



PATIENT PRESENTING CLINICAL SIGNS

Sugar John
Hyporexia for about 10 days, smacking lips. Significant dental disease, had COHAT with extractions on 6/2, no improvement in appetite since the procedure, still lip smacking. No other GI or constitutional signs. No obvious additional oral lesions or dehiscence noted on non-sedated oral exam. No response to antibiotics, pain medications, anti-nausea, appetite stimulant Normal chest x-rays

SPECIES
Abnormal PE/Chem/CBC/UA Results: >SDMA and isosthenuria but normal creatinine >ALP
Canine
Non/pre-regenerative anemia Repeat CBC/Chem and cortisol level pending

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Havanese 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.

SEX

Spayed Female

AGE

15 Years

The **left kidney** was subnormal in size (2.9 cm) and presented dystrophic changes, pyelectasia and cortical infarct. Moderate degenerative changes.

The **right kidney** presented minor degenerative changes with some minor loss of corticomedullary definition. The right kidney measured 4.2 cm. Blood flow to the right kidney was subjectively adequate.

WEIGHT

7 Pounds

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 0.50 cm. The right adrenal gland measured 0.50 cm.

INTERPRETED BY

Eric Lindquist, DMV

Spleen

DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Dr. Matthew Olcha

Liver

HOSPITAL NAME

East Meadow VC

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.

REFERRING VET

Dr. Matthew Olcha

INVOICE

38433

Gastrointestinal

The **gastric** wall was thickened with prominent mucosa. Empty lumen. The small intestine and colon were unremarkable.

DATE

6/6/22



PATIENT

Pancreas

Sugar John

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

ULTRASONOGRAPHIC FINDINGS

- Moderate dystrophic left renal changes, minor degenerative right renal changes
- Chronic gastritis pattern
- Hepatic remodeling

BREED

Havanese

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Spayed Female

Recommend 72 IV fluid support, GI protectant protocol, and blood pressure measurements. Blood loss may be owing to GI blood loss from gastritis. A clinical trial of the following may prove effective. Chronic pyelonephritis and infarcts likely the underlying issue on the left kidney primarily. The right kidney appears to have only minor degenerative changes.

AGE

15 Years

Helicobacter/Gastritis protocol

A clinical trial of **Zithromax** (Dogs: 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), **Metronidazole** (10-20 mg/kg p.o. b.i.d.), **Pepcid** (0.5-1 mg/kg s.i.d.) and **Sucralfate** (0.5-2 g/dog PO) or **Omeprazole** (1 mg/kg p.o. s.i.d.) over the next 3 weeks along with a **novel-protein or hydrolyzed diet** with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.

WEIGHT

7 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Matthew Olcha

HOSPITAL NAME

East Meadow VC

REFERRING VET

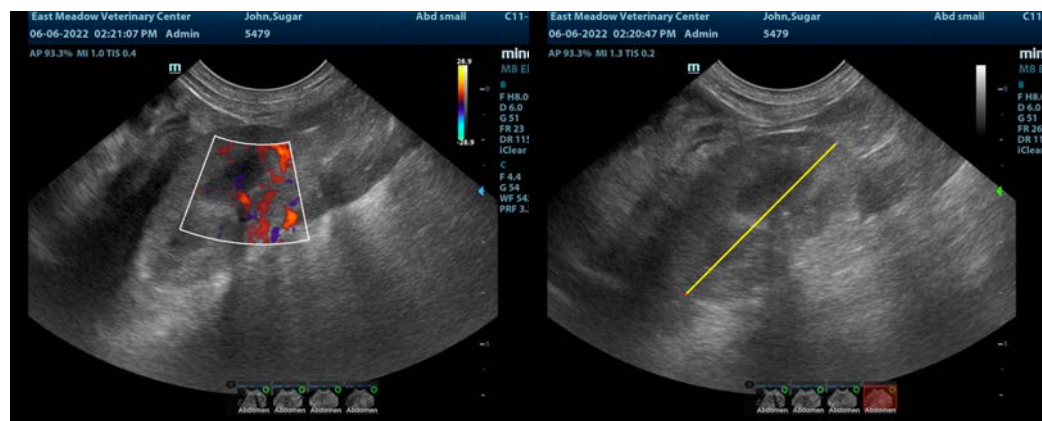
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PATIENT

Sugar John

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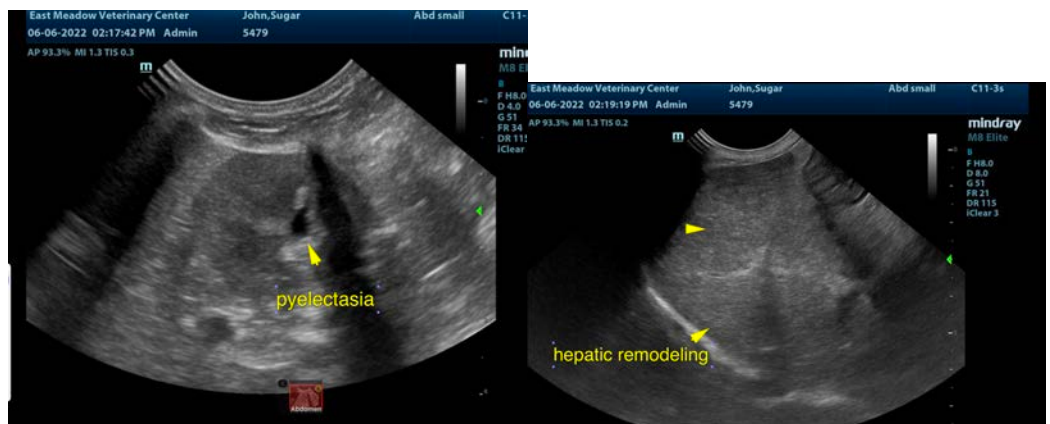
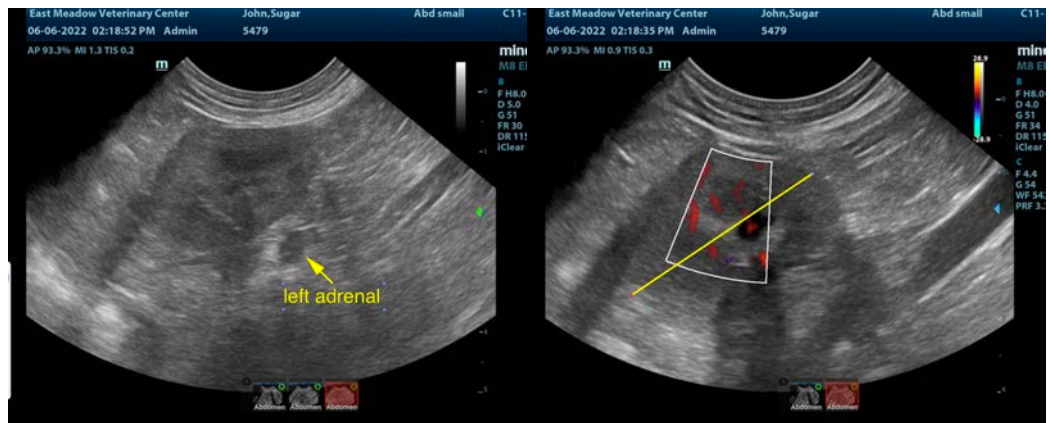
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PATIENT

Sugar John

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.

SPECIES

Canine

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

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BREED

Havanese

SEX

Spayed Female

AGE

15 Years

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