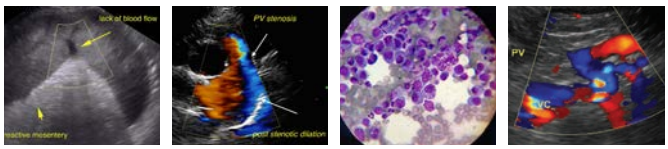
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Lanto Kaeser

SPECIES
Canine

BREED
Mix

SEX
Neutered Male

AGE
11 Years

WEIGHT
51.7 Pounds

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Shari Reffi, CVT

HOSPITAL NAME
Newton Vet Hospital

REFERRING VET
Dr. Chun

INVOICE
24584

DATE
8/12/21

PRESENTING CLINICAL SIGNS

Vomiting, diarrhea, anorexia, lethargy x 2 days. Current meds: IVF, IV Ampi, IV Metro, IV Cerenia. Abnormal PE/Chem/CBC/UA Results: Lym 0.43, BUN 51.4, Crea 1.8, phos 12.3, Ca 7.2, Glob 3.7, Tbil 0.9, K+ 3.6

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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. Mineralization noted in both kidneys. The left kidney measured 5.76 cm. The right kidney measured 5.39 cm. Changes were minor.

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 2.05 cm x 1.08 cm at the cranial pole and 0.66 cm at the caudal pole. The left adrenal gland measured 1.52 cm x 0.44 cm at the cranial pole and 0.31 cm at the caudal pole.

Spleen

The **spleen** revealed multifocal mineralizations. A nodular clot was noted at the splenic hilus, measuring approximately 1.0 cm. Appeared to be a splenic vein ectasia with thrombosis or possible proliferative neoplastic lesion.

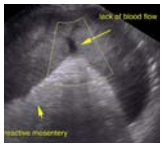
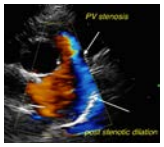
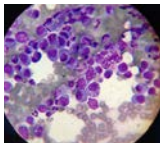
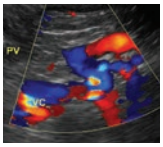
Liver

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

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 most consistent with gastrointestinal irritation/inflammation without obstruction.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Lanto Kaeser

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

11 Years

WEIGHT

51.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton Vet Hospital

REFERRING VET

Dr. Chun

INVOICE

24584

DATE

8/12/21

Moderate reactive mesentery and localized areas of free fluid noted. If the patient is particularly painful upon the mid abdomen, bowel thrombosis may be an issue given the splenic lesion.

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

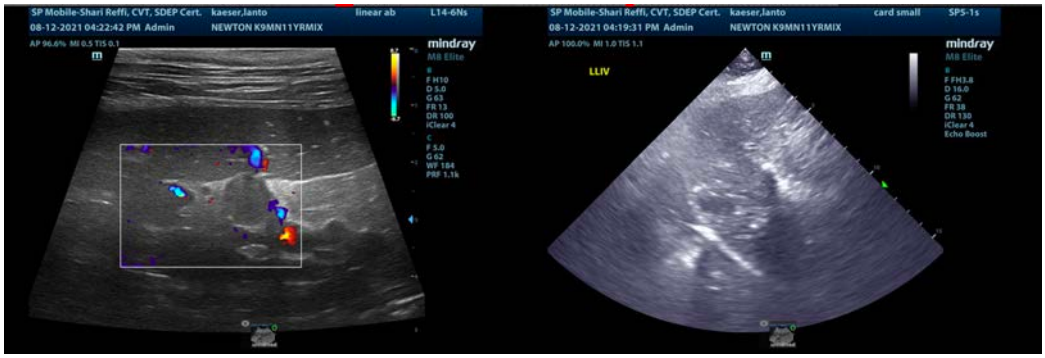
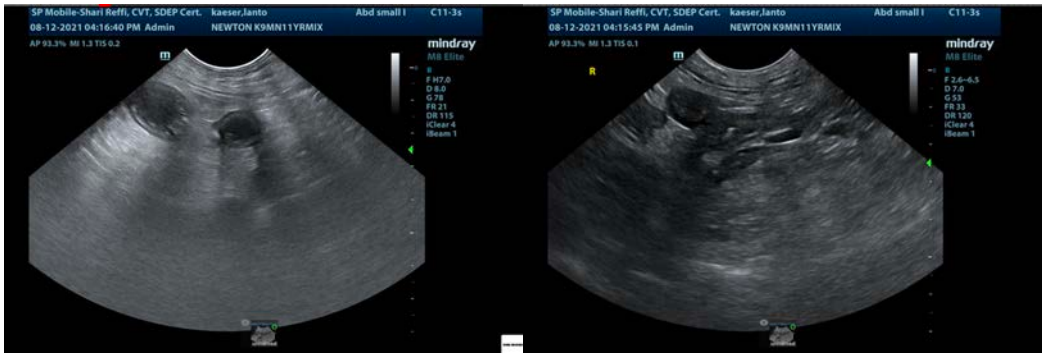
- Splenic thrombus and mineralized spleen – possible underlying neoplasia
- Gastroenteritis pattern with reactive mesentery – possible intestinal thrombosis
- Urinary bladder debris and renal mineralization

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

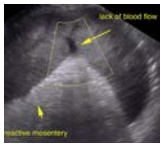
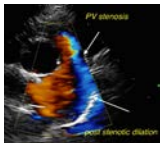
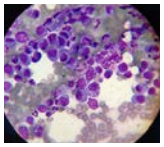
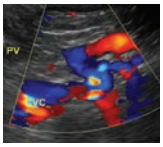
Full coagulation panel with D-dimers and FDP evaluation warranted to assess the hyperthrombotic state prior to ultrasound guided FNA of the spleen and liver. Plasma expanders and plasma transfusion warranted. Pain management, broad-spectrum antibiotics, recheck sonogram in 2-4-48 hours. Prognosis is guarded. This is a very complicated presentation.

For an additional charge, internal medicine consult can be utilized through Sonopath.com. You can select the internal medicine drop down at http://spa.sonopath.com/.

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Lanto Kaeser

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

11 Years

WEIGHT

51.7 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton Vet Hospital

REFERRING VET

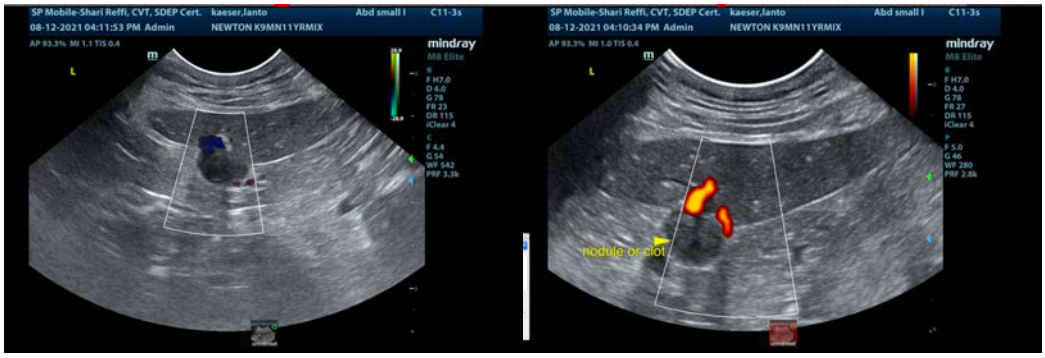
Dr. Chun

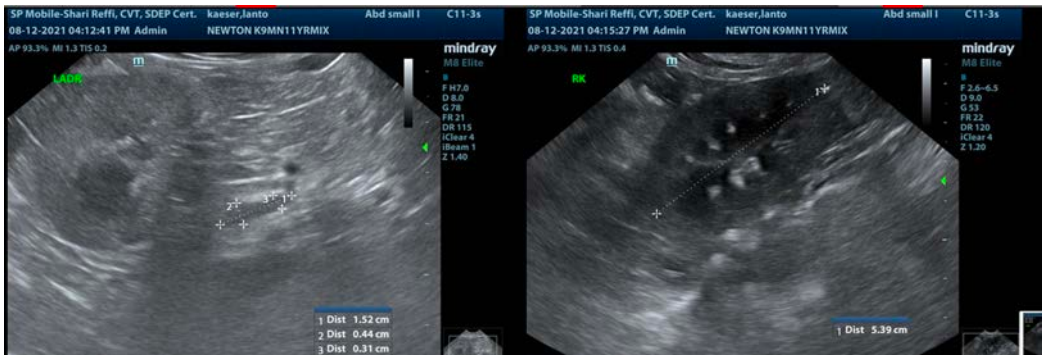
INVOICE

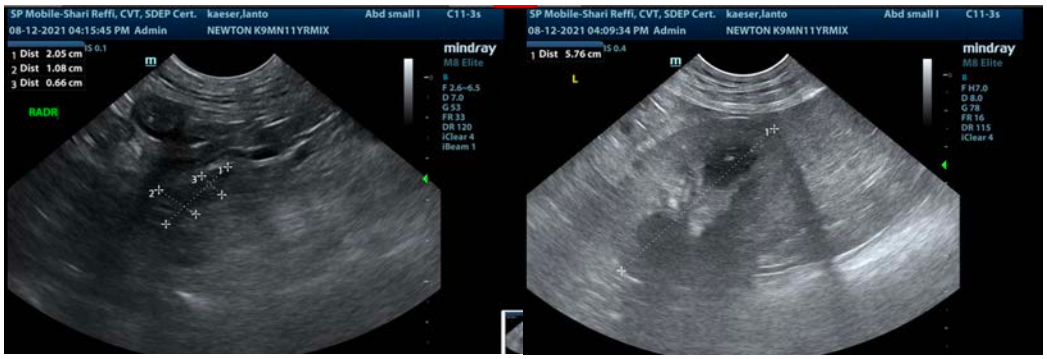
24584

DATE

8/12/21







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