



PATIENT PRESENTING CLINICAL SIGNS

Rusty Wilson

SPECIES

Canine

BREED

King Charles Cavalier

History: Pt was hospitalized at EVH over the weekend, pt is still not improving. Pt has not eaten a full meal since Thurs., v+/d+, very lethargic, Lucky Dog Owner- Rusty has not eaten since last Thursday- started V+ on Friday, then D+ on Friday night- was at EVH all weekend, did fluids, BW, high calcium levels- undiagnosed with high calcium panel- plan was to re-evaluate calcium levels, treat as needed, O is reachable out of country currently. Has not recieved afternoon meds yet, did get AM meds. Very lethargic. O is not due back in country for a couple weeks.

Abnormal PE/Chem/CBC/UA Results: RDVM: 6/12 Ca++ = 1.66 mmol/L H 1.25 - 1.50/PCV/TS: 54% and 5.8; Vchem17/CBC: phos 8.7, tCa 14.6, hct 60.5% abd rads: moderate amt gas in SI, no obstructive pattern, no foreign material noted. Wilvet: EPOC HCT 64%, NA 160, CA 1.37 (wnl), 4.52 (0.6-3.00), BUN 44, PCV/TS 47%/ 7.2 g/dl ALB- 3.0 Hypercalcemia of malignancy Panel Pending

SEX

Neutered male

AGE

8 years

WEIGHT

14.9 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Magguilli

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Magguilli

INVOICE

31001

DATE

6/15/22

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 left kidney measured 3.0 cm. The right kidney measured 4.0 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 0.4 cm.

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** was over distended with fluid. The pylorus was patent. Some portions of the upper small intestine revealed fluid filled luminal dilation with echogenic mucosal remodeling followed by empty small intestine. There was no overt foreign body present.

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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.

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8 years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

14.9 lbs

Upper GI stasis with enteritis pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

No overt foreign body was evident and cannot be completely ruled out. Screening for Addison's is warranted as the regions of the adrenal glands were imaged, yet there was no evidence of pathology. Treatment for gastroenteritis is warranted if the patient is not responding over the next 24 hours. A recheck sonogram is indicated along with GI protectants and treatment for enterotoxins.

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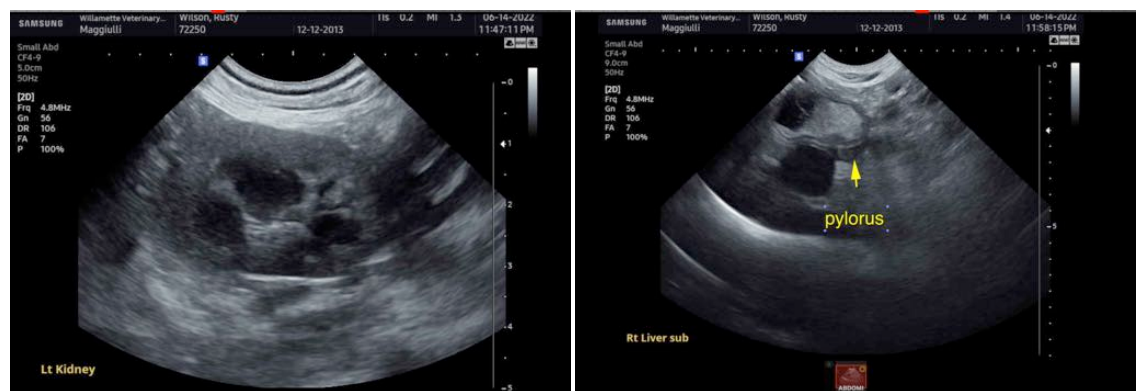
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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