



PATIENT PRESENTING CLINICAL SIGNS

Charlie Reilly re check scan on extensive pancreatitis pt developed thrombocytopenia and leukopenia which have been improving with steroids Current meds prednisolone 5 mg SID Plasmalyte IVF Metro

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

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.

Yorkie

SEX

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. The left kidney revealed slight irregular contour and trace pyelectasia. The left kidney measured 4.12 cm. The right kidney measured 4.13 cm.

Neutered Male

AGE

Adrenal Glands

7 Years

WEIGHT

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 2.42 cm x 0.49 cm at the caudal pole and 0.67 cm at the cranial pole. The left adrenal gland measured 1.28 cm x 0.52 cm at the caudal pole and 0.49 cm at the cranial pole.

12

INTERPRETED BY

Spleen

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Liver

Jenn

HOSPITAL NAME

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

Rockaway AH

REFERRING VET

Gastrointestinal & Pancreas

Dr. Maniar

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.

INVOICE

24731

DATE

The **pancreas** revealed persistent mixed hypoechoic irregular changes. Subxiphoid palpation is recommended to assess for pain or discomfort associated with the pancreas. The transverse colon appeared to be involved in the pathological process. The region measured approximately 3.0 cm and was undifferentiated. Direct correlation to the intestine could not be completely defined.

8/16/21



PATIENT

Charlie Reilly

ULTRASONOGRAPHIC FINDINGS

- Mixed hypochoic, irregular pancreatic changes with possible involvement of the transverse colon.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend continued treatment if the patient is stable. However, underlying pathology remains present in the pancreas and area of the transverse colon. This should be monitored carefully +/- sampled with ultrasound guided FNA.

BREED

Yorkie

SEX

Neutered Male

AGE

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WEIGHT

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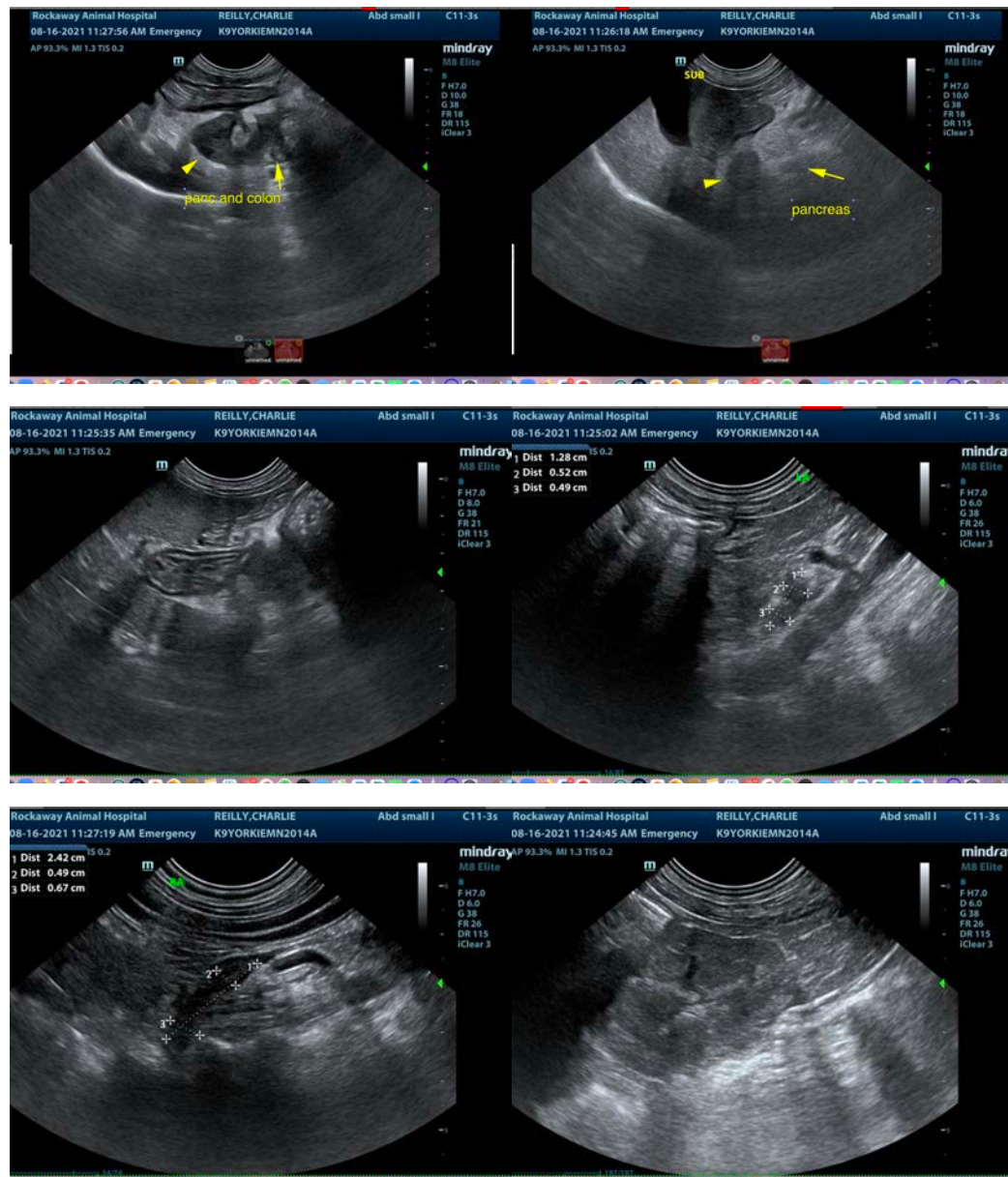
Dr. Maniar

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PATIENT

Charlie Reilly

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.

SPECIES

Canine

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.

BREED

Yorkie

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

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SEX

Neutered Male

AGE

7 Years

WEIGHT

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