



## PATIENT PRESENTING CLINICAL SIGNS

Shim Mcclellan

P presented for an exam to check not eating since the heat. Not eaten for the past 2 days. P was vomiting but now is having diarrhea. Duration: past 2 days. D/U normally No C/S

## SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: EMAILED BLOODWORK - IN HOUSE CBC/CHEM/CPL - CBC: WNL Chemistry with electrolytes: Mild hypoproteinemia (5.4), mild hypocholesterolemia (115), remainder WNL cPL: Normal Current Medications SUCRALFATE, CERENIA, PANTOPRAZOLE, ENTYCE

## BREED

Australian Shepherd

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

## SEX

Neutered Male

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.

## AGE

7 Years

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 6.3 cm. The right kidney measured 5.57 cm.

## WEIGHT

52.4 Pounds

### Adrenal Glands

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

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 2.33 cm x 1.32 cm at the cranial pole and 0.79 cm at the caudal pole. The left adrenal gland measured 2.87 cm x 0.49 cm at the caudal pole and 0.50 cm at the cranial pole.

## IMAGING PERFORMED BY

Sara Hansen

### Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The spleen was folded upon itself cranially. 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.

## HOSPITAL NAME

West Salem AC

### Liver

## REFERRING VET

Dr. Sirianni

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 presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

## INVOICE

40203

## DATE

8/5/22

### Gastrointestinal

The upper **gastrointestinal tract** was hypoperistaltic with mild amount of retention of ingesta in the stomach. The small intestine was spastic, yet largely empty. The cecum, transverse and upper



**PATIENT**

Shim McClellan

descending colon were dilated with echogenic material with gas artifact in the distal descending colon. This is not a typical obstructive pattern. However, delayed outflow is evident. There is a large amount of inflammatory artifact obscuring portions of the GI tract.

**SPECIES**

Canine

**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.

**BREED**

Australian Shepherd

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

- Delayed outflow pattern
- Folded spleen

Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

7 Years

Recommend IV fluid support, plasma expanders, GI protectants, antiparasitic protocol, fecal test, 2-4hour NPO, and reassessment of the clinical status. Recheck sonogram in 24 hours, earlier if clinical decline is occurring. This is not a straightforward obstructive pattern, as the dilated bowel appears to be all colonic other than spastic upper GI tract. Enterotoxins are primary concerns and/or parasitic disease.

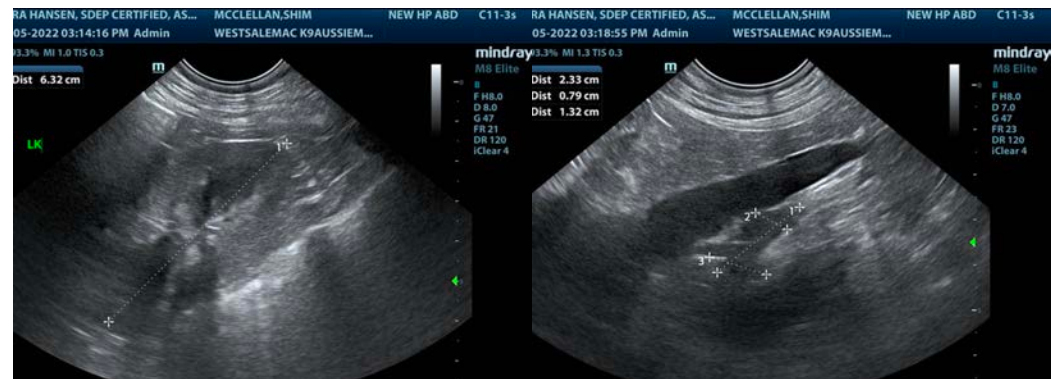
**WEIGHT**

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*Radiographs: Slight irregular spleen and liver, unremarkable otherwise.*

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DABVP, Cert. IVUSS

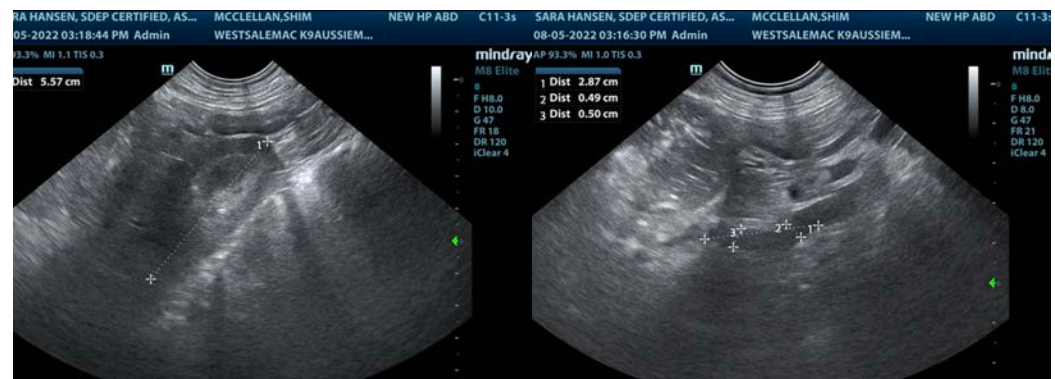


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**HOSPITAL NAME**

West Salem AC



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**SPECIES**

Canine

**BREED**

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**SEX**

Neutered Male

**AGE**

7 Years

**WEIGHT**

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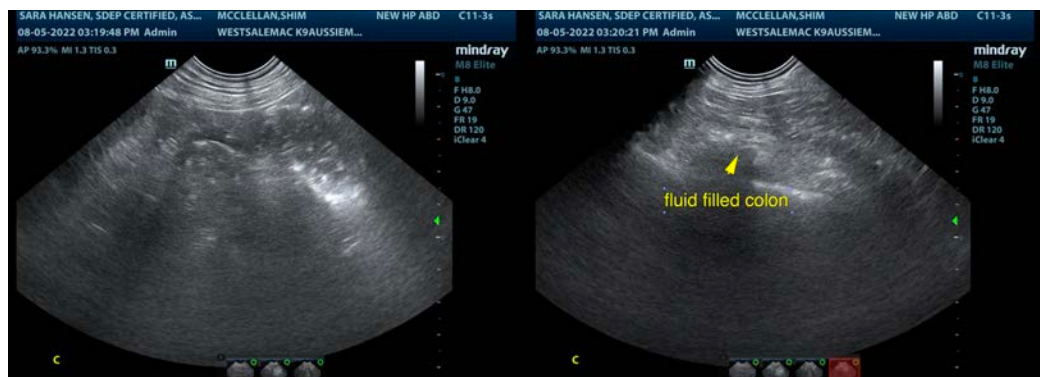
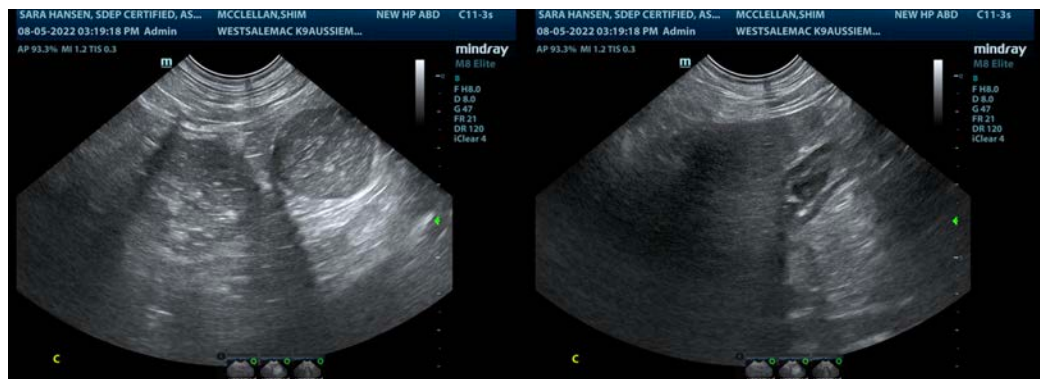
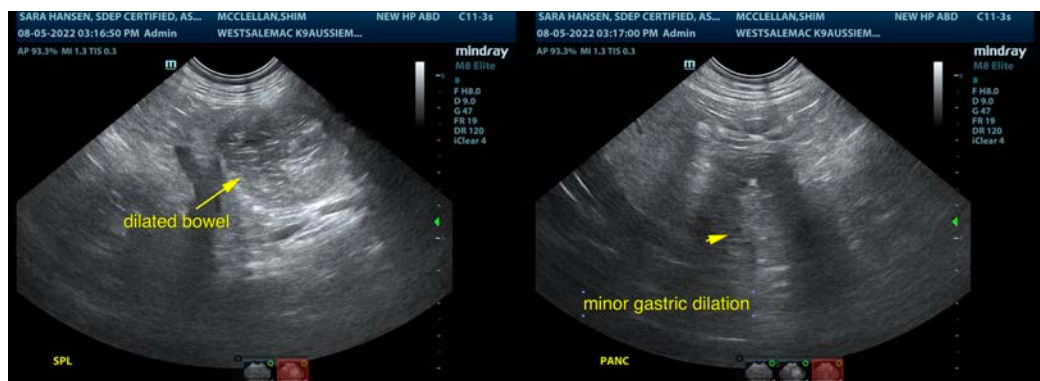
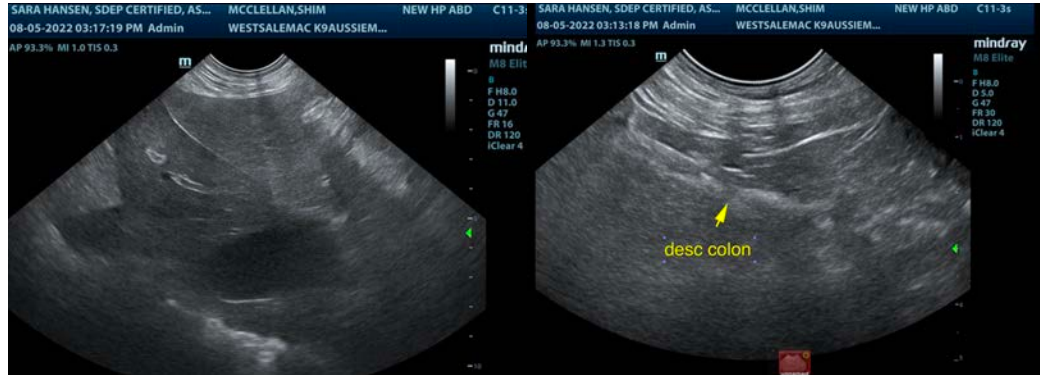
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**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**

Australian Shepherd

**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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