



PATIENT

Piper Houk

SPECIES

Canine

BREED

Pit Mix

SEX

Spayed Female

AGE

8 Years

WEIGHT

51.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Lesley Cohen

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Lesley Cohen

INVOICE

23022

DATE

6/24/23

PRESENTING CLINICAL SIGNS

History: 8Y SF pitbull mix presented for 1 week hx hyporexia progressing to anorexia, onset of trembling/shaking and panting excessively. No recent travel or environmental changes. Hx atopic dermatitis, grade 2-3/6 L apical systolic murmur. Pt presented febrile at rdvm 6/19, given Abx and cerenia. Elevated liver values at rdvm. EPOC- GLU: 130; Potassium: 3.1 mmol/L; LAC: 5.96; PCO2: 20.8 ; pH: 7.517; TCO2: 16.6; BEecf: -6.1 Vcheck cPL- Normal: 96.3 ng/mL (pancreatitis not suspected) 4Dx SNAP- WNL Chem 17- Phos: 1.8; Total protein: 8.6; Globulin: 5.5; ALT: 480; ALP: 411; Amylase: 430; Lipase: 177 Thoracic radiograph report: CONCLUSIONS: Mild to moderate diffuse pulmonary bronchointerstitial pattern (bronchitis, vs age-related change), Prominence of the aortic arch highly likely represents a normal variant, Focally decreased erosive detail in the mid cranial abdomen consistent with regional steatitis/peritonitis or small volume effusion, Moderate elbow osteoarthritis.

Abnormal PE/Chem/CBC/UA Results: EPOC- GLU: 130 mg/dL; Potassium: 3.1 mmol/L; LAC: 5.96 mmol/L; PCO2: 20.8 mmHg; pH: 7.517; TCO2: 16.6 mmol/L; BEecf: -6.1 mmol/L vcheck cPL- Normal: 96.3 ng/mL 4Dx SNAP- WNL Chem 17- Phos: 1.8 mg/dL; Total protein: 8.6 g/dL; Globulin: 5.5 g/dL; ALT: 480 U/L; ALP: 411 U/L; Amylase: 430 U/L; Lipase: 177 U/L

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 5.8 cm. Blood flow to the kidneys appeared to be adequate. The right kidney measured 6.5 cm.

Adrenal Glands

The **left adrenal gland** appeared subjectively flattened and small, measuring 0.36 cm at the cranial pole and 0.4 cm at the caudal pole.

The **right adrenal gland** appeared subjectively flattened and small, measuring 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 were 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 normal volume with no evidence of congestion. The gallbladder presented acceptably



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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

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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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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Other

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A rapid view of the **heart** revealed normal volume and subnormal contractility.

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable abdomen with subjectively flattened and subnormal adrenal size

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening for Addisons is warranted with baseline cortisol or ACTH stimulation, if not already performed. No other evidence of pathology.

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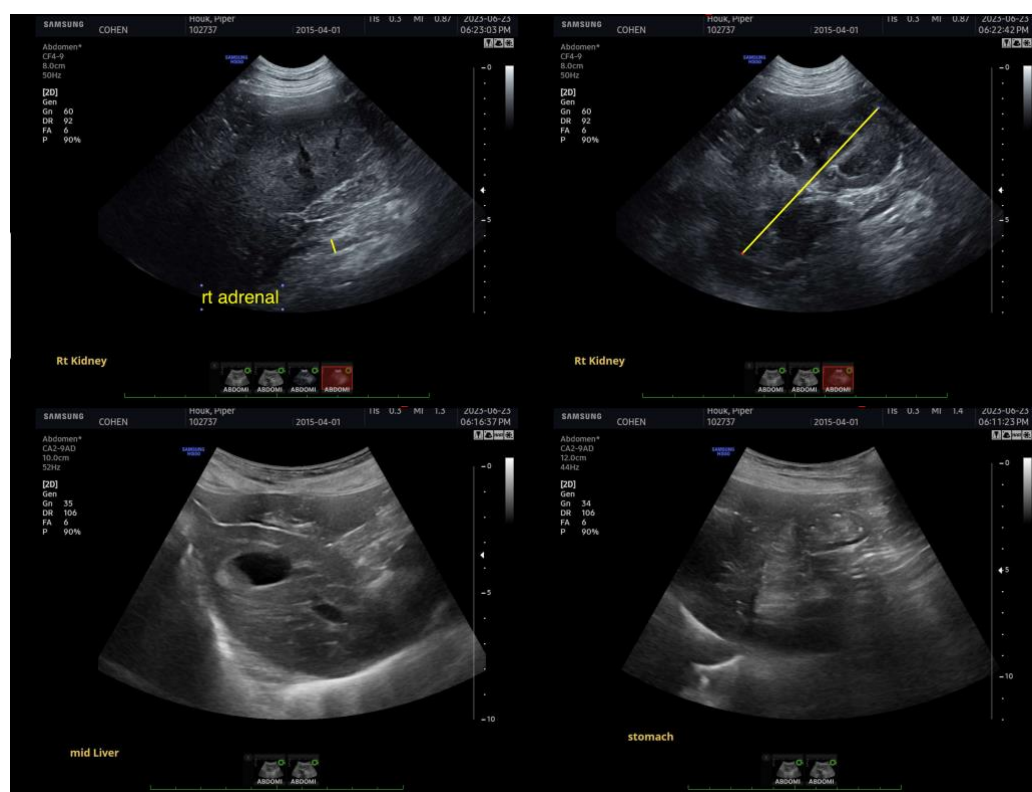
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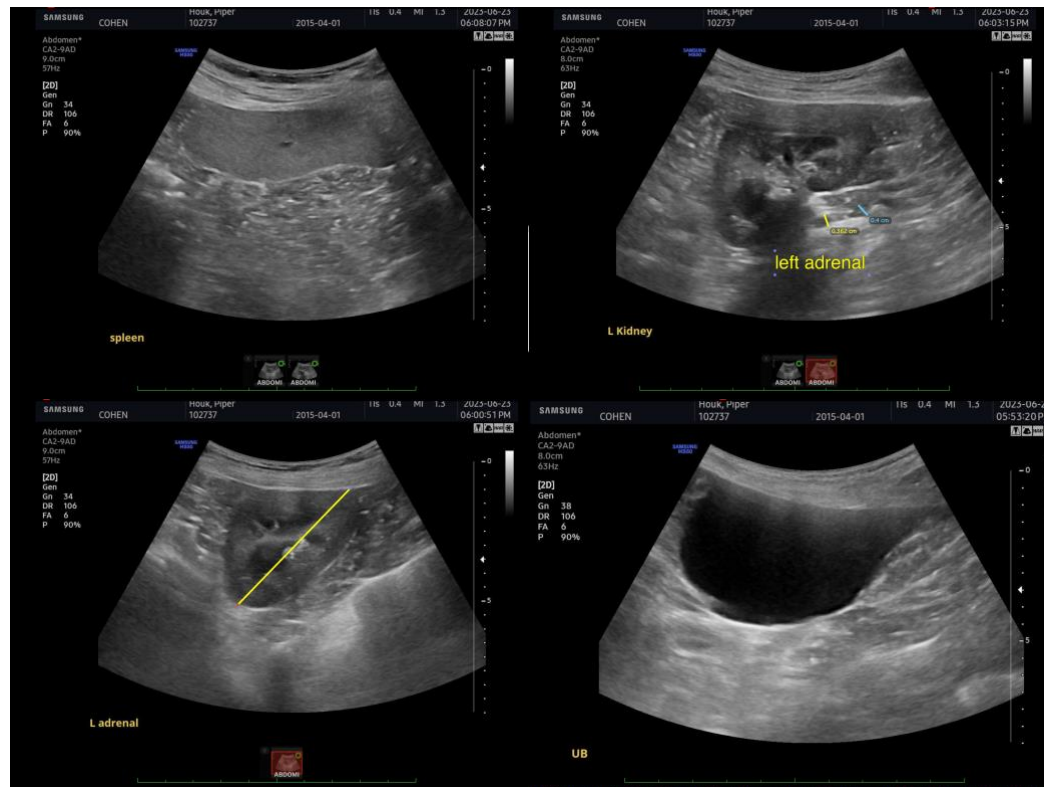
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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