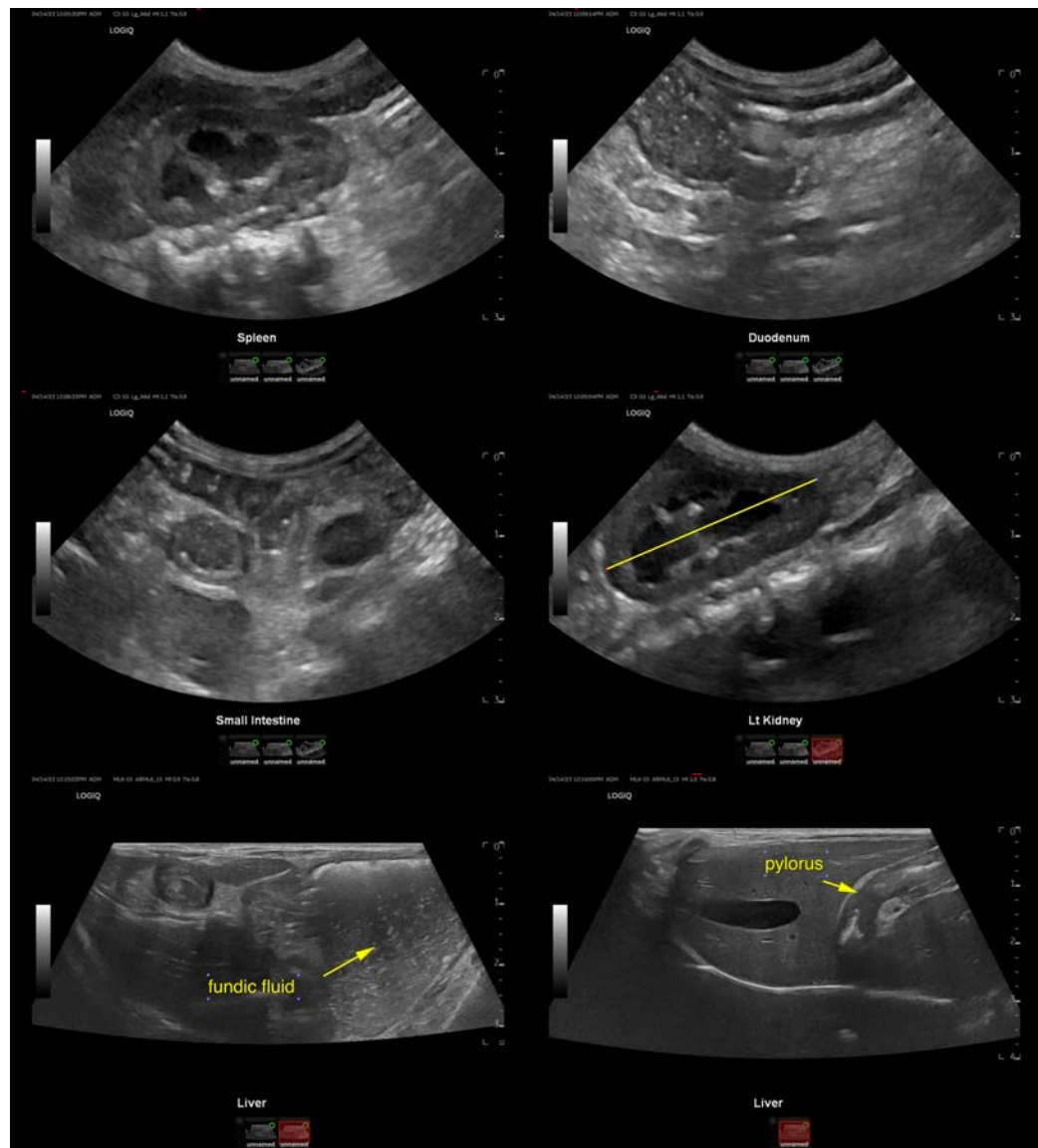
4/14/23

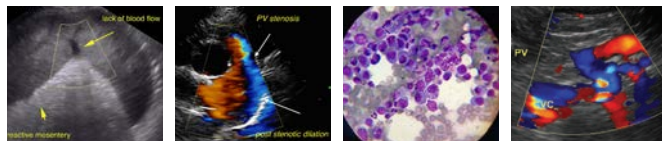
ULTRASONOGRAPHIC FINDINGS

- Gastrointestinal stasis/non-specific gastroenteritis colitis, possible worm burden

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Fecal test, anti-parasitic protocol, supportive care, and reassessment of the clinical status recommended.





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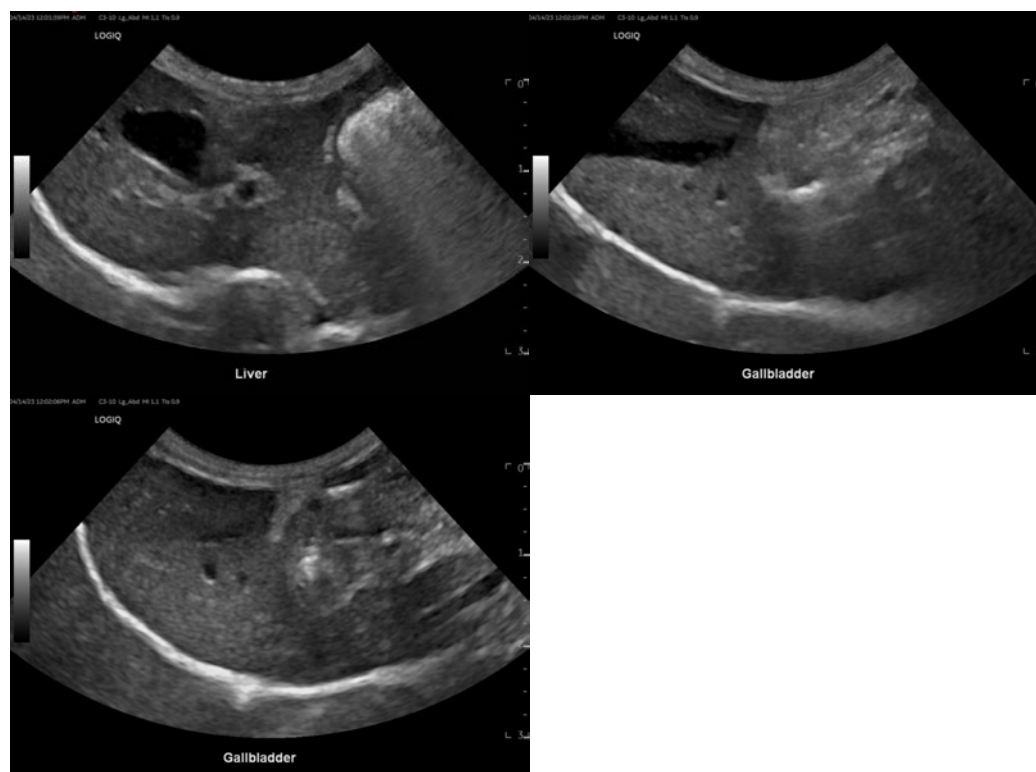
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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