



PATIENT

Ike Stasinopoulos

SPECIES

Canine

BREED

Pug

SEX

Neutered male

AGE

12 years

WEIGHT

21.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Dr. Pascucci

INVOICE

32938

DATE

9/15/22

PRESENTING CLINICAL SIGNS

History: Recurrence of lethargy and fever that had occurred 6 months ago. Had WBC elevations and thrombocytopenia at that time. Improved on pred and doxy. Eventually tapered off the pred 3 months ago and had been well. Now bw showing liver failure. Started pred again, amoxi, metro and denamarin. Seems clinically improved and fever down.

Abnormal PE/Chem/CBC/UA Results: Alb 2.0, Glu 53, Tbili 0.4, ALT 699, ALP 687, AST 242, Glob 3.9, TT4 0.5 PLT 68k, WBC 31.6k, Lymph 4.7k, Mono 3.7k, Neu 23k, HCT 43%

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and trigone 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.

The left kidney had similar changes to the prior sonogram with minor corticomedullary calculi that was non-obstructive. The right kidney measured 4.5 cm with slight pinpoint mineralization.

Adrenal Glands

The **adrenal gland** were not visualized as they were obscured by colonic artifact. However, there were no obvious masses.

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 was 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.



PATIENT

Ike Stasinopoulos

SPECIES

Canine

BREED

Pug

SEX

Neutered male

AGE

12 years

WEIGHT

21.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Dr. Pascucci

INVOICE

32938

DATE

9/15/22

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**. This is consistent with end post prandial presentation, yet may be foreign matter. A 1.5 cm shadowing structure was noted in the pylorus. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

Pancreas

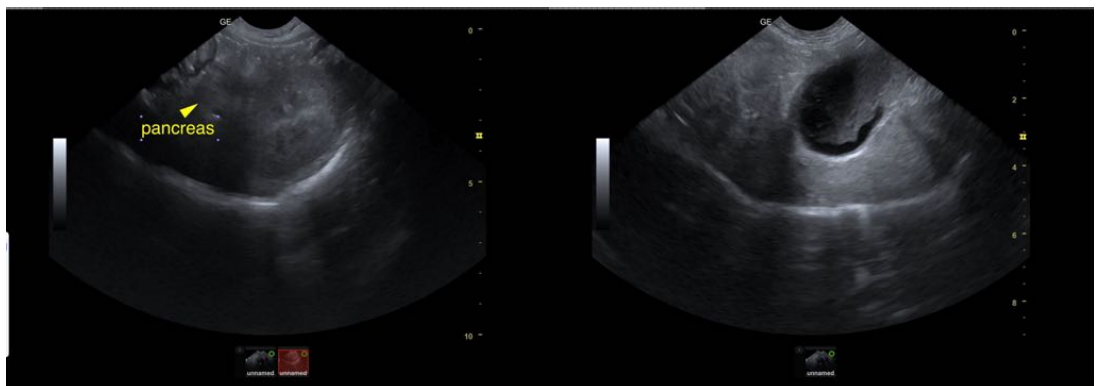
The **pancreas** revealed minor, heterogenous parenchymal changes in the right limb.

ULTRASONOGRAPHIC FINDINGS

Unremarkable regions of the adrenal glands. However, shadowing gastric material and GI artifact obscured visualization of the adrenal glands.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sedation with further imaging of the adrenal glands would be indicated at n.p.o. status.





PATIENT

Ike Stasinopoulos

SPECIES

Canine

BREED

Pug

SEX

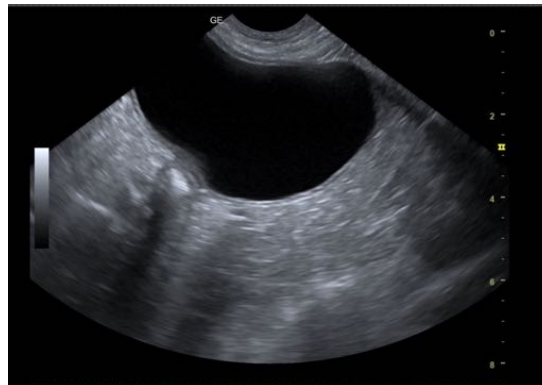
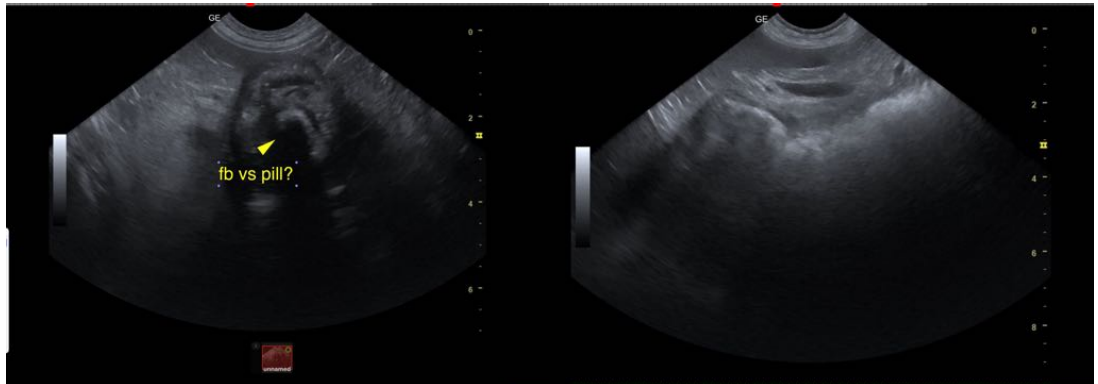
Neutered male

AGE

12 years

WEIGHT

21.8 lbs



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Melissa Pascucci

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.

HOSPITAL NAME

American AH

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

REFERRING VET

Dr. Pascucci

INVOICE

32938

DATE

9/15/22