

PATIENT PRESENTING CLINICAL SIGNS

Rubi Eichenholtz

SPECIES

Canine

BREED

Rottweiler

SEX

Spayed Female

AGE

5 years

WEIGHT

116 lbs

History: P IS A 5Y7M OLD F/S ROTTWEILER PRESENTING TODAY FOR POSSIBLE BLOCKAGE.. O STATES P DID NOT EAT TOY WAS PLAYING WITH TOY O STATES P SAW A PIECE IN FECES BUT TOY IS STILL INTACT A COUPLE NIGHTS AFTER PLAYING WITH TOY P BECAME LETHARGIC. P WAS HEAVY BREATHING WAS WHY P PRESENTED AT EMERGENCY. P LAST VOMITTED 8/2/21. TWO DAYS AGO BEGAN LIQUID DIARRHEA NO BLOOD. HAS NOT HAD BM IN 1.5 DAYS. P NOT EATING TODAY.

Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no exudate AU; No cough on tracheal palpation. Oral Cavity 3/5dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur/arrhythmia or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: N Musculoskeletal: Normal ambulation, no lameness noted. No pain on palpation of limbs, normal flexion/extension present in all joints of all limbs. BCS 5/9 Neurological: Appropriate

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 was noted. Ureteral papillae were normal.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 5.0 cm. The right kidney measured 6.0 cm.

IMAGING PERFORMED BY

Dr. Rivera

Adrenal Glands

HOSPITAL NAME

DPC VH

The **adrenal glands** were not visualized.

REFERRING VET

Dr. Feldt

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 was noted.

INVOICE

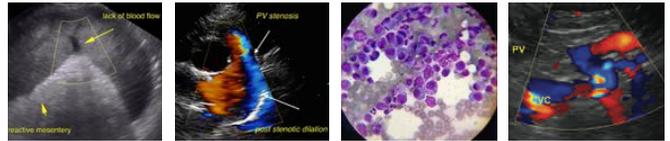
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DATE

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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



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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.

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Gastrointestinal

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Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. The stomach presented retention of ingesta. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

SEX

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Pancreas

AGE

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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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ULTRASONOGRAPHIC FINDINGS

Minor retention of ingesta.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Transit of chyme into the small intestine appeared to be adequate. There was no obvious evidence of foreign matter. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. I recommend a fresh fecal smear and fecal floatation analysis.

IMAGING PERFORMED BY

Dr. Rivera

HOSPITAL NAME

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REFERRING VET

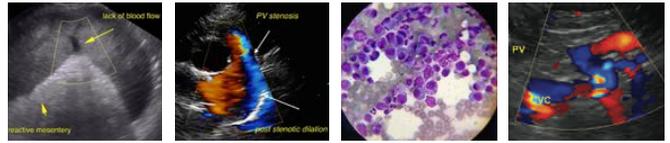
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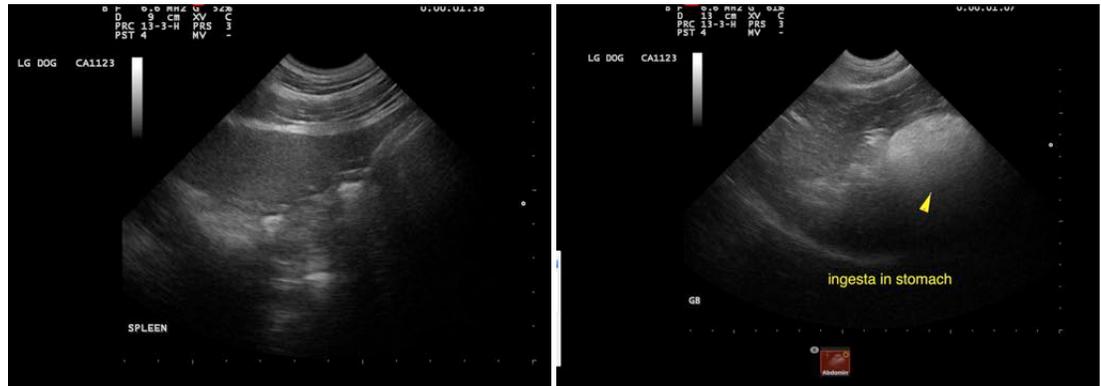
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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