

PATIENT PRESENTING CLINICAL SIGNS

Oreo C Hassan

History: Presented 8/6 for vomiting, lethargy. x-Rays done, declined BW. Sent home w/SQ fluids/meds Presented 8/7 continued vomiting. Hospitalized on IVF. Continued regurgitating through high dose pro-motility agents and anti-nausea medications. NG tube placed.
8/7-chem 17 - mild hypokalemia Report Radiographic Findings 3 electronically transmitted radiographs dated August 6, 2021 were reviewed. These include right lateral, left lateral and ventrodorsal projections of the abdomen. The liver and spleen are within normal limits. The stomach is relatively empty containing a small amount of fluid and gas. The rugal pattern is prominent. The small intestine is relatively empty. No evidence of radiopaque foreign material or abnormal distention is identified. The colon contains semiformed and formed feces.. The kidneys are within normal limits. The retroperitoneal space is unremarkable. The urinary bladder is unremarkable. Abdominal serosal detail is within normal limits. Conclusion Relatively empty stomach with a prominent rugal pattern. This is suggestive of gastritis. No evidence of radiopaque foreign material or G.I. obstruction seen. Jim Hoskinson, DVM, DACVR 08/6/2021 8:48:12pm Report Radiographic Findings 3 electronically transmitted radiographs dated August 7, 2021 were reviewed. These include right lateral, left lateral and ventrodorsal projections of the abdomen. The study is compared with that of August 6. There is a small amount of mineral opaque material present within a segment of intestine in the central abdomen (most likely the cecum). The stomach is relatively empty. The small intestine is relatively empty. The colon contains a small amount of fluid appearing feces. Conclusion Radiographically unremarkable abdomen. Jim Hoskinson, DVM, DACVR 08/7/2021 3:55:57pm

SPECIES

Canine

BREED

Pitbull

SEX

Spayed Female

AGE

2 years

WEIGHT

45.9 lbs

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 was noted. Ureteral papillae were normal.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Cara CVT RDMS

HOSPITAL NAME

1st Pet Vet

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 6.04 cm. The right kidney measured 6.0 cm.

Adrenal Glands

REFERRING VET

Dr. Kafer

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 left adrenal gland measured 0.53 cm at the cranial pole and 0.61 cm at the caudal pole. The right adrenal gland measured 0.8 cm at the cranial pole and 0.5 cm at the caudal pole.

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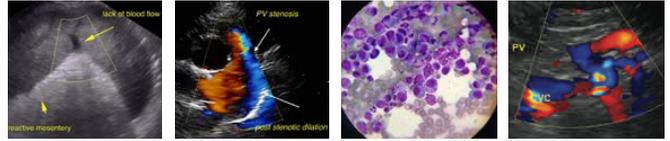
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Spleen

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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



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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.

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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 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.

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Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. The stomach was empty. 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.

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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.

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ULTRASONOGRAPHIC FINDINGS

Structurally unremarkable abdomen.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Supportive care should prove effective. Dietary indiscretion, food intolerance/indiscretion, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.

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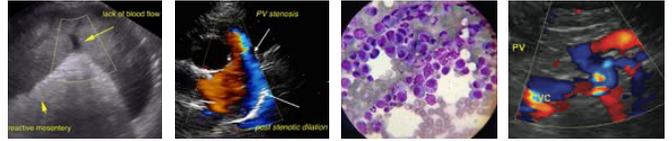
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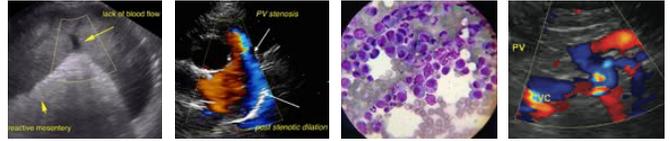
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veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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