



**PATIENT**

Belle Craig

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

Spayed Female

**AGE**

3 Years

**WEIGHT**

8.2 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Callihan/AEC

**HOSPITAL NAME**

Animal Emergency  
Care

**REFERRING VET**

Dr. Bailey/AEC

**INVOICE**

13163

**DATE**

9/19/21

**PRESENTING CLINICAL SIGNS**

History: Presented tonight for vomiting, has been treated past week for presumptive aspiration pneumonia. Last week radiographs showed severe consolidation of the right middle lobe and today this is completely resolved. However, when she ran out of Cerenia at home and stopped GI protectants, began vomiting again per owner-- though what she describes sounds like regurgitation. Belle throws head back, shakes it violently and spits up food/fluid/bile. She was reportedly oxygen deprived at birth and owner says this is why she has neurologic deficits. She is always a little ataxic and tends to circle. This is not progressive. We have talked to owner in the past week about possible underlying neuromuscular cause for the regurgitation that seems to have led to aspiration pneumonia. However, owner reports Belle is not routinely a vomiter, that this has just been in the last week.

Abnormal PE/Chem/CBC/UA Results: Labwork is normal; radiographs unremarkable today. Radiographs show no evidence of megaesophagus (this week or last)

**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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 4.67 cm. The left kidney measured 3.98 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 left adrenal gland measured 0.44 cm. The right adrenal gland measured 0.33 cm.

*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 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.

*Gastrointestinal*



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A minor amount of fluid was noted in the **pyloric** antrum. Soft stool was noted in the colon. Some areas of spastic bowel were also noted. No evidence of foreign body.

## Pancreas

## SPECIES

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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

Poodle Mix

## ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## SEX

Spayed Female

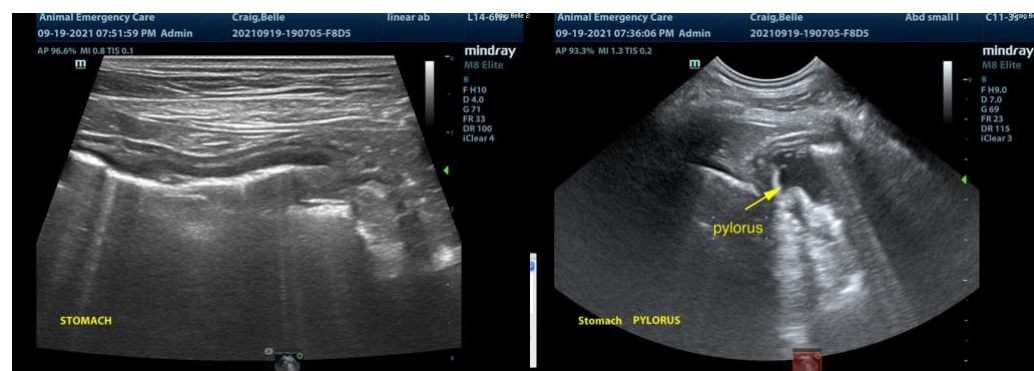
Should respond well to supportive care. Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials. No evidence of foreign body.

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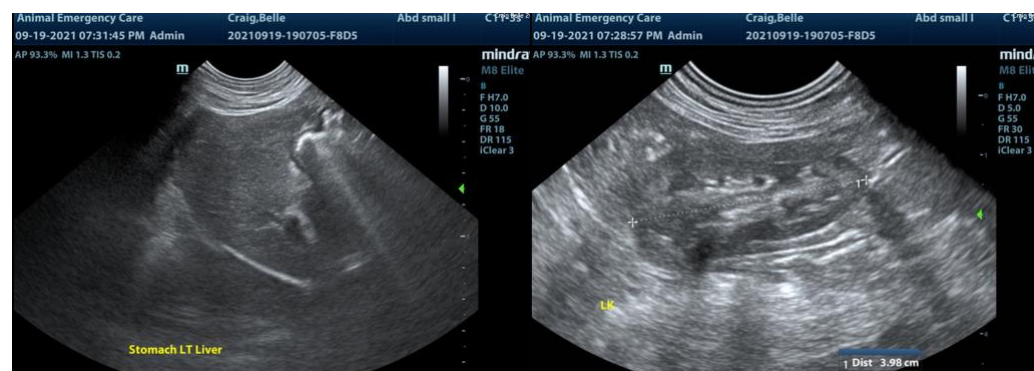
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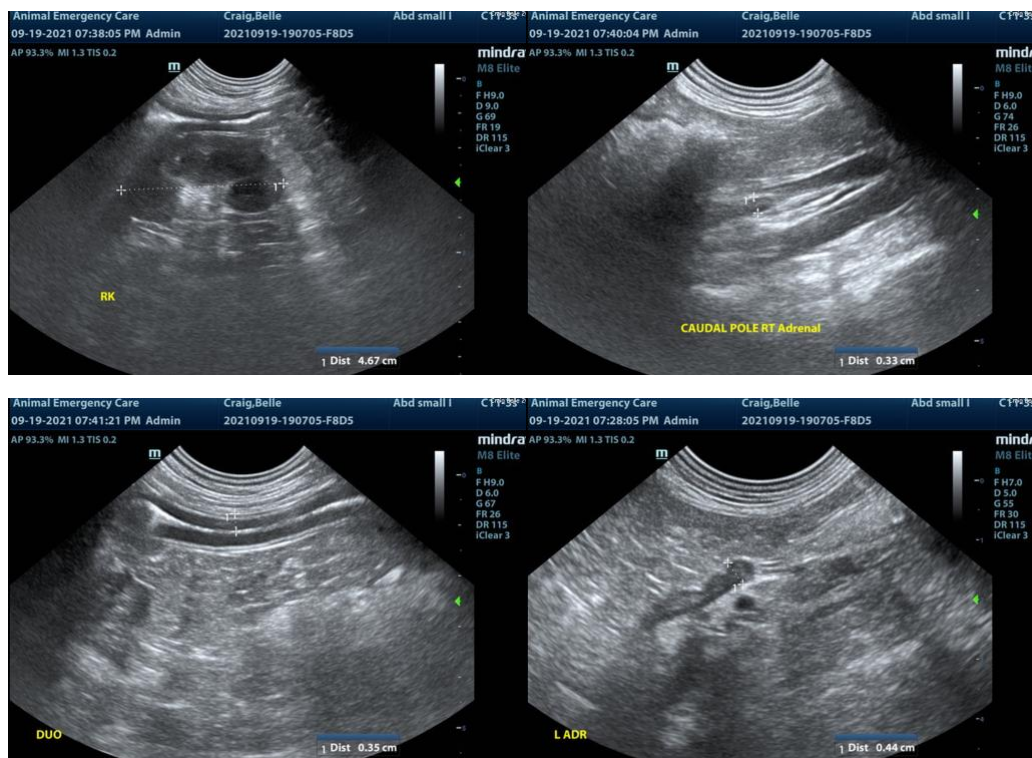
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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