



PATIENT PRESENTING CLINICAL SIGNS

Cooper Ferrera

History: P was seen 4/7 for vomiting, lethargy and decrease appetite. BW and Xrays showed not obvious cause and P was sent home on outpatient care for suspect gastroenteritis/pancreatitis. After been seen on Thursday, P did vomit in the car on the way home, no vomiting since, only had a small interest in food after getting the entyce this morning. The vomit after being seen had some black rubber bark peices in it. O sprayed flowerbeds against weeds a few days ago. P does not have a history of dietary indiscretion. No known toxin exposure (rodenticide, slug poison, fertilizer). No vomit noted today but did vomit undigested food last night
Abnormal PE/Chem/CBC/UA Results: BAR, Eupneic. Patient is tense upon deep abdominal palpation hunches. Seems to be more uncomfortable in cranial abdomen. CBC - leukocytosis 18k, mild neutrophilia 14k, moderate monocytosis 1.9k, mild eosinopenia 0.02k moderate thrombocytopenia 99k, but MPV is increased. r/o clumping. will review smear. adequate platelets on smear.

SPECIES

Canine

BREED

Standard Poodle

SEX

Neutered male

AGE

11 months

WEIGHT

30.4 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Ebert

HOSPITAL NAME

Wilvet Salem

REFERRING VET

Dr. Ebert

INVOICE

DATE

4/9/22

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.

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 left kidney measured 6.0 cm. The right kidney measured 6.0 cm.

Adrenal Glands

The left **adrenal gland** was 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 was not visualized.

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 was 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



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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.

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Gastrointestinal

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The **stomach** revealed a minor amount of chyme in the gastric fundus. The pylorus was patent. The small intestine was spastic. The colon was empty and unremarkable.

SEX

Neutered male

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.

AGE

11 months

ULTRASONOGRAPHIC FINDINGS

Gastroenteritis. There was no evidence of foreign bodies.

WEIGHT

30.4 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Supportive care should prove effective. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. Screening For Addison's is warranted.

IMAGING PERFORMED BY

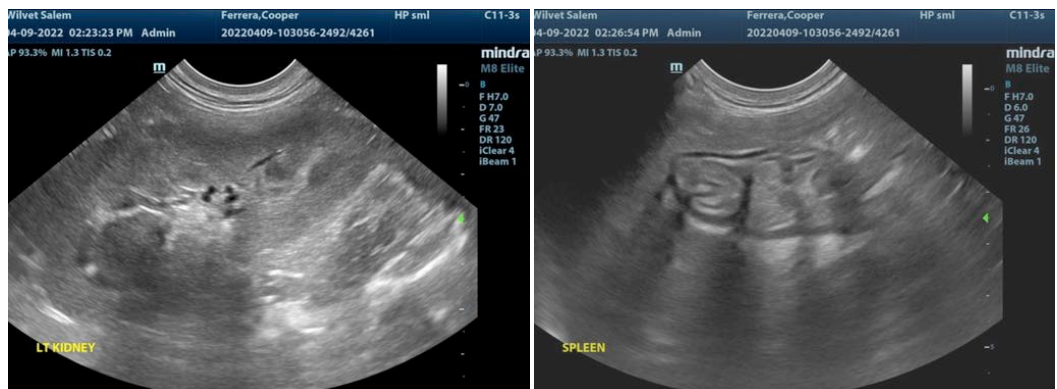
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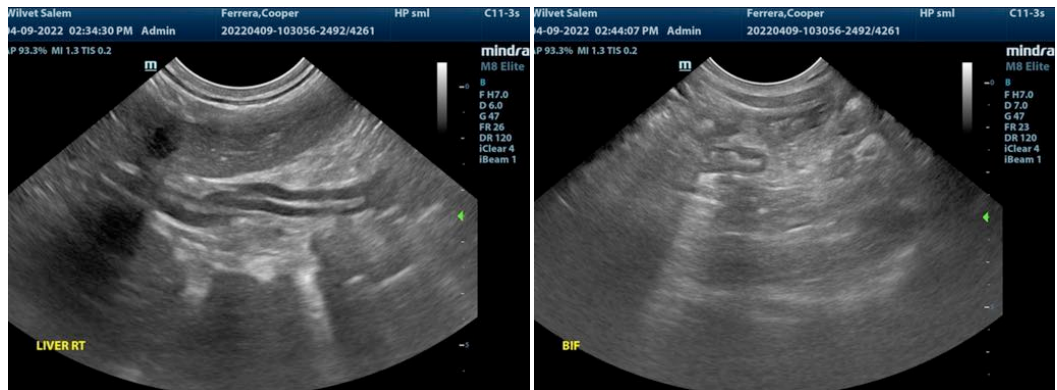
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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