

**DATE**

4/25/22

**PRESENTING CLINICAL SIGNS**

For last >6 mo, she has had frequent episodes of severe diarrhea. It helps temporarily to give Metronidazole but it soon returns. She is on Royal Canine GI Low Fat dry and canned, Denamarin, Cosequin, CBC oil bid, and probiotics. She was on Galliprant but we stopped that in case it was the cause. We tried Metacam briefly but have now stopped that also.

**PATIENT**

Dottie Ramon

The diarrhea is very runny, she can't hold it, and does have accidents in the house. Sometimes with mucous, or spots of blood. O said that years ago she had an ultrasound and there may have been a tumor on either spleen or liver but nothing was done about it.

**SPECIES**

Canine

Current Medications: Metronidazole 250mg 1/4 tab bid for 8 days- multiple times. Denamarin, Cosequin, CBD oil, Probiotics.

**BREED**

Poodle

Lab Results: Full bw CBC/IOF done 3/28/22 was normal except high ALT- 148.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

**SEX**

Spayed Female

**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.

**AGE**

6/20/05

The right kidney revealed moderate dystrophic changes with pyelectasia and echogenic debris. The right kidney revealed cortical infarcts and remodeling. The right kidney measured 3.13 cm in length. The pyelectasia measured 0.81 x 1.0 cm. The left kidney revealed slight pyelectasia that measured 0.16 with mild degenerative changes. The left kidney measured 3.66 cm in length with pinpoint mineralization and moderate remodeling.

**WEIGHT**

8.6 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Adrenal Glands**

Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The left adrenal gland measured 1.5 x 0.68 cm at the caudal pole and 0.66 cm at the cranial pole. The right adrenal gland measured 1.87 x 0.71 cm at the caudal pole and 0.75 cm at the cranial pole.

**HOSPITAL NAME**

Banfield Glen Burnie

**REFERRING VET**

Dr. Matsche

**Spleen**

The **spleen** was largely normal with an isoechoic 1.6 x 0.91 cm non-disruptive nodule noted at the cranial pole.

**INVOICE**

99504

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

### 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. 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

Dystrophic left kidney.

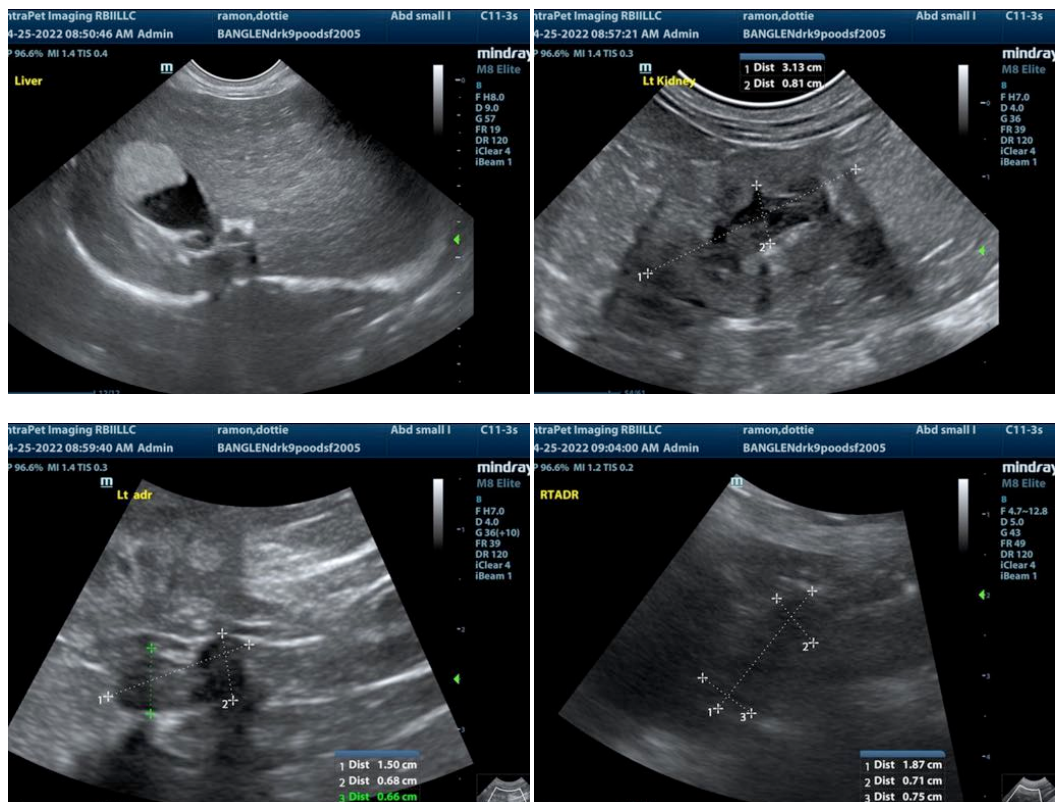
Moderate degenerative left renal change with pyelectasia and debris, possible chronic pyelonephritis.

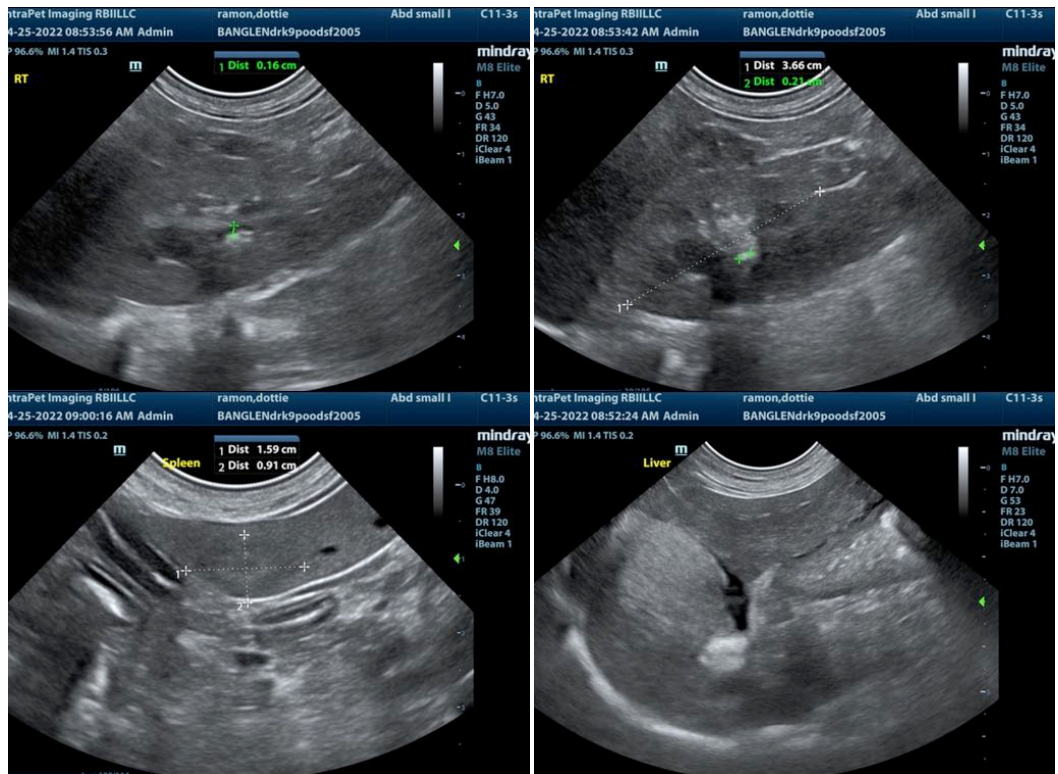
Gallbladder sludge.

Age related hepatic changes.

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Full urinary work-up is warranted. The cause of diarrhea is unclear in this patient. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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