

**DATE**

5/6/22

PATIENT

Koda Wirsing

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

5/5/20

WEIGHT

76 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Rachel Brillhart RDMS

HOSPITAL NAMEAnimal Emergency
Hospital**REFERRING VET**

Dr. Willer

INVOICE

37589

PRESENTING CLINICAL SIGNS

Seen at another veterinarian about 1 month ago for vomiting- ingested chicken sticks- had a fever at that time; last 2-3 days- lame on the left front- seems painful in the wrist region not eating lethargy is drinking water. 5/5: fever, non-weight bearing lameness, anorexia. 5/6: Ascites

Current Medications: Buprenorphine, Gabapentin, Doxycycline, Cerenia.

Lab Results: Hct 28, WBC 30

Radiographs: soft tissue swelling noted of the carpus; no obvious fractures.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The **urinary bladder** was empty. Foley catheter was present. No evident pathology.

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 8.0 cm. The right kidney measured 8.0 cm. Cortical infarct noted at the cranial pole of the right kidney.

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 3.26 cm x 0.63 cm at the cauda pole and 0.68 cm at the cranial pole.

Spleen

The **spleen** presented subtle micronodular changes with minor scalloping contour.

Liver

The **liver** was swollen with increased portal markings and irregular contour. The gallbladder was unremarkable.

Gastrointestinal

The **stomach** was overdistended with chyme. The small intestine was unremarkable. The colon was filled with soft stool.

Pancreas

The **pancreas** was hypoechoic and irregular with heterogeneous parenchymal changes. The right limb measured up to 1.3 cm.

Free Abdomen

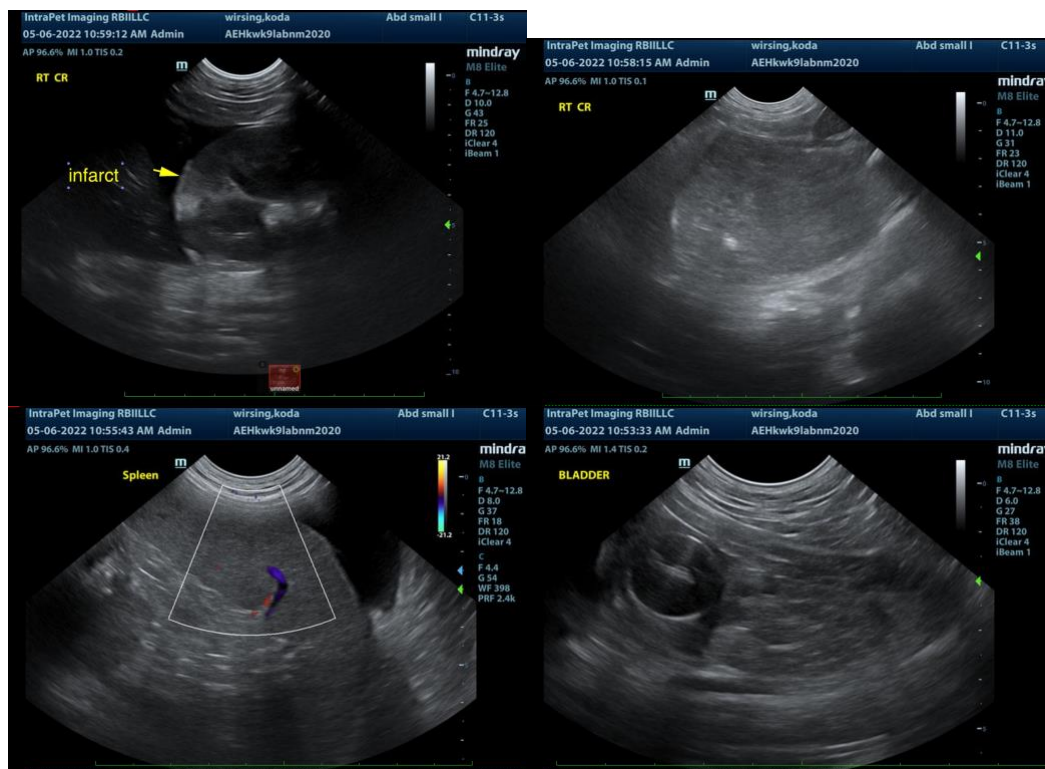
Free fluid noted in the abdomen.

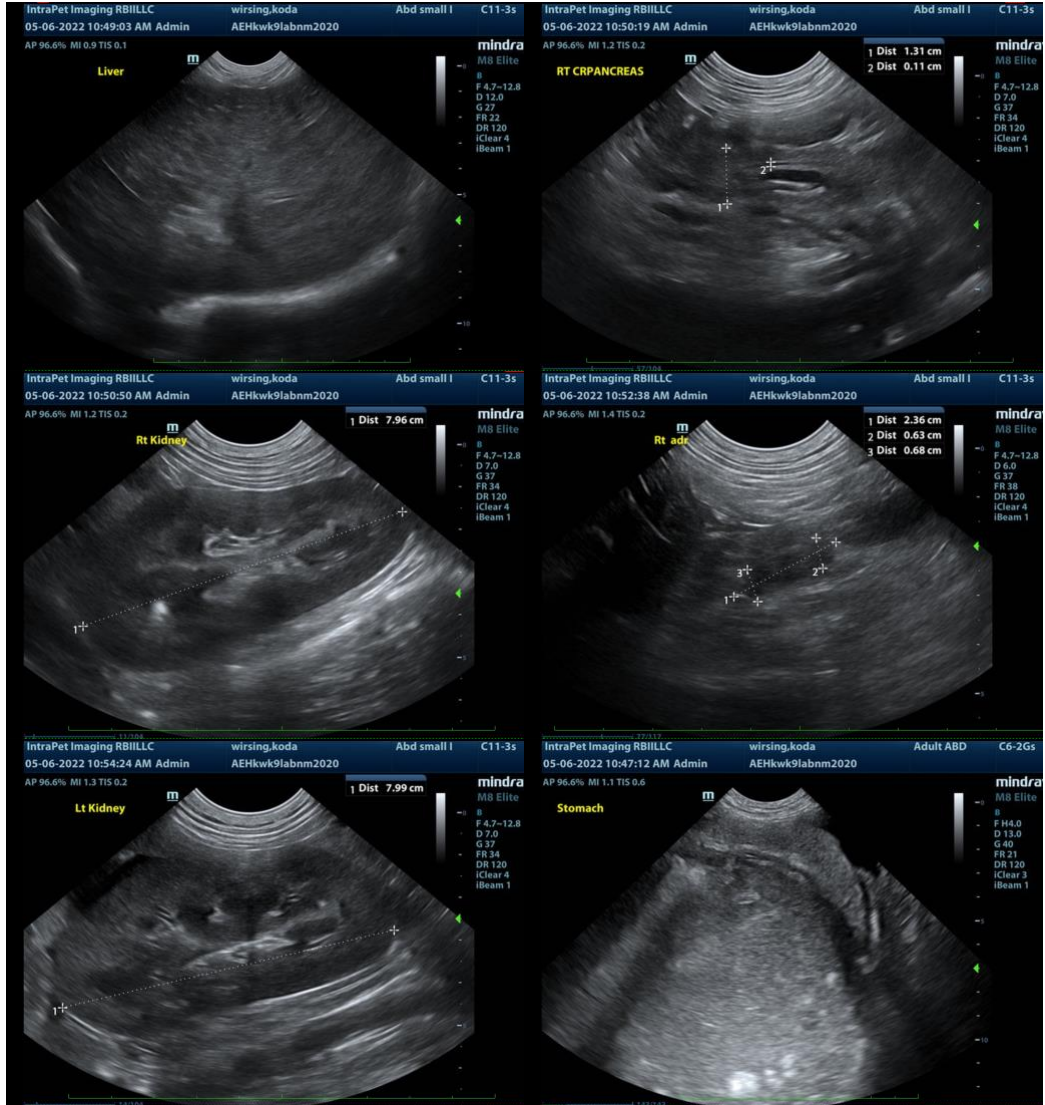
ULTRASONOGRAPHIC FINDINGS

- Pancreatitis pattern
- Irregular liver
- Micronodular spleen
- Free fluid
- Delayed outflow gastric pattern – likely owing to metabolic ileus, no overt obstruction.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the free fluid is unclear. I recommend abdominocentesis and cytospin of the free fluid. Gastric tube placement with evacuation indicated. FNA of the spleen indicated. Coagulation panel warranted. If hemoabdomen is present and coagulation panel is normal, then exploratory surgery would be indicated to assess for cause of hemorrhage. Diagnosis is open.





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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