



PATIENT

Draper Miller

SPECIES

Canine

BREED

Cattle Dog Mix

SEX

Neutered Male

AGE

11 Years 7 Months

WEIGHT

72.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Sig Nottingham

HOSPITAL NAME

All Creatures AH of SH,
Inc.

REFERRING VET

Dr. Sig Nottingham

INVOICE

16549

DATE

7/7/22

PRESENTING CLINICAL SIGNS

History: Lethargic, decreased activity, hungry a lot, panting a lot, decreased strength and muscle loss per O. O thought P was painful. Recent diagnosis of pancreatitis at ER.

Abnormal PE/Chem/CBC/UA Results: Overweight. Distended on pendulous abdomen. Dental disease. R/O cushings, hypothyroid, liver disease, pancreatitis, neoplasia, gall bladder disease, etc. Labs: Increased Neutrophils(14,421), decreased Eosinophils(17), decreased Albumin(2.4), increased ALT(1,297), increased AST(200), increased ALP(1,804), increased GGT(208), increased T. Bili(0.4), increased Lipase(875), Total T4 decreased(0.5), Free T4 normal(1.0), TSH normal(0.24) UA Sp. G. 1.020, No UTI, 1+ protein

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 right kidney measured 7.1 cm. The left kidney measured 7.0 cm.

Adrenal Glands

The **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 was visualized obliquely, measuring 0.6 cm. The right adrenal gland was visualized obliquely, measuring 1.0 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** revealed increased portal markings and nonspecific minor swelling. The gallbladder and common bile duct were unremarkable. No evidence of posthepatic disease. A minor amount of biliary sand was noted.

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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

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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 large amount of **abdominal fat** was noted in this patient.

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Neutered Male

- Nonspecific hepatopathy
- Large amount of abdominal fat

ULTRASONOGRAPHIC FINDINGS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

11 Years 7 Months

Acute insult, such as leptospirosis or mushroom toxicity should be considered in this patient. Coagulation panel, Ultrasound guided FNA of the liver is indicated. Leptospirosis titers is indicated. Ampicillin, metronidazole, nutraceuticals and IV fluid support are all indicated. No evidence or suspicion of neoplasia.

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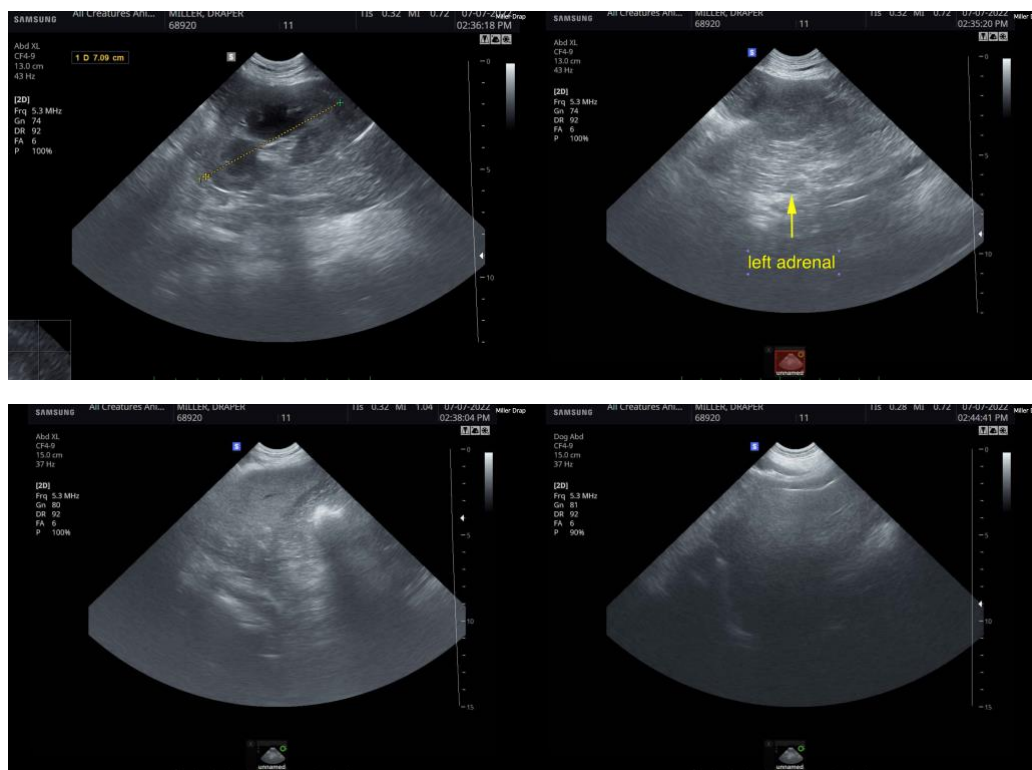
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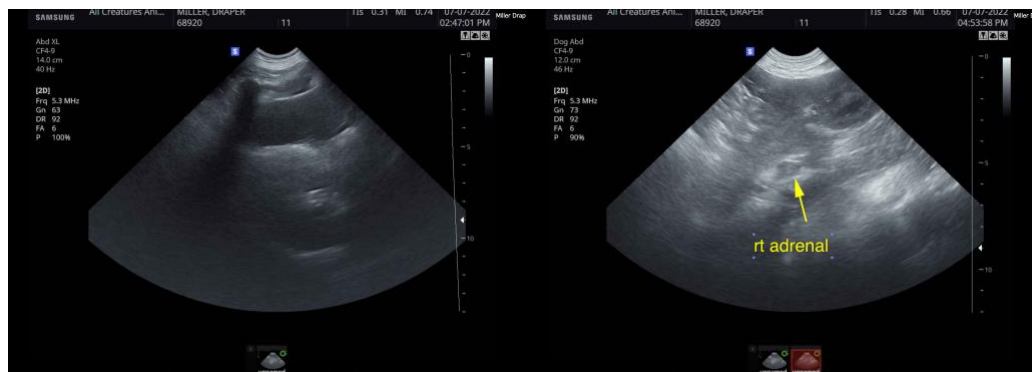
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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