



PATIENT **PRESENTING CLINICAL SIGNS**

Roxy Andreas

History: Roxy came into the clinic on 7-24-23 for ADR/vomiting. She started vomiting after E/D, vomits 10+ times over night after drinking. She's very lethargic and has had to eat outside for the last year because she would eat fast and vomit. She has Cushings, but she is not on current treatment. She is also hypothyroid, which she does take medication for (0.8 mg thryo-tabs). We have tried Cerenia and Metoclopramide to treat but she continues to vomit.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: PE: STIFF GAIT, CREPITUS BOTH STIFLES (PREVIOUS SX), DRY/DULL COAT, LETHARGIC Chem/cbc (ALL ABNORMAL VALUES): Reticulocyte Hemoglobin 23.9 (24.5 - 31.8 pg), WBC 26.5 (4.9 - 17.6 K/ μ L), Neutrophils 22.605 (2.94 - 12.67 K/ μ L), Monocytes 1.617 (0.13 - 1.15 K/ μ L), Platelets 768 (143 - 448 K/ μ L), Phosphorus 7.0 (2.5 - 6.1 mg/dL), Sodium 161 (142 - 152 mmol/L), Anion Gap 30 (11 - 26 mmol/L), ALT 136 (18 - 121 U/L), AST 70 (16 - 55 U/L), ALP 1,187 (5 - 160 U/L), GGT 41 (0 - 13 U/L), Lipase 366 (0 - 250 U/L), Creatine Kinase 442 (10 - 200 U/L), Spec cPL 310 (0 - 200 μ g/L), Total T4 0.4 (1.0 - 4.0 μ g/dL), Free T4 (ng/dL) <0.3 (0.6 - 3.7 ng/dL) URINALYSIS: done at same time, results looked normal.

BREED

Pitbull Mix

SEX

Spayed female

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

14 years

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.

WEIGHT

50.6 lbs

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 6.6 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kaitlyn McDaniel

Adrenal Glands

The left **adrenal gland** was at the upper limits of normal and measured 2.0 x 0.92 cm at the cranial pole and 0.73 cm at the caudal pole. The right adrenal gland measured 1.6 x 0.6 cm.

HOSPITAL NAME

Elizabeth AH

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.

REFERRING VET

Dr. Allyn

INVOICE

76411

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

DATE

8/2/23



PATIENT

Roxy Andreas

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.

SPECIES

Canine

Gastrointestinal

BREED

Pitbull Mix

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.

SEX

Spayed female

Pancreas

AGE

14 years

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.

WEIGHT

50.6 lbs

ULTRASONOGRAPHIC FINDINGS

Prominent left adrenal gland. Hyperplasia with a mild potential for pheochromocytoma or adenocarcinoma.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

No other evidence of pathology.

IMAGING PERFORMED BY

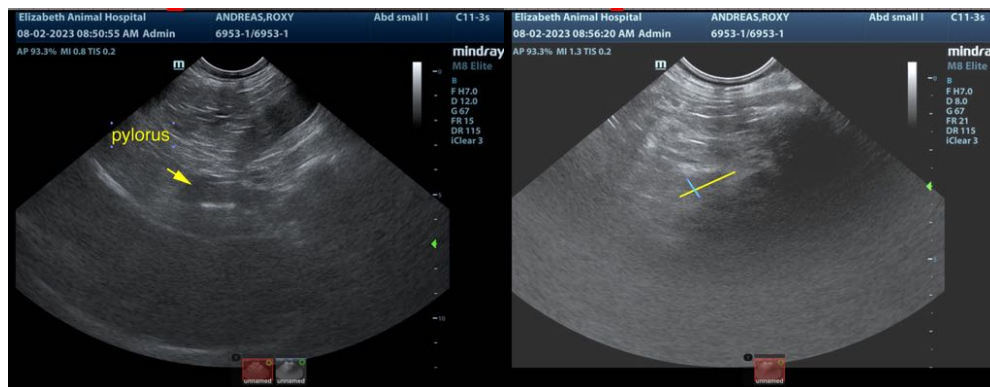
Kaitlyn McDaniel

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If hypertension is an issue then urine catecholamine is indicated. The cause of vomiting is unclear unless the left adrenal gland represents a small pheochromocytoma as this pheochromocytoma can have secondary changes to the GI tract. However, structurally the GI tract appeared normal.

HOSPITAL NAME

Elizabeth AH



REFERRING VET

Dr. Allyn

INVOICE

76411

DATE

8/2/23



PATIENT

Roxy Andreas

SPECIES

Canine

BREED

Pitbull Mix

SEX

Spayed female

AGE

14 years

WEIGHT

50.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kaitlyn McDaniel

HOSPITAL NAME

Elizabeth AH

REFERRING VET

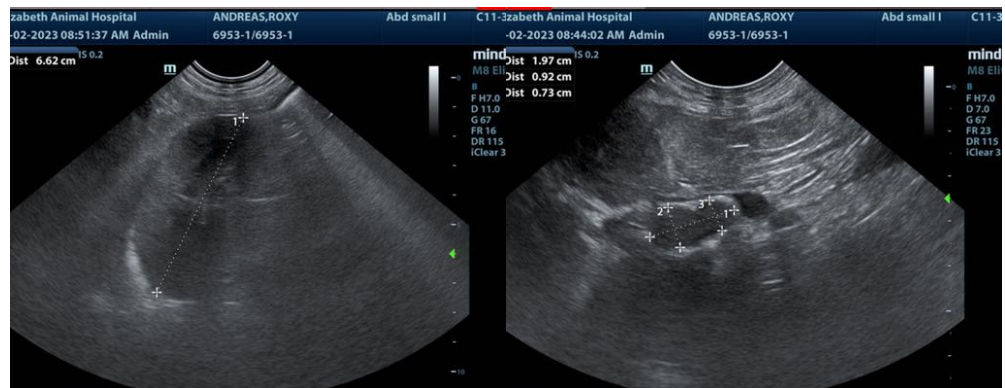
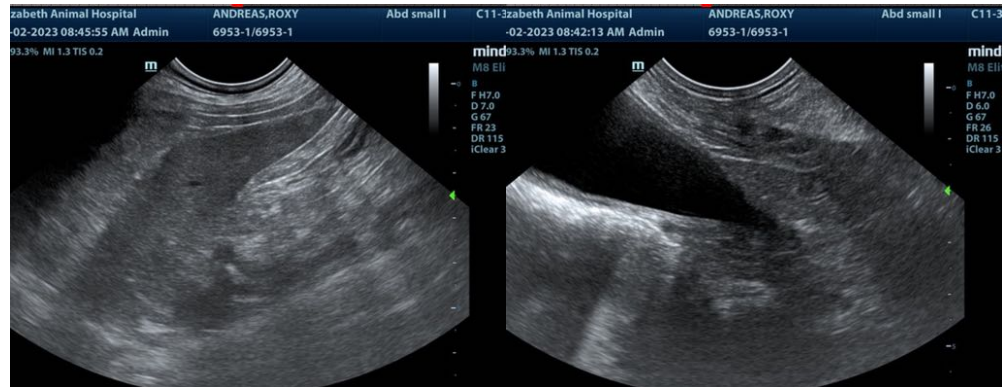
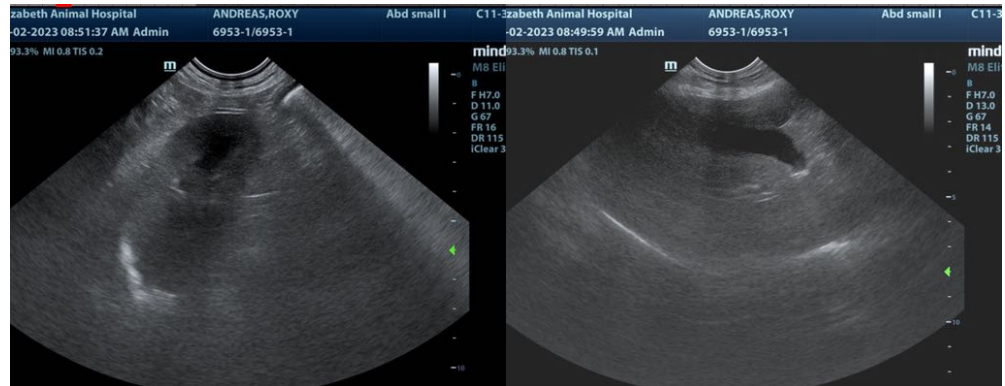
Dr. Allyn

INVOICE

76411

DATE

8/2/23



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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