

**DATE PRESENTING CLINICAL SIGNS**

7/13/23

PATIENT

Calvin Carroll

History: Calvin is a 1 Y 6 M old Terrier Mix presenting for ongoing lethargy, anorexia and decline since seen at rDVM. About 48 hours ago not interested in eating. Not interested in treats. Quiet yesterday and taken to Dr. Foster. X-rays looked unremarkable. No obvious FB or obstructive pattern. Started AB's, SQ fluids, Cerenia. Found a piece of fabric in the stool the night prior. No BM since.

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered Male

AGE

1/5/22

WEIGHT

13.3 Pounds

Current Medications: Buprenorphine, Ampicillin, Provable, Metoclopramide, Metronidazole, Protonix.
 Lab Results: See attached.

Radiographs: Dilation of the stomach and proximal duodenum

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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 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 4.38 cm. The right kidney measured 4.29 cm.

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUS

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 right adrenal gland measured 1.79 cm x 0.64 cm at the caudal pole and 0.68 cm at the cranial pole. The left adrenal gland measured 2.03 cm x 0.56 cm at the cranial pole and 0.56 cm at the caudal pole.

HOSPITAL NAME

Animal Emergency
 Hospital

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.

REFERRING VET

Dr. Ruby

INVOICE

23325

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 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.

Gastrointestinal

The upper **gastrointestinal tract** in this patient revealed minor, edematous wall. There was no evidence of foreign bodies. Minor areas of fluctuant fluid accumulation were noted within the lumen with hyperperistalsis. This pattern continued to the ileocecal valve. The colon revealed a fluid filled lumen. This presentation is mild and most consistent with gastrointestinal irritation/inflammation without obstruction. No evidence of foreign bodies.

Pancreas

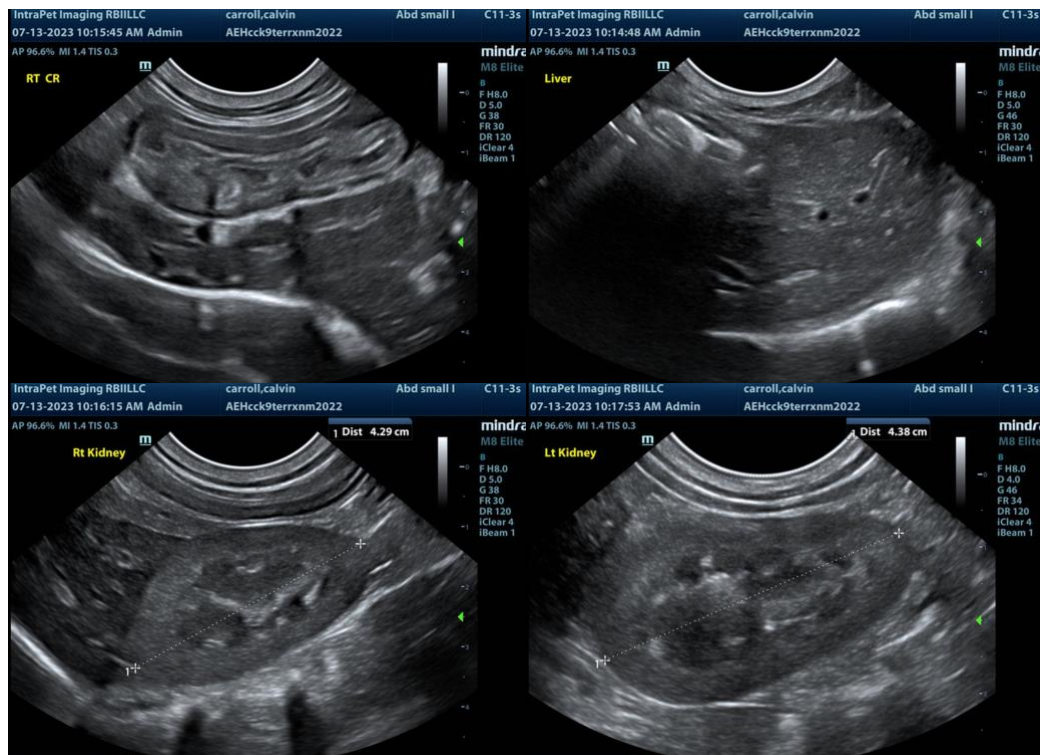
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

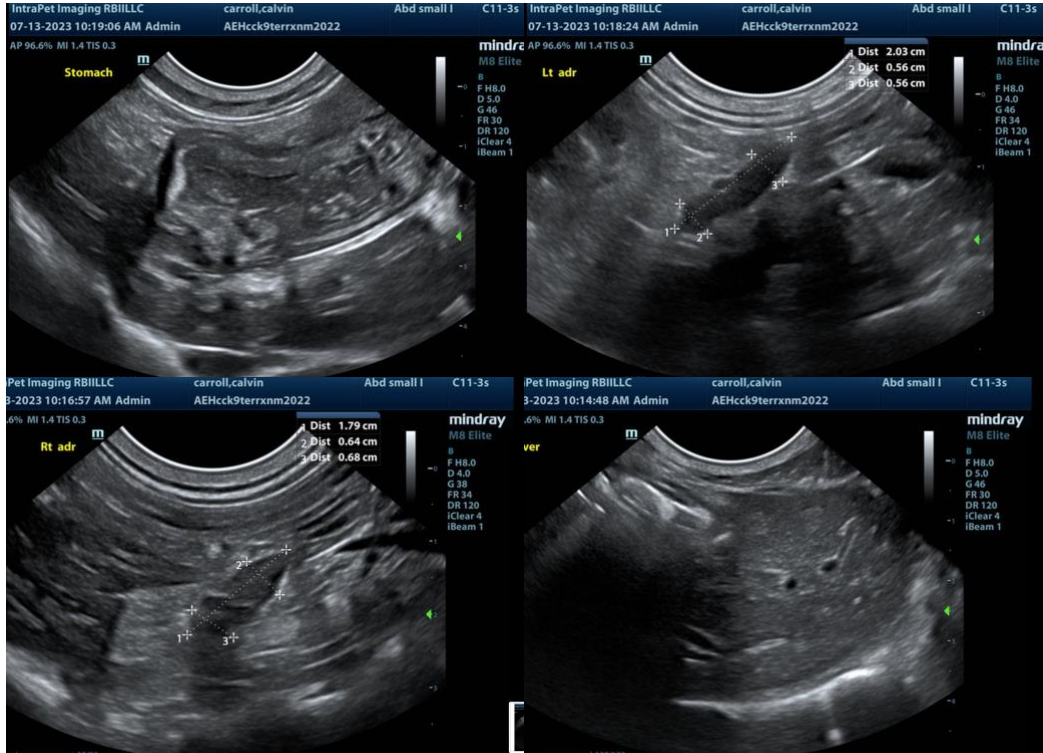
ULTRASONOGRAPHIC FINDINGS

- Nonspecific gastroenteritis presentation

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. Other causes of lethargy, such as thoracic/arrhythmogenic disease or CNS should be investigated. Screening for Addisons is indicated, even though the adrenals appear normal.





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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