



PATIENT PRESENTING CLINICAL SIGNS

Jax Lohss History: 3/28: Splenic hemangiosarcoma - splenectomy Post op - hind limb paresis (resolved) urinary retention persistent Presented 6/20 for vomiting, pale gums, lethargy On meloxicam until presentation 6/20

SPECIES Abnormal PE/Chem/CBC/UA Results: 6/21 PCV 21% (LOW) Creatinine 2.5 mg/dL (HIGH) Monocytes 1.74 K/uL (HIGH) Neutrophils 32.46 K/uL (HIGH)

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Boxer

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.

Neutered male

AGE

8 years The **kidneys** revealed normal size and structure, corticomodullary 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 and right kidney measured 6.0 cm.

WEIGHT

56.2 lbs

Adrenal Glands

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

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 0.5 cm. The region of the right adrenal gland was unremarkable.

IMAGING PERFORMED BY

Dr. Nelson

Spleen

The region of the **splenic fossa** was unremarkable. There was some enhanced mesentery noted.

HOSPITAL NAME

Willamette VH

Liver

REFERRING VET

Dr. Nelson

The **liver** revealed uniform parenchyma with no evidence of pathology. However, there was free fluid present between the liver and diaphragm. The hepatic veins were not dilated. There was no evidence of passive 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.

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Gastrointestinal

DATE

6/21/22

There was minor retention of ingesta noted in the **stomach**. The small intestines and colon were unremarkable. There was some reactive mesentery was noted around the stomach.



PATIENT

Pancreas

Jax Lohss

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.

SPECIES

Canine

Free Abdomen

BREED

Boxer

Free fluid was noted in the abdomen.

SEX

Heart

Neutered male

Rapid view of the heart revealed no evidence of pathology.

AGE

ULTRASONOGRAPHIC FINDINGS

8 years

Non-specific gastroenteritis is likely without significant structural disease. Reactive mesentery around the stomach with regional free fluid. Concern for possible perforating ulcer and gastritis.

WEIGHT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

56.2 lbs

There was no evidence of overt organ damage or hemorrhage. There is no evidence of metastatic disease. The cause of the free fluid is unclear and should be monitored carefully. CBC path review is warranted given the anemia. No confirmed ulcerative changes were noted, yet this cannot be completely ruled out. Given the free fluid in the cranial abdomen and anemia perforating ulcers is a possibility. However, further imaging or endoscopy would be indicated or direct exploratory surgery with inspection of the stomach. NSAID therapy should be stopped. GI protectant protocol is warranted. A recheck sonogram daily is recommended especially if the hematocrit is continuing to drop. If the abdominal fluid is accessible with ultrasound guidance then abdominocentesis is recommended to assess if frank blood is present. If so then surgical intervention is necessary.

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PATIENT

Jax Lohss

SPECIES

Canine

BREED

Boxer

SEX

Neutered male

AGE

8 years

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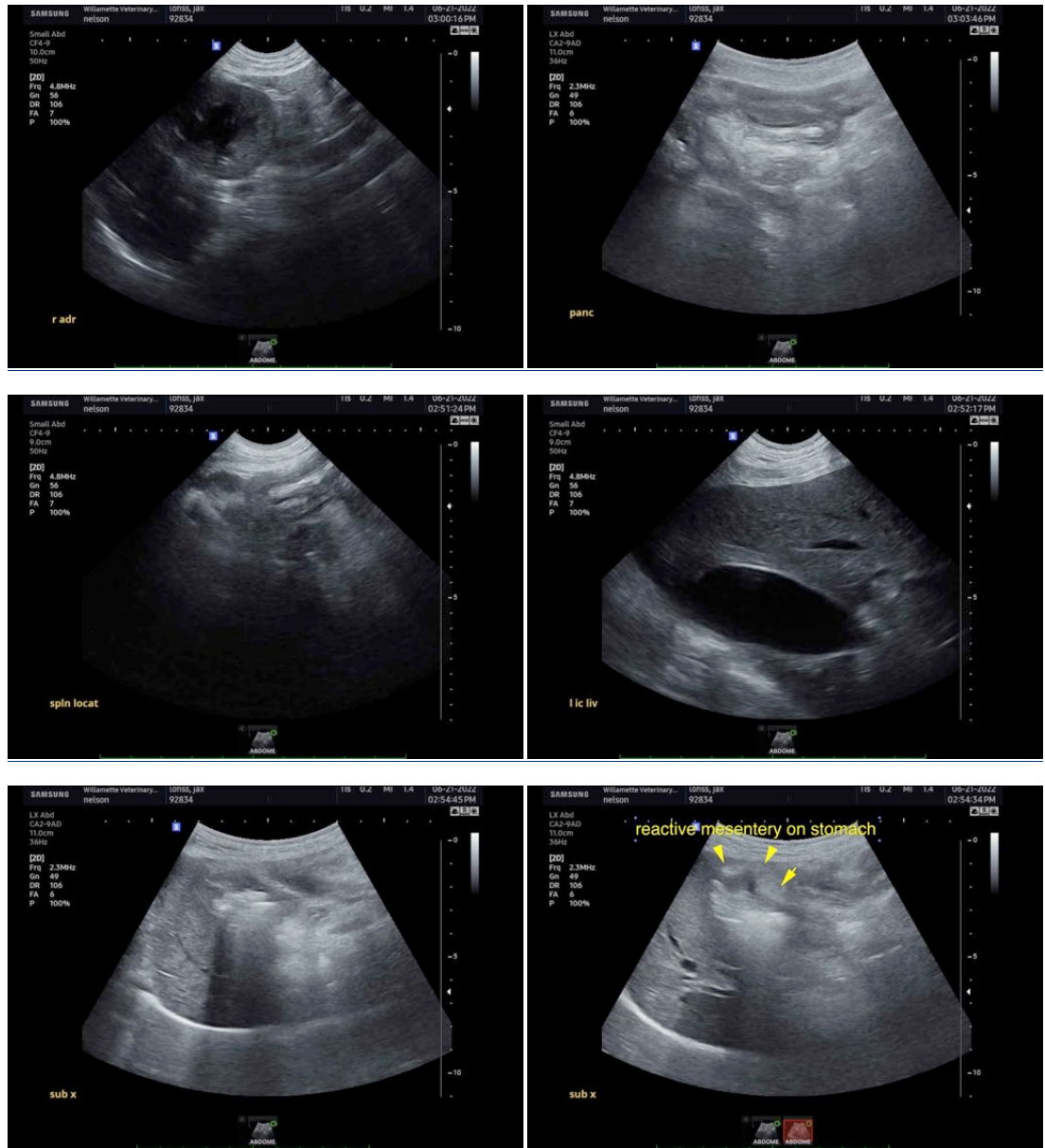
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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