



PATIENT

Gimli Wilkins

SPECIES

Canine

BREED

English Bulldog

SEX

Neutered Male

AGE

8 Years

WEIGHT

68 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Marti Williams

HOSPITAL NAME

Limestone VH

REFERRING VET

Dr. Marti Williams

INVOICE

24941

DATE

8/25/21

PRESENTING CLINICAL SIGNS

Acute onset of vomiting bile at least 8 times over the past 24 hours. No known history of GI indiscretion. Labwork normal except amylase 1819, Neutrophilia 21k. Telemedicine Radiographic Interpretation and diagnosis: These findings strongly suggest pancreatitis. An abdominal ultrasound is warranted to better characterize and/or confirm these changes. cPLi test may help. Rule outs include focal right liver lobe enlargement, pyloric mass/ foreign body, mesenteric lymphadenopathy, intestinal mass, mesenteric abscess. Ultrasound is recommended to corroborate/better characterize. Considerations for hepatomegaly include benign nodular hyperplasia/regeneration, Cushing's disease/steroid hepatopathy, diabetes mellitus, vacuolar hepatopathy, hepatic lipidosis, neoplasia, other causes are not excluded. This should be clinically correlated and if clinically indicated an ultrasound is warranted. Rule outs for potential mild splenic changes include: nodules, extramedullary hematopoiesis, benign nodular hyperplasia, lymphoid hyperplasia. An abdominal ultrasound is warranted to better characterize and/or confirm these changes.

Abnormal PE/Chem/CBC/UA Results: See history

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 were noted. Ureteral papillae were normal. The iliac trifurcation was unremarkable.

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. The left kidney measured 6.48 cm. The right kidney measured 7.28 cm

Adrenal Glands

The **left adrenal gland** was 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 left adrenal gland measured 0.68 cm.

The **right adrenal gland** was subnormal in size, measuring 0.40 cm at maximum width.

Spleen

The **spleen** revealed a mixed hypoechoic, undifferentiated mass measuring 2.0 cm. Capsular expansion noted, concerning for an aggressive pathology.

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. Increased portal markings present. Slight gallbladder wall echogenicity and excessive thickness noted.



PATIENT

Gimli Wilkins

SPECIES

Canine

BREED

English Bulldog

SEX

Neutered Male

AGE

8 Years

WEIGHT

68 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Marti Williams

HOSPITAL NAME

Limestone VH

REFERRING VET

Dr. Marti Williams

INVOICE

24941

DATE

8/25/21

Gastrointestinal

Gastric fluid accumulation noted. No evidence of foreign body. Gastric wall revealed normal curvilinear patterns. The duodenum was edematous with a minor amount of luminal fluid present. Minor duodenal spasming noted. The descending colon was unremarkable.

Pancreas

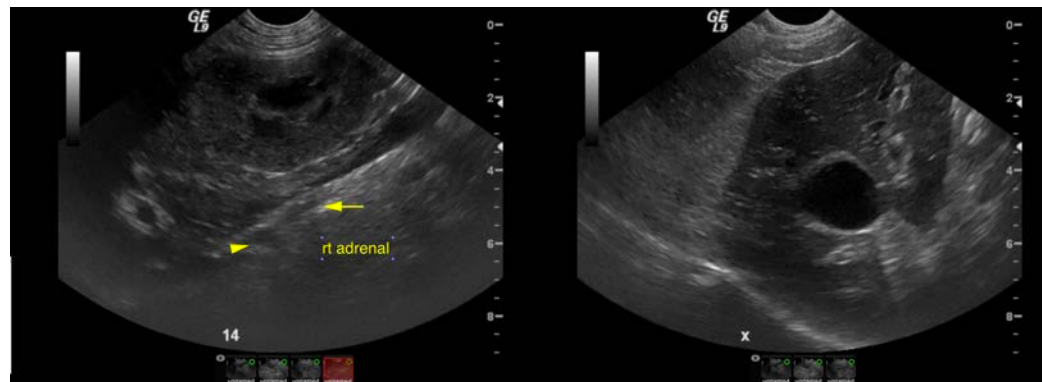
The right limb of the **pancreas** presented heterogeneous mixed echogenic changes with edema pattern. Ill-defined pancreatic body.

ULTRASONOGRAPHIC FINDINGS

- Gastroduodenitis and minor pancreatitis
- Small splenic mass
- Minor hepatic remodeling

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend treatment for pancreatitis and gastroenteritis. Once stable, splenectomy should be considered. Ultrasound guided FNA of the spleen could be considered. Rapid view of the heart (Position #3 SDEP) would be recommended to assess for right auricular/pericardial pathology. Round cell neoplasia and hemangiosarcoma are primary differentials on the splenic lesion. Hyperplasia possible.





PATIENT

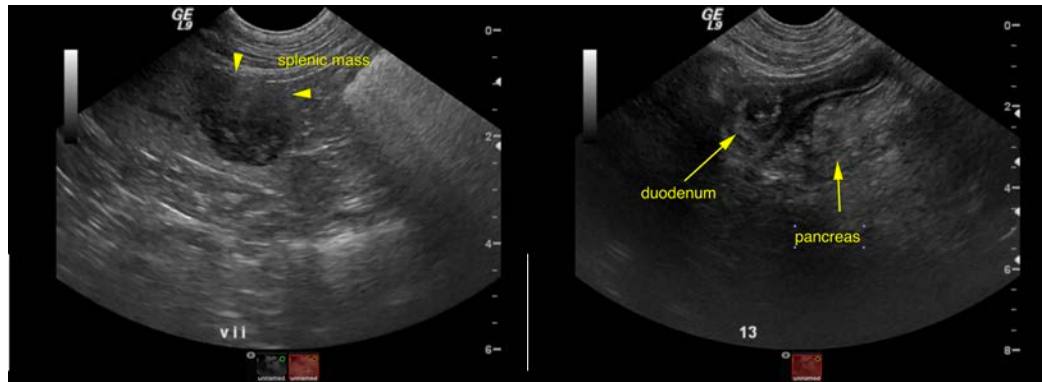
Gimli Wilkins

SPECIES

Canine

BREED

English Bulldog



SEX

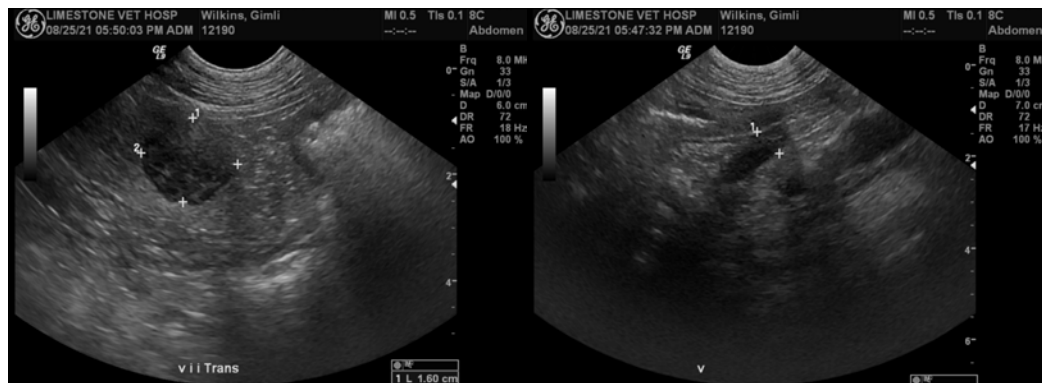
Neutered Male

AGE

8 Years

WEIGHT

68 Pounds



INTERPRETED BY

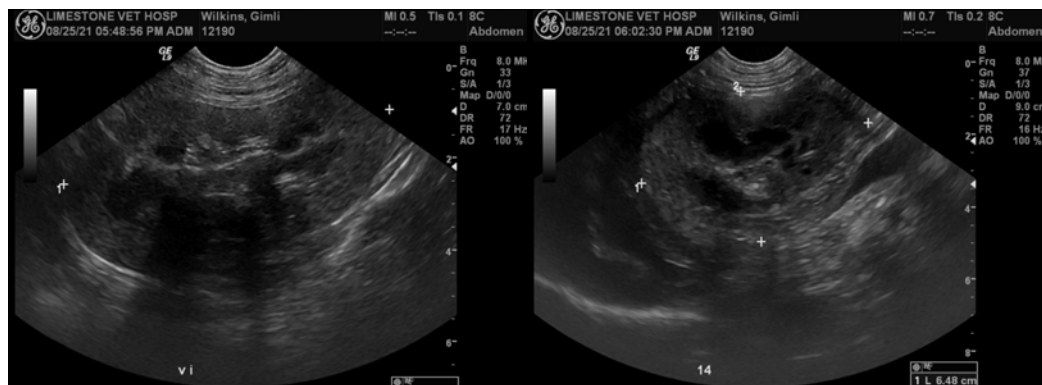
Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Marti Williams

HOSPITAL NAME

Limestone VH



REFERRING VET

Dr. Marti Williams

INVOICE

24941

DATE

8/25/21

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