

**DATE PRESENTING CLINICAL SIGNS**

8/13/21

History: 08-12-2021 Notes: Vomiting started Monday - bile 1x/day - spoke with rDVM and recommended holding food for 24hrs starting today, hold on anti-nausea meds When she vomited today appeared to have leaves in it Owners noted that her breathing seems labored, had what appeared to be a muscle spasm in her legs while she was resting today Has had no diarrhea Not a known eater of things No known dietary indiscretion Has had episodes like this 3x before - last time in December - rDVM have anti-nausea meds and SQ fluids - started on Purina pro plan hydrolyzed diet. **Assessment:** Vomiting, Hyporexia.

SPECIES

Plan: Reviewed history and physical exam - appears painful on abdominal palpation, no obvious crackles in the lungs

Canine

Discussed various differentials of vomiting: GI vs extra GI vs kidney vs liver. Discussed differentials heavy breathing/panting: aspiration vs pain

BREED

Recommended hospitalization, fluids, full BW, abdominal and thorax rads, pain management, supportive care as needed - owner agreed to plan. Discussed the possibility of needing further GI workup in the future if intermittent vomiting episodes continue.

Labrador Retriever

SEX

Current Medications: Unasyn, Buprenorphine, Protonix.

Spayed Female

Lab Results: Attached separately.

Radiographs: Xray Thorax 2 view: No obvious abnormalities noted

ABD Xray: Gas distended colon Gassy pattern in the intestines No obvious obstruction.

AGE

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

8/12/09

Sedation: not needed

Stat Report: not requested

WEIGHT**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

51.4 Pounds

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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. Slight mineralization noted. The left kidney measured 5.92 cm. The right kidney measured 5.58 cm.

HOSPITAL NAME

Animal Emergency
Hospital

REFERRING VET

Dr. Nacke-Horney

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 2.85 cm x 1.01 cm at the cranial pole and 0.79 cm at the caudal pole. The left adrenal gland measured 3.03 cm x 0.63 cm at the caudal pole and 0.72 cm at the cranial pole.

INVOICE

24683

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 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. 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

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

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.

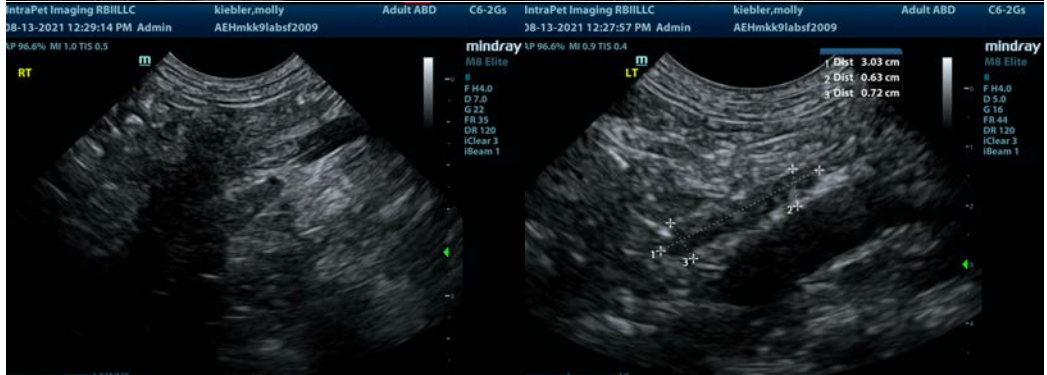
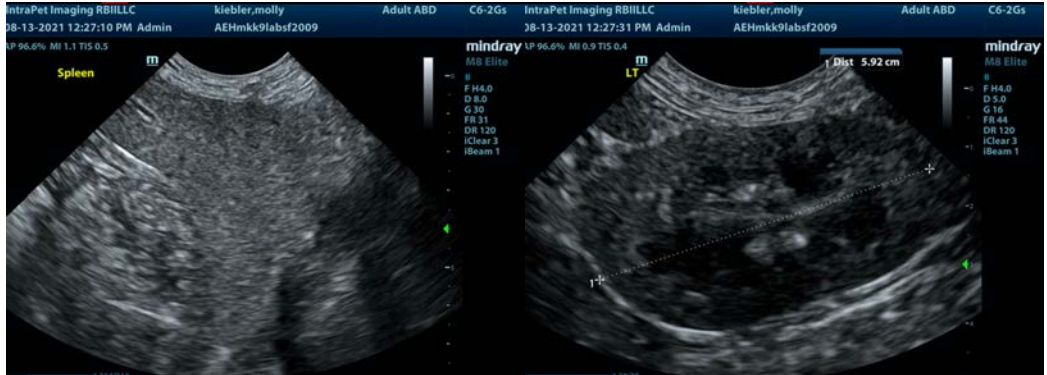
ULTRASONOGRAPHIC FINDINGS

- Geriatric abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant disease. Supportive care should prove effective. Dietary indiscretion, food intolerance or similar suspected. Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.





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.

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