



PATIENT

Taffy Kerr

SPECIES

Canine

BREED

Beagle Mix

SEX

Spayed Female

AGE

13 Years

WEIGHT

26 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Callihan

HOSPITAL NAME

Animal Emergency
Care

REFERRING VET

Dr. Loeffler

INVOICE

16478

DATE

7/2/22

PRESENTING CLINICAL SIGNS

History: S: Taffy, 14yo FS Beagle mix, remains hospitalized for gastroenteritis, abdominal discomfort, fever, and UTI. She was started in IVF, Unasyn 30mg/kg, Cerenia, Methadone, Gabapentin. Her Lactate normalized (1.8). Overnight, her fever has persisted, and she has refused food.

Abnormal PE/Chem/CBC/UA Results: BW on admission last night revealed mild azotemia (BUN 55, Cre 2.1), hypokalemia (3.2), neutrophilia (19.9), elevated ALP (460), TBIL (1.4), icteric serum, elevated Lactate (4.1). UA showed rods ++ and pyuria.

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 minor 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 right kidney measured 6.91 cm. The left kidney measured 6.95 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 0.74 cm. The right adrenal gland measured 0.8 cm.

Spleen

The **spleen** revealed a subcapsular hypoechoic nodule, measuring 0.93 cm at the mid body.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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.

Gastrointestinal



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The visible **stomach** was thickened and irregular with loss of detail. Gas penetration into the mass was noted, deriving from the gastrointestinal lumen. Very minor potential for chronic inflammatory disease. Neoplastic criteria is met. FNA indicated. *See Free Abdomen section.

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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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Free Abdomen

A mid to caudal abdominal **lymph node** was mildly enlarged, measuring 1.28 cm. Free fluid was noted in the abdomen adjacent to the spleen. The cranial abdomen revealed a large amount of hyperechoic ill-defined mesentery with regional free fluid. The mesentery encompassed a mixed hypoechoic mass that appeared to be deriving from the upper gastrointestinal tract or stomach. Multiple lymph nodes were also enlarged in the region of the mass with inflammation throughout the cranial abdomen.

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ULTRASONOGRAPHIC FINDINGS

- Upper GI neoplastic pattern with regional peritonitis and free fluid
- Subcapsular splenic nodule
- Multiple enlarged lymph nodes in the region of the mass
- Age-related hepatic changes

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the accessible portion of the mass is recommended, as well as FNA of the regional lymph nodes. Prognosis is guarded to poor depending upon cytology results and response to eventual chemotherapy.

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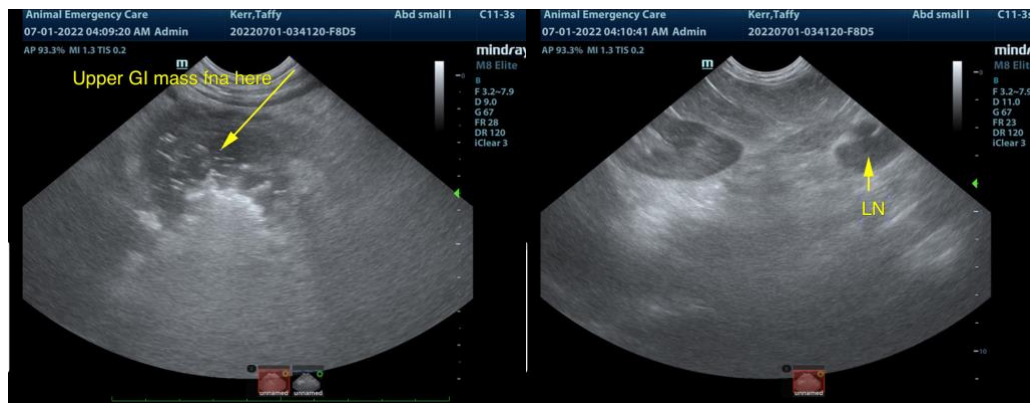
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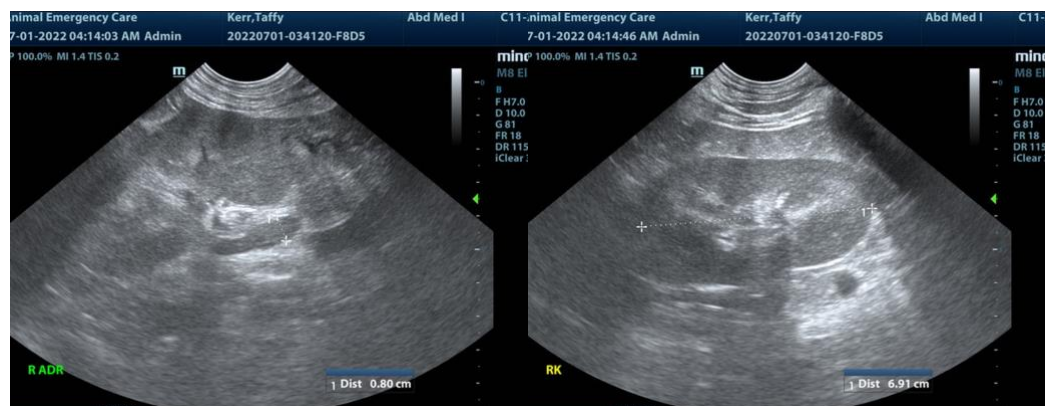
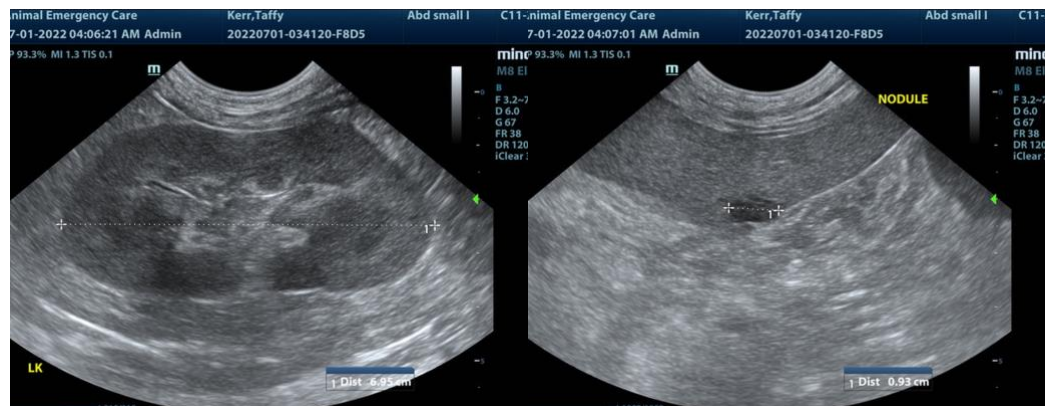
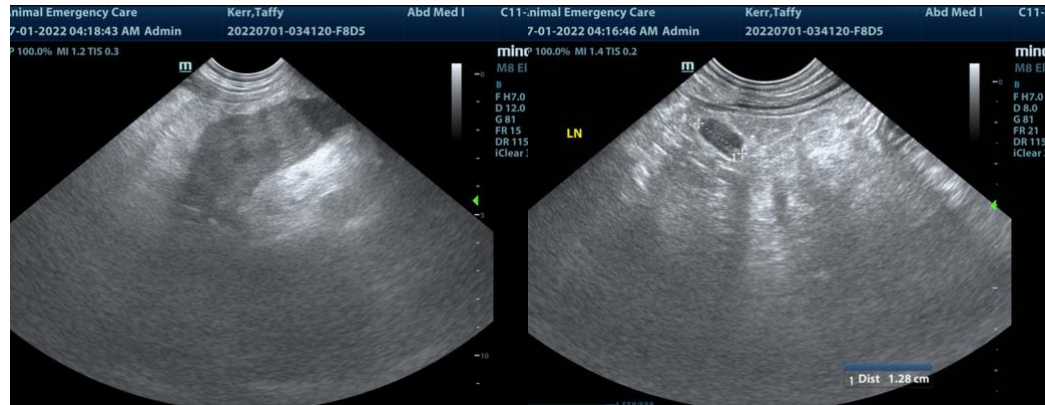
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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