



**PATIENT**

Barkley Michael

**SPECIES**

Canine

**BREED**

Basset Hound

**SEX**

Neutered male

**AGE**

10 months

**WEIGHT**

23.6 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC

**REFERRING VET**

Dr. Slenbaker

**INVOICE**

99995

**DATE**

4/28/22

**PRESENTING CLINICAL SIGNS**

Presented at our hospital for inappetence, lethargic. Started Friday had some vomiting not wanting to eat. Went to vet Saturday did SQ fluids and Cerenia injection, went home seemed to be doing better. Then Tuesday patient stopped eating went to vet again, did blood work, Cerenia injection, fluids, sent home on metronidazole and doxycycline. Patient seemed ok but still wasn't eating that much. Owner found a large worm in patient feces yesterday took it in and vet sent home with a dewormer. Patient still very lethargic, not wanting to eat or drink, excessively drooling. Not acting right. Previous Health Concerns: none Current Medications: Doxy 250mg, Metronidazole 250mg Appetite/When did they eat last: Appetite decreased, little last night  
Abnormal PE/Chem/CBC/UA Results: 4/27/22 BW- RDVM- NR rads-RDVM- no obvious fb/ obstructive pattern ( general lack of detail) repeat rads- show some gas distension Epop: BUN - 6 L; Glu - 126 H

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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 7.27 cm. The left kidney measured 6.78 cm.

**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 left adrenal gland measured 0.5 cm. The right adrenal gland measured 0.6 cm.

**Spleen**

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.

**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



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lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was retention of ingesta in the stomach. The small intestine and colon were unremarkable.

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**Pancreas**

**SEX**

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.

Neutered male

**AGE**

**ULTRASONOGRAPHIC FINDINGS**

10 months

Structurally unremarkable abdomen.

**WEIGHT**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

23.6 kg

Even though the adrenal glands appear normal screening for congenital Addison's is recommended given the vague clinical signs. Non-specific GI upset is a potential. However, there was no other specific evidence of visceral pathology present to explain the clinical signs.

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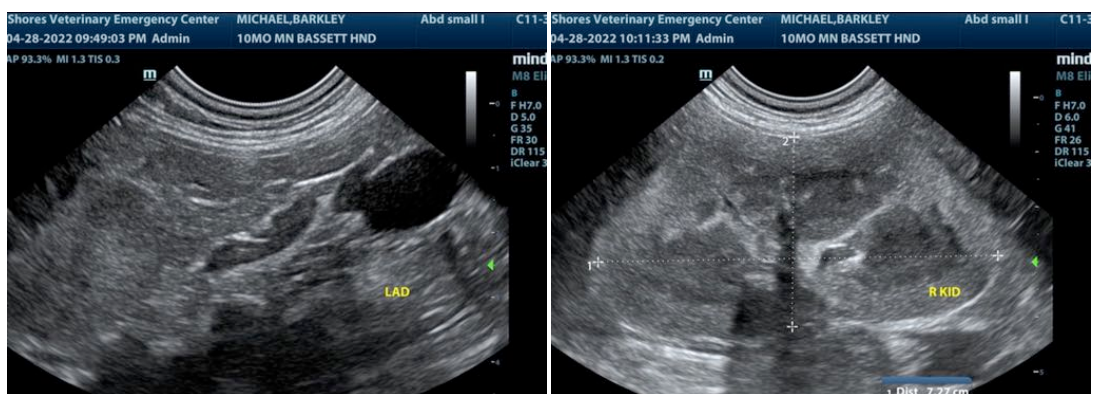
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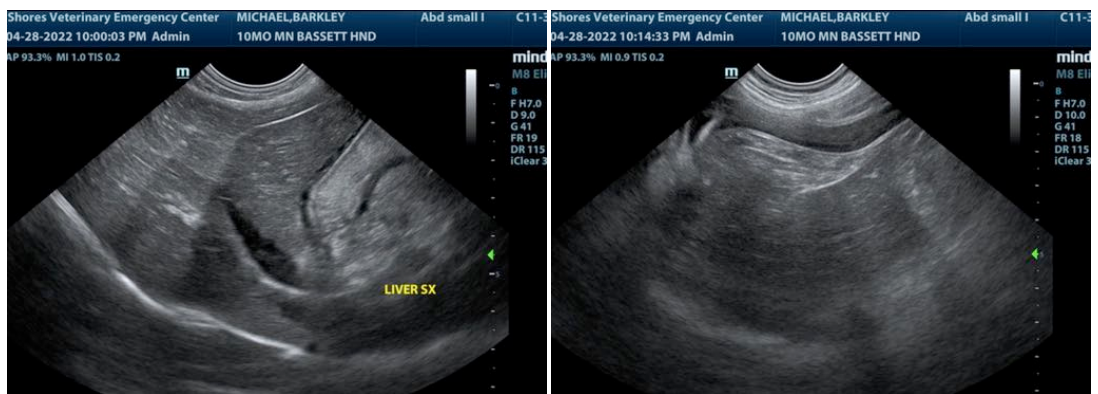
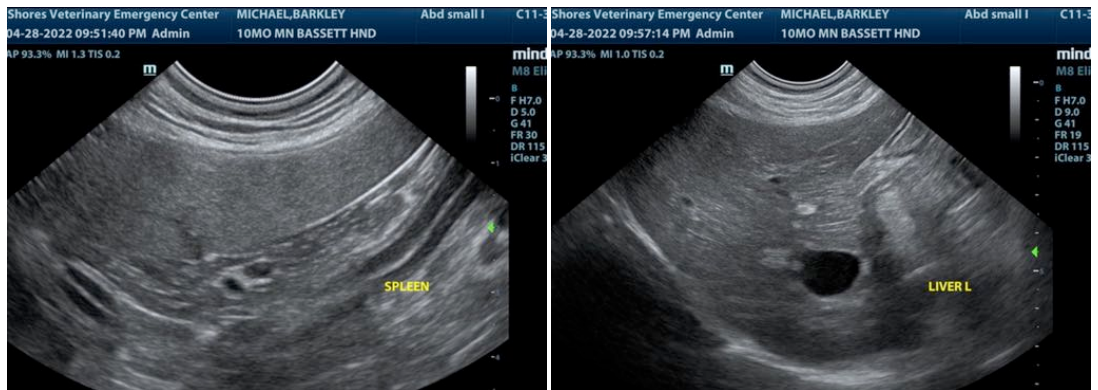
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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