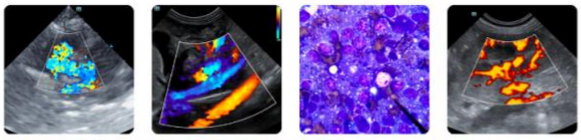




**DATE**

05/16/26

**PATIENT**

Trudy Hannigan

**SPECIES**

Canine

**BREED**

Basset Hound

**SEX**

Spayed Female

**AGE**

2024

**WEIGHT**

62.6 lbs

**INTERPRETED BY**

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

**HOSPITAL NAME**

Animal Emergency Hospital

**REFERRING VET**

Dr. Kalwa

**INVOICE**

16295

## PRESENTING CLINICAL SIGNS

Patient History: Presents for bloody diarrhea with plastic and string material. Boarded overnight, was normal when dropped off yesterday morning - Bloody diarrhea with plastic and string noted this morning at daycare pickup - Did not eat breakfast this morning (ate dinner yesterday evening and breakfast yesterday morning normally).

Current Medications: Metronidazole, Buprenorphine, Ondansetron, Maropitant Citrate.
Labwork Results: Labwork not submitted. Radiographs 2 view abdomen populations of intestines, gas filled colon, moderately gas fill stomach. Repeat radiographs improved gas pattern.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Requested.
Imaging Performed by: Andi Parkinson, BS, RDMS.

## 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 were noted. Ureteral papillae were normal.

The sublumbar **lymph nodes** presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia. An example measured 2.6 cm x 0.59 cm.

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 6.75 cm in length. The right kidney measured 6.86 cm in length.

### *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 2.41 cm x 0.58 cm width at the cranial pole and 0.46 cm width at the caudal pole. The right adrenal gland measured 2.66 cm x 0.48 cm width at the cranial pole and 0.39 cm width at the caudal pole.

### *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. The spleen was folded upon itself caudally.

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

### *Gastrointestinal*

The **stomach** was fluid filled without obstruction. Mucosal hypertrophy was noted without overt ulcerative changes, however, microulceration cannot be ruled out. Some duodenal spasming was noted. The colon was unremarkable.

### *Pancreas*

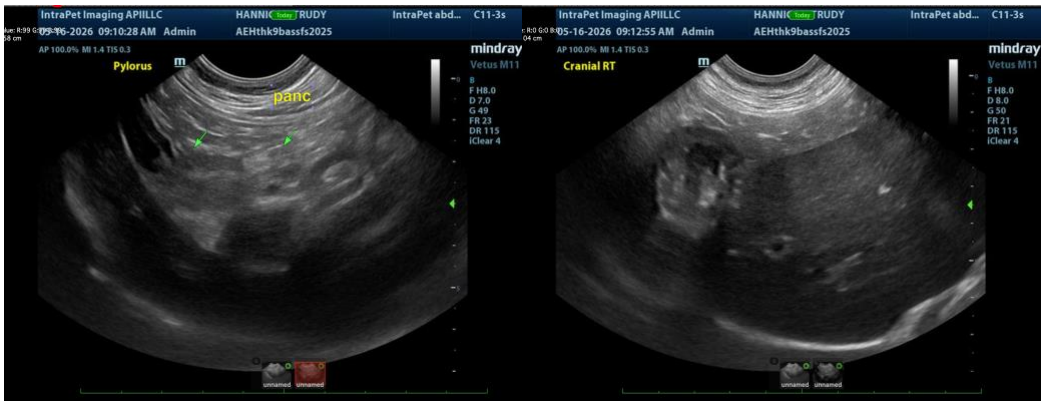
The **pancreas** revealed hypoechoic irregular parenchyma and minor enhanced mesentery. Low-grade pancreatitis is suspected.

## ULTRASONOGRAPHIC FINDINGS

- Nonspecific gastritis pattern.
- Suspected low-grade pancreatitis.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

GI protectant protocol, 24-hour NPO, IV fluid support are all indicated along with potential broad-spectrum antibiotics.  Slurry feeding may be appropriate after 24-hour NPO. No evidence of foreign bodies.

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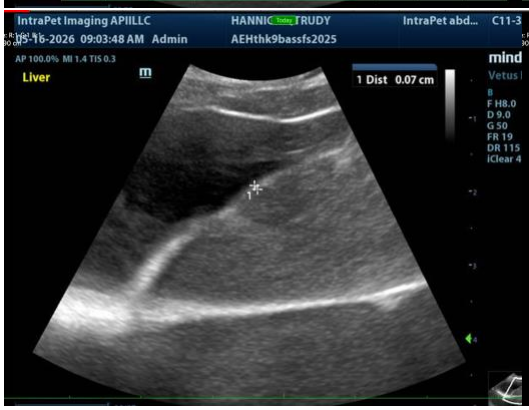
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IntraPet Imaging APIILLC
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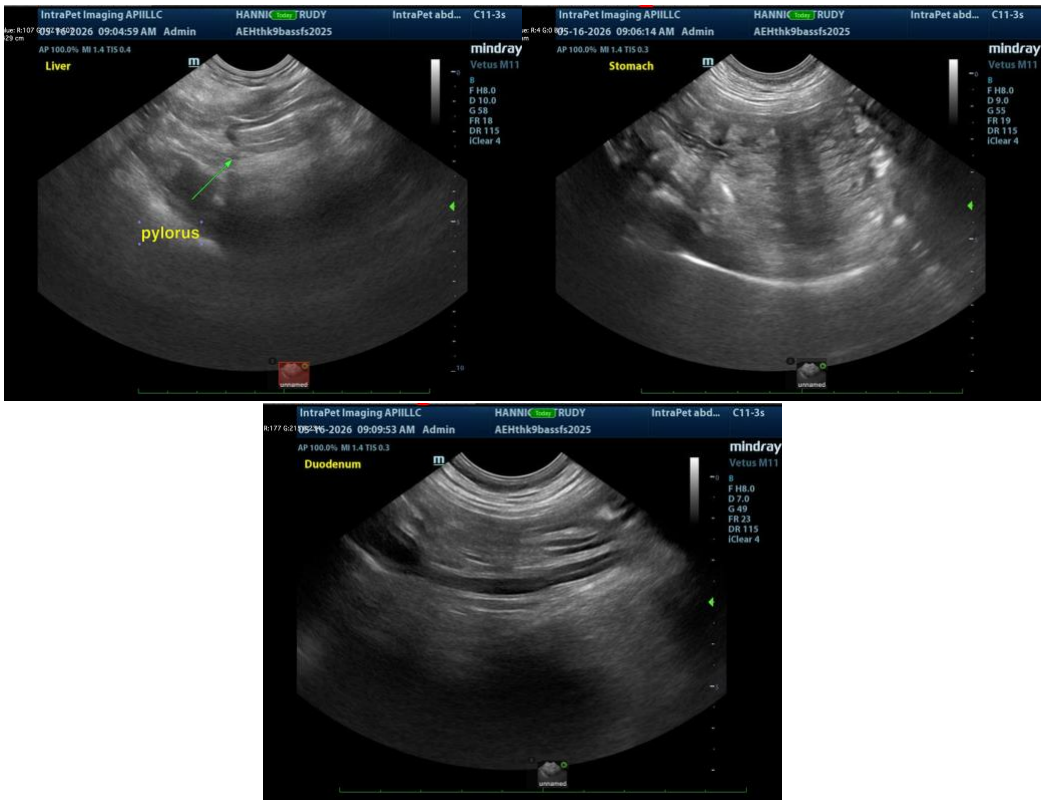


**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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(CFM), Cert. IVUSS,

CEO, Owner, Founder -- SonoPath.com

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