**PATIENT**

Kai Fritz

SPECIES

Canine

BREED

Chihuahua

SEX

Neutered Male

AGE

7 Years

WEIGHT

9.2 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

WVRC - Dr. Bianco

INVOICE

40194

DATE

8/5/22

PRESENTING CLINICAL SIGNS

Patient History (required): started vomiting Sunday (7/31), lethargic Tuesday, seen by rDVM - AXR Normal, CBC showed stress leukogram, Chem showed elevated ALT (861) and ALP (361). Elected outpatient care at that time (SQF, maropitant, denamarin). Did well with this until yesterday (8/4) when he started vomiting again and became very lethargic/anorexia Relevant Exam/labs/imaging results/treatments: CBC/Chem 8/5 revealed progressive hepatopathy Patient History (required): started vomiting Sunday (7/31), lethargic Tuesday, seen by rDVM - AXR Normal, CBC showed stress leukogram, Chem showed elevated ALT (861) and ALP (361). Elected outpatient care at that time (SQF, maropitant, denamarin). Did well with this until yesterday (8/4) when he started vomiting again and became very lethargic/anorexia Relevant Exam/labs/imaging results/treatments: CBC/Chem 8/5 revealed progressive hepatopathy (ALT > 1000, ALP 557)

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 residual prostate was uniform at 0.76 cm.

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 right kidney measured 4.39 cm. The left kidney measured 3.76 cm.

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 1.85 cm x 0.62 cm at the cranial pole and 0.47 cm at the caudal pole. The left adrenal gland measured 1.79 cm x 0.42 cm at the caudal pole and 0.41 cm at the cranial pole.

Spleen

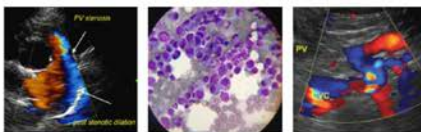
The **spleen** was mildly enlarged with swollen, irregular contour. Parenchyma was uniform.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder was thickened with inspissated debris. Visibility of the gallbladder was poor, owing to reactive surrounding mesentery. Some aspects of mucocele formation noted with surrounding inflammation. The gallbladder measured 3.0 cm x 2.0 cm. Hepatic lymph nodes were mildly enlarged and rounded up to 1.5 cm. The common bile duct was unremarkable at 3.0 mm.

Gastrointestinal

The **pylorus** was free of evident pathology. Minor duodenal stasis and spasming noted with reactive surrounding mesentery. This continued into the upper descending duodenum.

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Pancreas

The left limb of the **pancreas** was hypoechoic, irregular and mineralized. Width measured approximately 1.5 cm. Reactive mesentery noted around the pancreas.

SPECIES

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ULTRASONOGRAPHIC FINDINGS

- Cholecystitis/small mucocele
- Hepatic lymphadenopathy
- Duodenitis/pancreatitis
- Enlarged, swollen spleen

BREED

Chihuahua

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**SEX**

Neutered Male

Recommend medical management over the next 24-48 hours with IV fluids, Enrofloxacin/Metronidazole combination, and GI protectants, and recheck sonogram warranted, earlier if bilirubin elevations and clinical decline occurs. Direct exploratory surgery with cholecystectomy may be necessary. Mild potential for underlying neoplasia.

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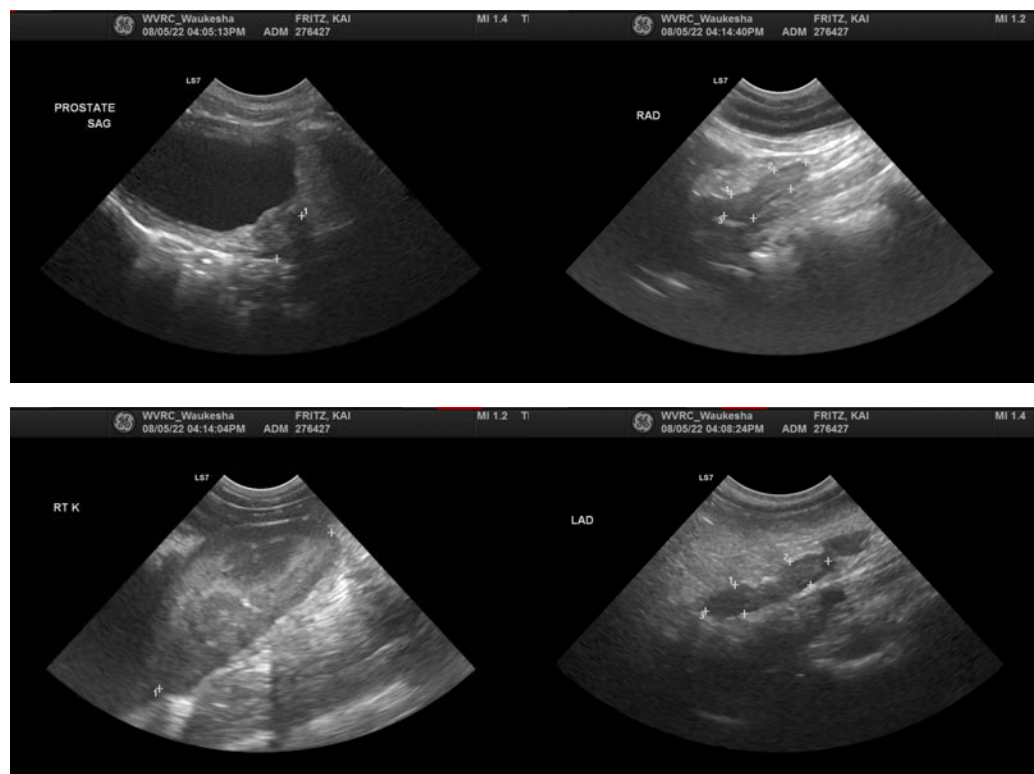
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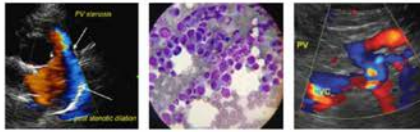
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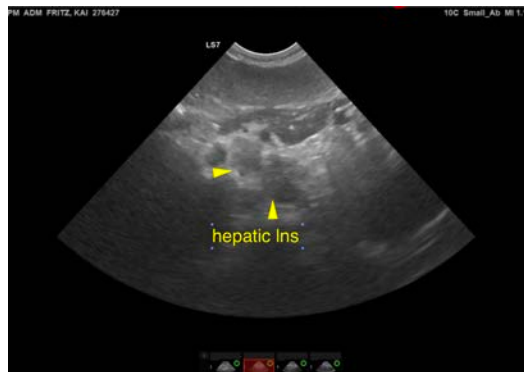
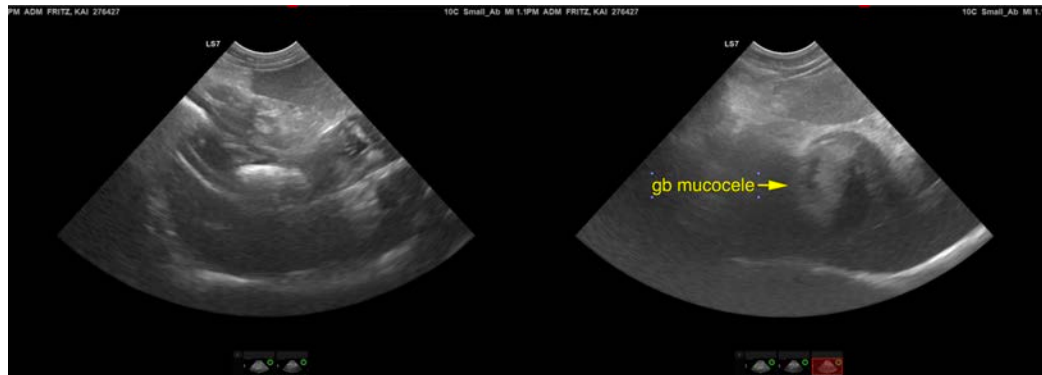
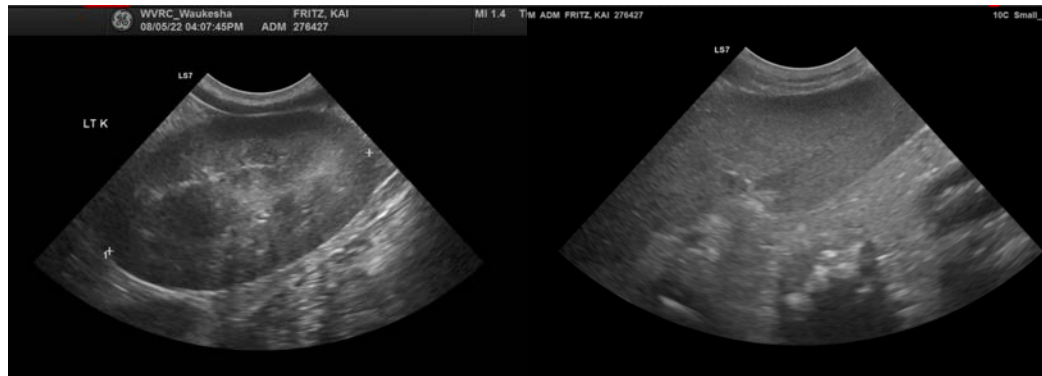
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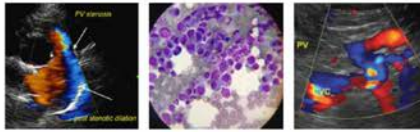
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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