



**PATIENT**

Honey DiPasquale

**SPECIES**

Canine

**BREED**

Terrier Mix

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

16 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Shari Reffi, CVT

**INVOICE**

16789

**DATE**

8/8/22

**PRESENTING CLINICAL SIGNS**

History: Hx of diabetes, cushings, acute onset of pancreatitis.

Abnormal PE/Chem/CBC/UA Results: Elevated gluc, fruc., and hepatic enzymes, CPL abn

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some moderate mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

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 4.5 cm. The left kidney measured 5.0 cm.

**Adrenal Glands**

The **right 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 right adrenal gland measured 2.0 cm x 0.45 cm at the caudal pole and 0.75 cm at the cranial pole.

The **left adrenal gland** was slightly enlarged, uniform, measuring 2.32 cm x 0.77 cm at the cranial pole and 0.77 cm at the caudal pole.

**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 were noted.

**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. 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.

**Gastrointestinal**



**PATIENT**

Honey DiPasquale

**SPECIES**

Canine

**BREED**

Terrier Mix

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

16 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Shari Reffi, CVT

**INVOICE**

16789

**DATE**

8/8/22

The upper **gastrointestinal tract** in this patient revealed minor, edematous wall. There was no evidence of foreign bodies. Minor areas of fluctuant fluid accumulation were noted within the lumen with hyperperistalsis. This pattern continued to the ileocecal valve. The colon revealed a fluid filled lumen. This presentation is most consistent with gastrointestinal irritation/inflammation without obstruction. The duodenum was displaced by the right pancreatic pathology and mildly spastic.

**Pancreas**

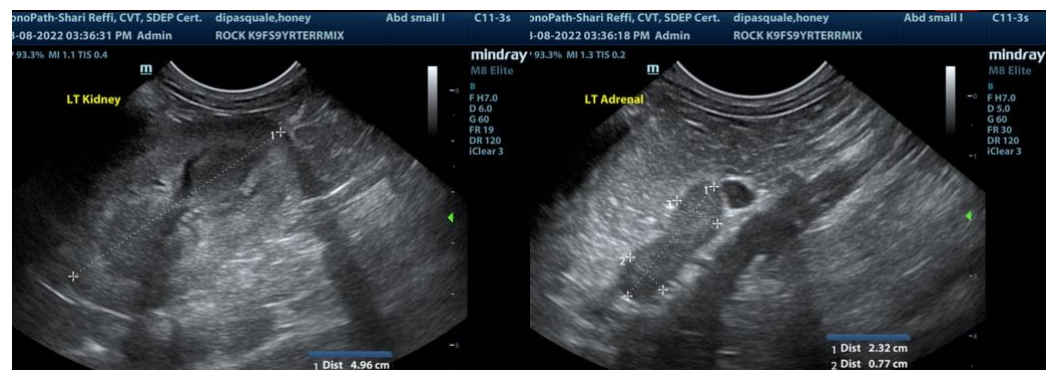
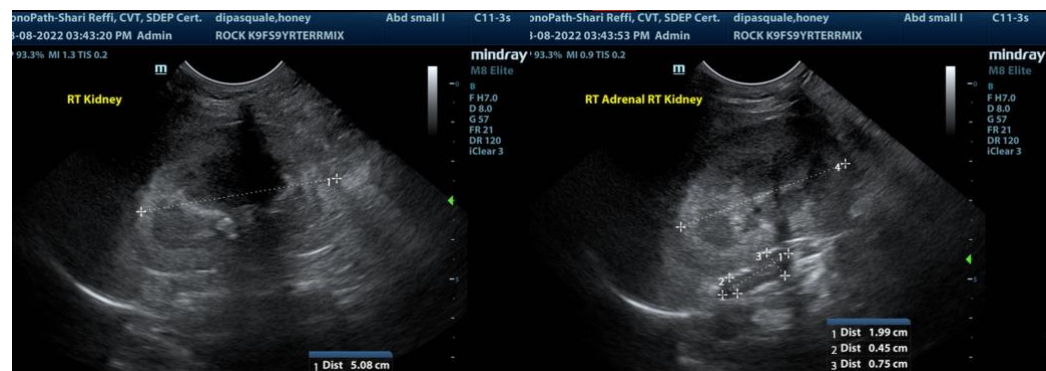
The right limb of the **pancreas** was hypoechoic and irregular with enhanced surrounding mesentery, in a region of approximately 1.5 cm x 3.0 cm.

**ULTRASONOGRAPHIC FINDINGS**

- Gastroenteritis/right limb pancreatitis
- Slightly swollen left adrenal gland. Normal right adrenal gland.
- Urinary bladder debris- suspect UTI
- Age-related hepatic changes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Urinary work up is warranted. Treatment for pancreatitis is indicated. 24-hour NPO, IV fluid support, broad spectrum antibiotics and GI protectants recommended. Recheck sonogram recommended in 72 hours to assess progression or regression.





**PATIENT**

Honey DiPasquale

**SPECIES**

Canine

**BREED**

Terrier Mix

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

16 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

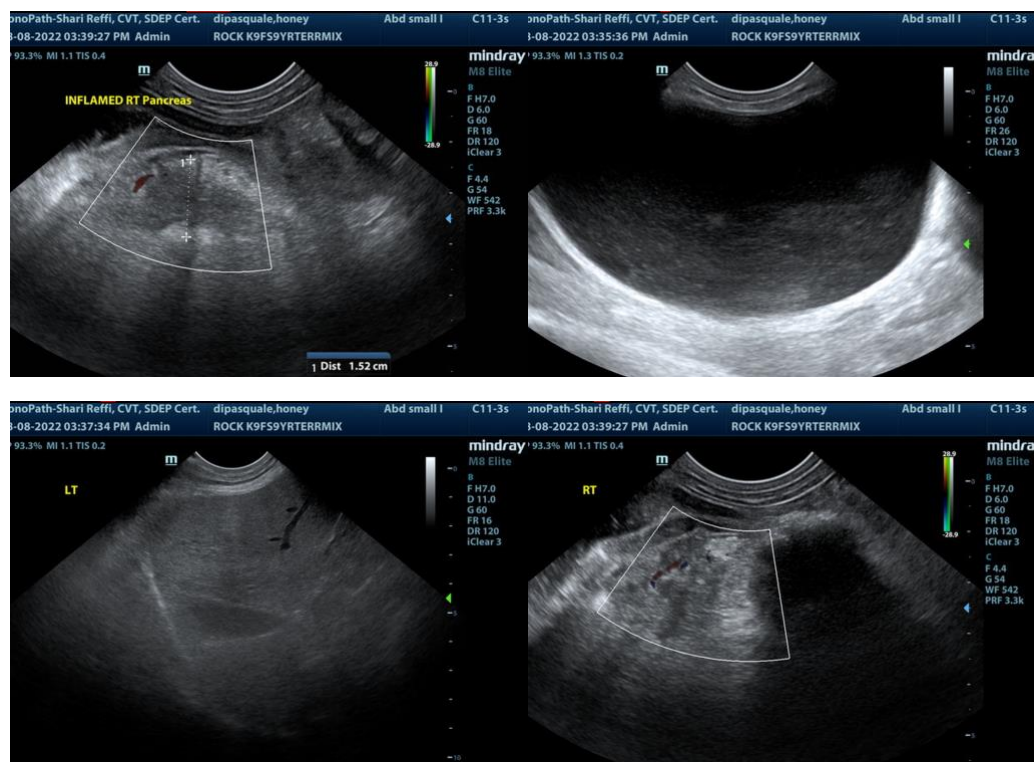
Shari Reffi, CVT

**INVOICE**

16789

**DATE**

8/8/22



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