



**PATIENT**

Kona Pacheco

**SPECIES**

Canine

**BREED**

German Shepherd Dog

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

79.2 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jolee Stegemoller

**HOSPITAL NAME**

North Idaho AH

**REFERRING VET**

Dr. Talitha Neher

**INVOICE**

24546

**DATE**

8/11/21

**PRESENTING CLINICAL SIGNS**

Was seen at ER last night for vomiting and diarrhea of 3 day duration. Owner gave Zofran (unknown dose). Was Meds: Sucralfate slurry, metro 500mg, famotidine (did not get today), owner had been giving meloxicam but stopped when she started getting sick. Unknown exposure to anything specific. Abnormal PE/Chem/CBC/UA Results: T - 105.2, severely dehydrated, melena (reported by owner) and hematochezia (in hospital). Hematemesis also reported by owner. Weak, but ambulatory. CBC - RBC 8.79, HCT 53.3%, HGB 20.2, MCV 60.6, WBC 7.58, Neu 1.63 with bands, Mono 3.78, Plt 31 (manual count of 18k) Chem - SDMA 28, Cre 1.8, BUN 51, Phos 8.0, Ca 8.5, unable to read cholesterol or amylase, K 3.9 UA - USG 1.025, pH 5, Leu 25/uL, Proteinuria 30mg/dL, Bld 250/uL, Sedivue detects cocci.

**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 8.1 cm. The left kidney measured 7.9 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 2.9 cm x 0.46 cm at the cranial pole and 0.56 cm at the caudal pole. The right adrenal gland measured 2.9 cm x 0.45 cm at the cranial pole and 0.36 cm at the caudal pole.

**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** 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 **stomach** was overdistended with anechoic fluid as well as some echogenic chyme. The pylorus presented approximately 2.0 cm of soft shadowing material such as grass ball or similar in the pyloric



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outflow, preceded by chyme and anechoic fluid. This may pass on its own or be evacuated. I do not believe this to be surgical at this time. However, if remaining gastric stasis occurs, then surgical intervention would be necessary. The small intestine was empty.

**SPECIES**

Canine

***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.

**BREED**

German Shepherd Dog

**ULTRASONOGRAPHIC FINDINGS**

- Structurally unremarkable abdomen with minor gastric stasis and 2.0 cm soft shadowing material in the pylorus – may represent dissolving medication or soft foreign matter.

**SEX**

Spayed Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

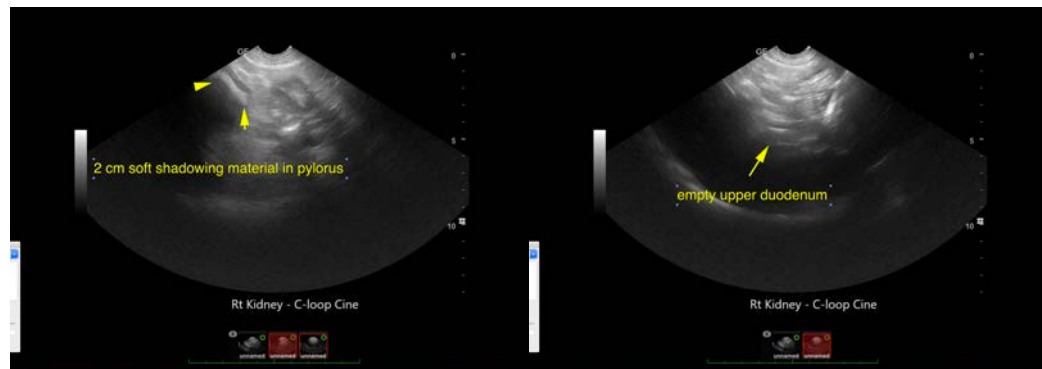
Infectious disease such as Leptospirosis or similar should be considered. Supportive care should prove effective. There is no evidence of significant structural disease of the GI tract or kidneys other than the gastric stasis and reported pyloric material. If this patient is still clinical after the next 24-36 hours, recheck sonogram primarily of the GI tract and pyloric outflow (SDEP 12/13/14) would be ideal.

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**WEIGHT**

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**INTERPRETED BY**

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DABVP, Cert. IVUSS

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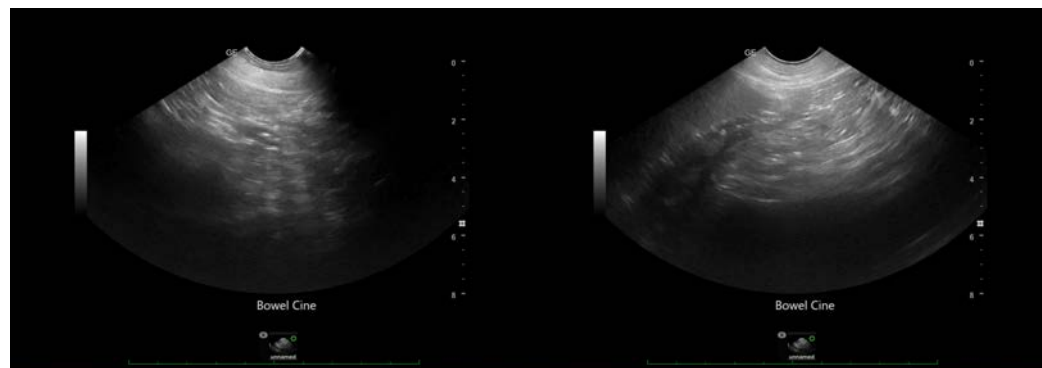
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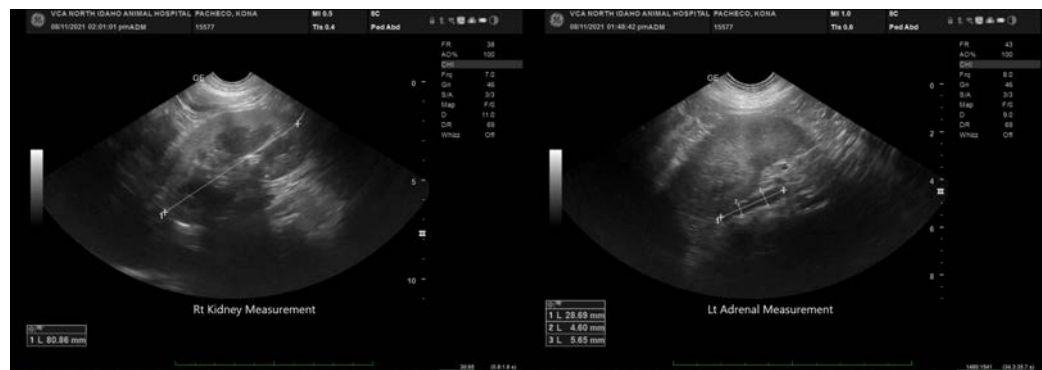
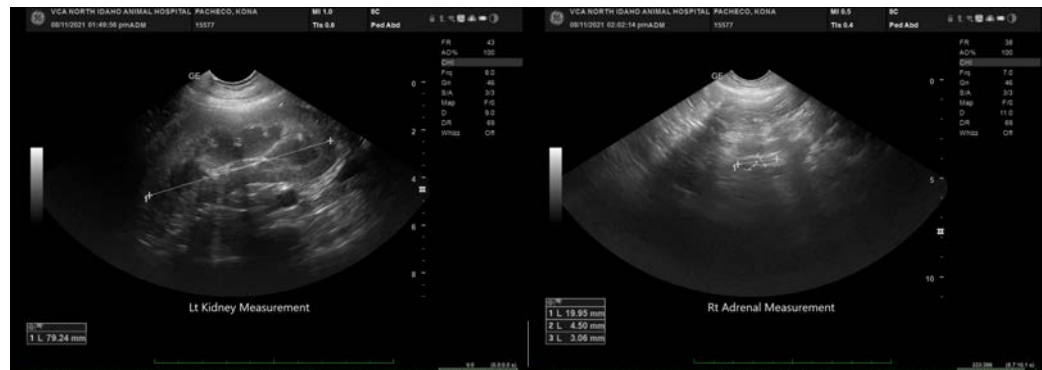
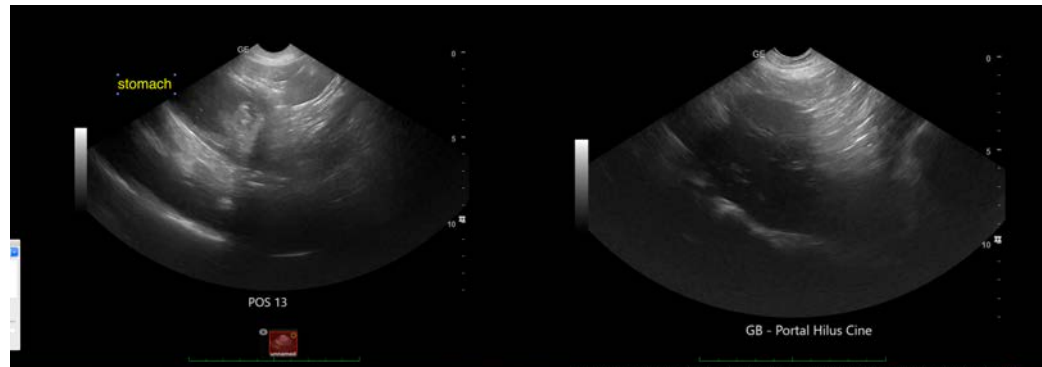
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
[info@SonoPath.com](mailto:info@SonoPath.com)