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Clinical Sonography & Telecytology

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1-800-838-4268 info@sonopath.com SonoPath.com

DATE

6/5/22

PATIENT

Marley Schmid

SPECIES

Canine

BREED

Golden Retriever

SEX

Spayed Female

AGE

2009

WEIGHT

62.1 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Rachel Brilhart RDMS

HOSPITAL NAME

Animal Emergency
Hospital

REFERRING VET

Dr. King

INVOICE

38416

PRESENTING CLINICAL SIGNS

Presenting Complaint:
Lethargic

Blood in stool
Vomiting With Blood
Not Eating
Not drinking

History: Date: 06-03-2022 Notes: Gets stressed. Got medication for stress diarrhea last week 5/14, labwork on propectalin and metronidazole-- is done now. Takes 1 amantadine a day for arthritis. At kennel, vomiting, then vomiting and diarrhea with blood. Unable to walk, had to take stretcher in.

Assessment:
Severely weak, unable to stand.

HGE

Discussed with Mary(owner) stress, infection, parasites, cancer other
Currently worried about status, started on IVF and need to get xrays and labwork

owner approves plan, understands that the kennel is paying for some of finances

Current Medications: Potassium Chloride, Administration- Owner ORAL Medication, Ampicillin 125mg/vial Injection (Per mL), Pantoprazole (Protonix), Maropitant Citrate (Cerenia).

Lab Results: Crea 2.7, BUN 68, ALP/ALT minor elevation.
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**, 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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 6.6 cm. The right kidney measured 6.22 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 2.52 cm x

0.81 cm at the caudal pole and 0.69 cm at the cranial pole. The right adrenal gland measured 2.86 cm x 0.94 cm at the caudal pole and 0.90 cm at the cranial pole.

Spleen

The **spleen** revealed a 2.0 cm expansive mixed echogenic parenchymal mass at the mid cranial body with nodular changes and scalloping contour elsewhere.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Transdiaphragmatic view revealed a caudal thoracic mass measuring 3.4 cm x 2.8 cm, appeared to be lung origin.

Gastrointestinal

Examination of the **gastrointestinal tract** was largely unremarkable other than minor fluid filled intestine. No evidence of foreign body or obvious GI neoplasia.

Pancreas

Heterogeneous **hepatic** changes noted.

Heart

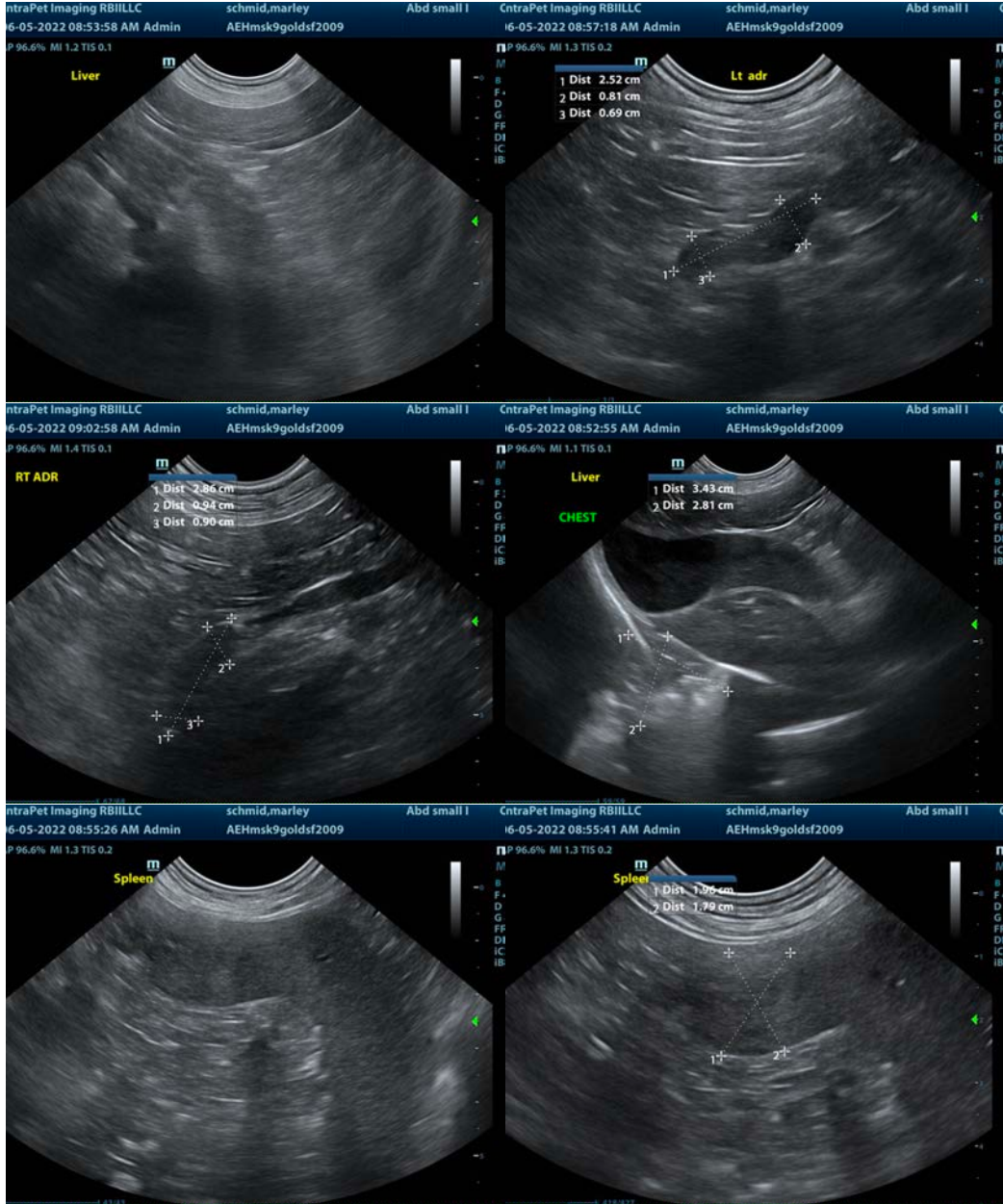
Rapid view of the heart revealed no evident pathology in the pericardium or right auricle. Normal volume and contractility.

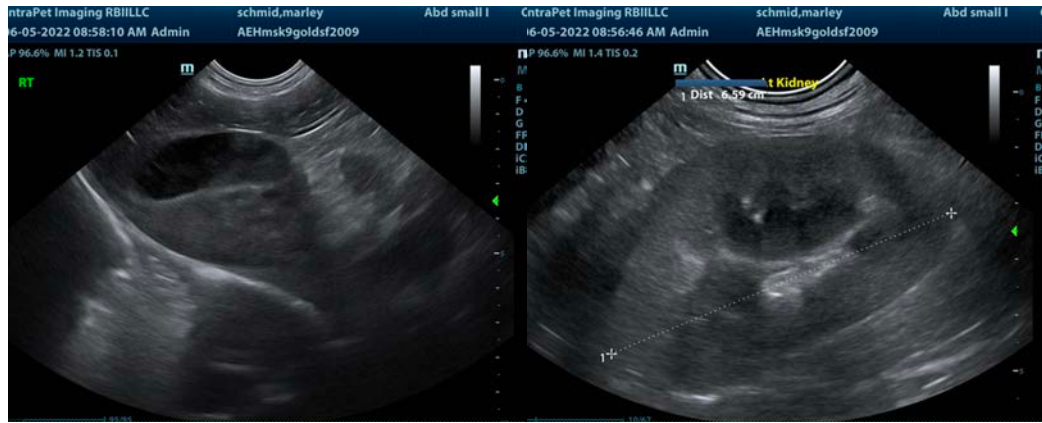
ULTRASONOGRAPHIC FINDINGS

- Splenic mass, no evidence of rupture
- Heterogeneous hepatic changes
- Caudal thoracic lung consolidation – pneumonitis/necrosis versus lung neoplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver recommended. 3-view chest radiographs and/or chest CT indicated. GI protectant protocol warranted in the meantime. Prognosis is guarded. The kidneys do not appear end stage. Therefore, the BUN/Creatinine elevation are likely prerenal issues.





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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