



PATIENT PRESENTING CLINICAL SIGNS

Myles Horger upon PE 4/25 lethargy, inappetence, vomiting, 2-3 days Current Medications Cerenia 16mg
Abnormal PE/Chem/CBC/UA Results: K+- 3.7- low end normal RBC- 4.78 low end normal HGB- 10.6
low HCT-34.5 low

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

King Charles Cavalier
Spaniel

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 residual prostate was uniform at 0.94 cm.

SEX

Neutered Male

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 4.95 cm. The left kidney measured 5.0 cm.

AGE

2 Years

WEIGHT

17 Pounds

Adrenal Glands

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 right adrenal gland measured 1.83 cm x 1.47 cm at the cranial pole and 0.63 cm at the caudal pole. The left adrenal gland measured 1.71 cm x 0.26 cm at the cranial pole and 0.47 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

VCA Westmoreland

Liver

The **liver** was mildly subnormal in size. The gallbladder and common bile duct were unremarkable. Portal vein measured 6.0 mm entering into the portal hilus with normal branching. Portal vein/vena cava ratio was 1:1. No evidence of extrahepatic or intrahepatic shunting.

REFERRING VET

Dr. Bugarovich

Gastrointestinal

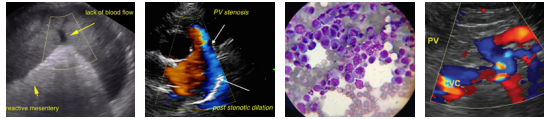
A minor amount of chyme noted in the **stomach**. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. Intestinal wall thickness measured up to 0.40 cm. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

INVOICE

37234

DATE

4/27/22



PATIENT *Pancreas*

Myles Horger 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

Heart

Rapid view of the heart revealed no evident pathology.

BREED

ULTRASONOGRAPHIC FINDINGS

King Charles Cavalier
Spaniel

- Structurally unremarkable abdomen with slight microhepatica
- Retention of ingesta noted in the stomach, yet no evidence of foreign body

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Neutered Male

No evidence of significant visceral disease. The cause of inappetence is unclear. Assuming that the baseline cortisol level is >3.0, then Addison's would be ruled out. However, if baseline cortisol is <3.0, then full ACTH stimulation would be recommended. No evidence of portosystemic shunting.

AGE

2 Years

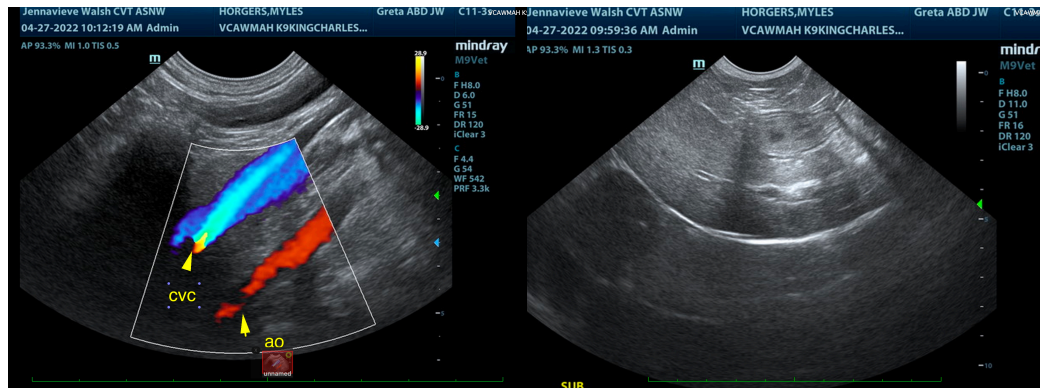
WEIGHT

Radiographs: Colitis pattern.

17 Pounds

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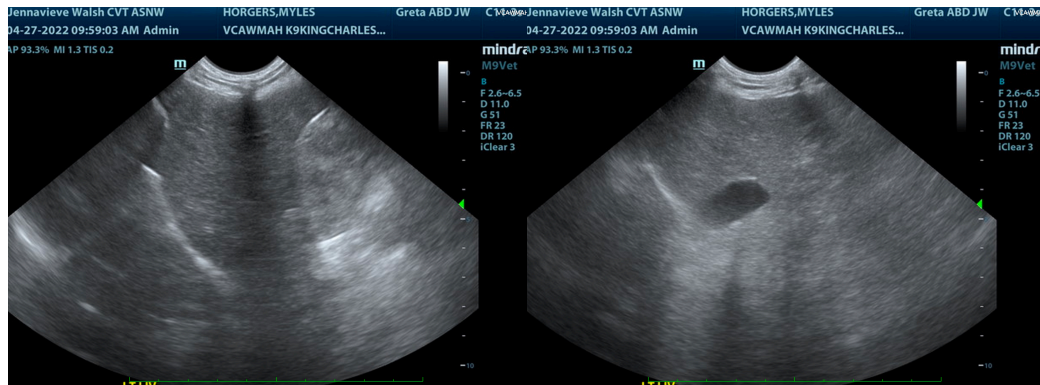


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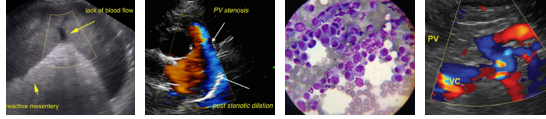
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Spaniel

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Neutered Male

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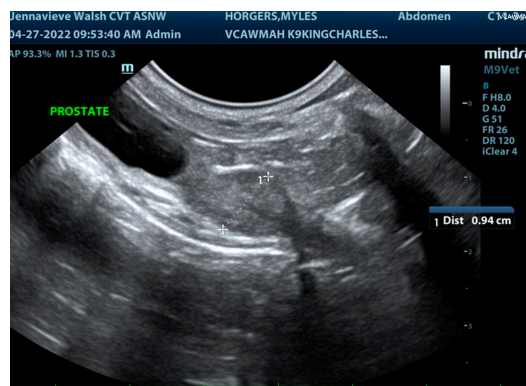
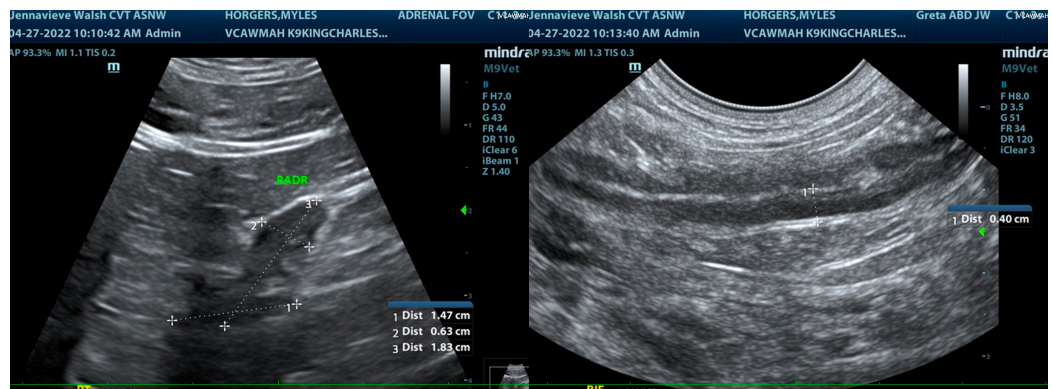
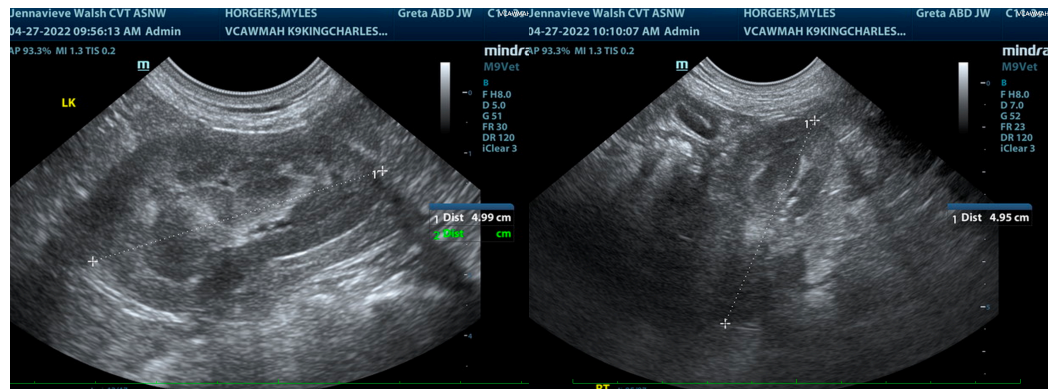
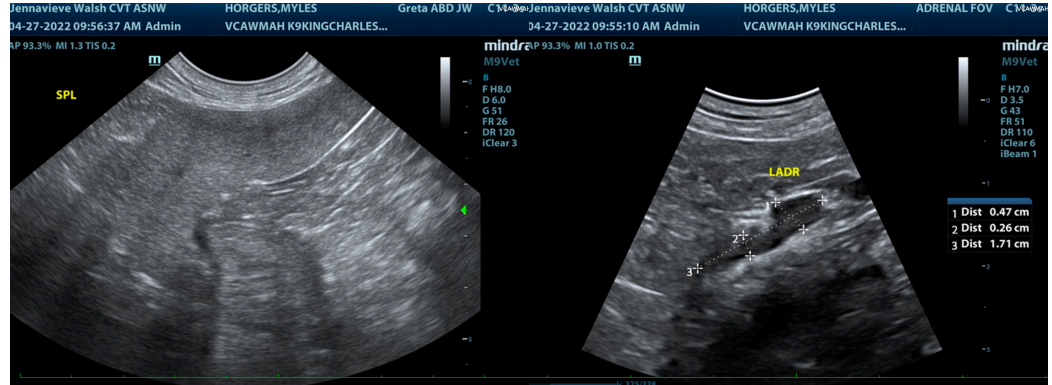
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Neutered Male

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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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