



PATIENT PRESENTING CLINICAL SIGNS

Haylee Silbiger
History: bloody diarrhea, blood tinged vomit
Abnormal PE/Chem/CBC/UA Results: nsf

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Labrador Mix

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.

SEX

Spayed Female

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 6.03 cm. The right kidney measured 6.17 cm.

AGE

13 years

WEIGHT

53.5 lbs

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 right adrenal gland measured 1.9 x 0.54 cm at the caudal pole and 0.88 cm at the cranial pole. The left adrenal gland measured 1.9 x 0.61 cm at the caudal pole and 0.7 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Diane McFadden, RVT

Spleen

HOSPITAL NAME

Rockaway AH

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.

REFERRING VET

Dr. Maniar

Liver

INVOICE

30243

DATE

5/10/22

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.



PATIENT *Gastrointestinal*

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The **gastrointestinal tract** revealed mucosal striations and variable areas of minor muscularis hypertrophy. No overt neoplastic criteria was present. The colonic wall was thickened with increased submucosal echogenicity and soft stool. However, the midabdomen revealed approximately 2 x 3 cm early intussusception. Midabdominal palpation is recommended to assess areas of hyperperistalsis. Minor adhesion pattern was noted around the intussusception.

SPECIES

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Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

SEX

Spayed Female

AGE

13 years

ULTRASONOGRAPHIC FINDINGS

Chronic GI changes with early intussusception and mucosal striations/fogging.

Otherwise, geriatric abdomen.

WEIGHT

53.5 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If the intussusception is palpable and persistent then surgical intervention is recommended simple reduction may be adequate. However, GI biopsies are essential in this patient for long term management. If the intussusception is no longer palpable and self resolved on medical management then recheck sonogram is indicated. Purina HA or Royal Canin HP diet or similar geriatric hydrolyzed diet may be appropriate in this patient. Broad spectrum anti-parasitic protocol and treatment for bacterial overgrowth is recommended.

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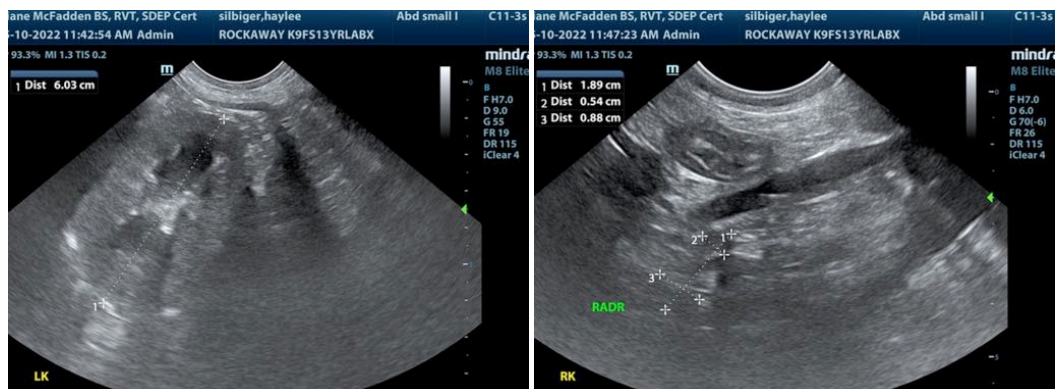
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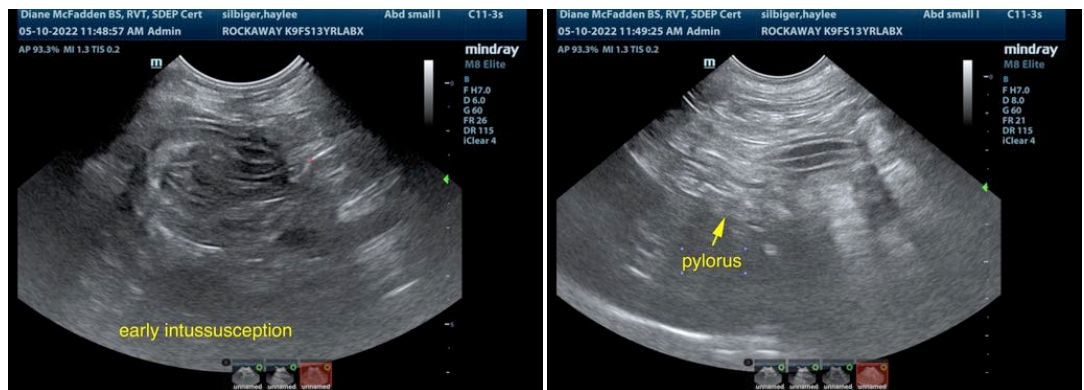
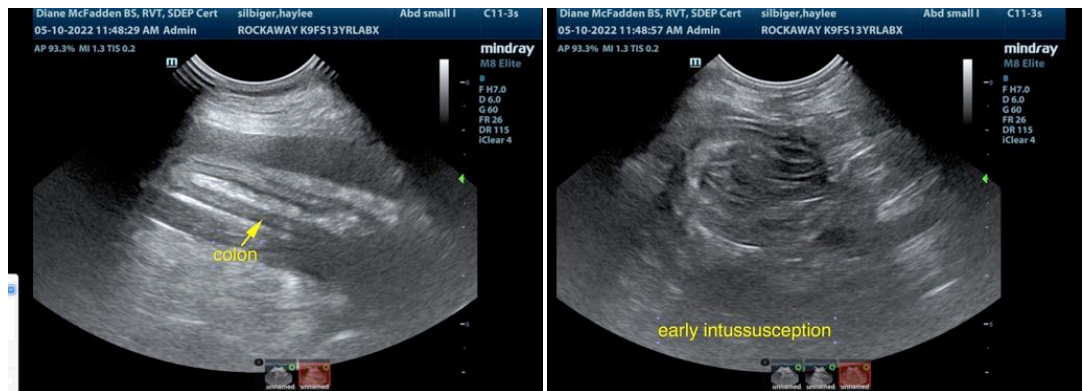
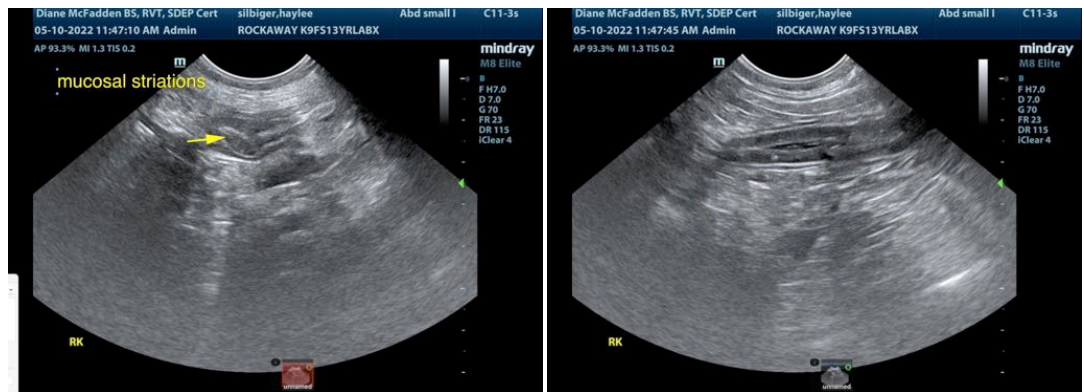
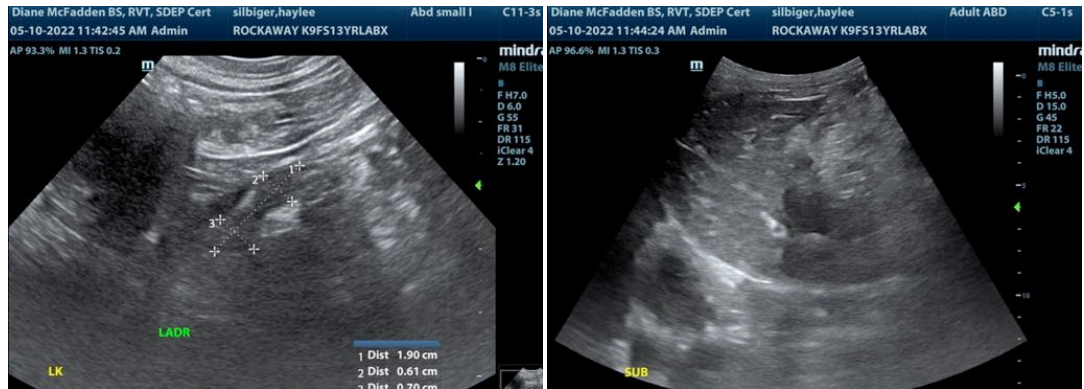
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PATIENT

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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.

SPECIES

Canine

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.

BREED

Labrador Mix

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

SEX

Spayed Female

AGE

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