



PATIENT

Junie Stegemoller

SPECIES

Canine

BREED

Hound X

SEX

Spayed Female

AGE

10 Years

WEIGHT

19.2 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Jolee Stegemoller

HOSPITAL NAME

North Idaho AH

REFERRING VET

Dr. Jolee Stegemoller

INVOICE

25806

DATE

9/25/21

PRESENTING CLINICAL SIGNS

Senior wellness screening, but had very low heart rate under anesthesia even after dexmedetomidine was reversed. No exercise intolerance, coughing, or other unusual behavior. Was in a chemotherapeutic safety and efficacy study in 2012. Current medications/supplements include Apoquel 8mg every other day, Dasuquin. Commercially prepared fresh food diet with added taurine supplementation. Abnormal PE/Chem/CBC/UA Results: Resting heart rate 80-90, heart rate was 25-35 under anesthesia even after atipamezole, and only 45 3 hours after anesthesia. Neutropenia (2.86), Total protein 5.4, 1+ proteinuria (USG 1.055), 4dx negative.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT			1.15		~20		0.67
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
PATIENT					4.0	4.0	

Cardiac Presentation

Mild volume overload of the left atrium and left ventricle noted owing to sedation. Structurally the heart was unremarkable. Trivial mitral insufficiency noted. The contractility was subnormal owing to Dexdomitor.

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 5.5 cm. The left kidney measured 5.9 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



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unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 2.3 cm x 0.3 cm at the cranial pole and 0.4 cm at the caudal pole. The right adrenal gland measured 3.2 cm x 0.7 cm at the cranial pole and 0.44 cm at the caudal pole.

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Spleen

The **spleen** was folded upon itself cranially, uniform, no evident pathology. This is a positional variant.

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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

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Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. 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 normal heart
- Normal unremarkable abdomen, no evidence of pathology

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

EKG warranted to ensure bradyarrhythmia is not an issue +/- holter monitor. The cough is not cardiogenic. No significant volume overload noted. The slightly prominent left atrium and left ventricle are likely owing to sedation.

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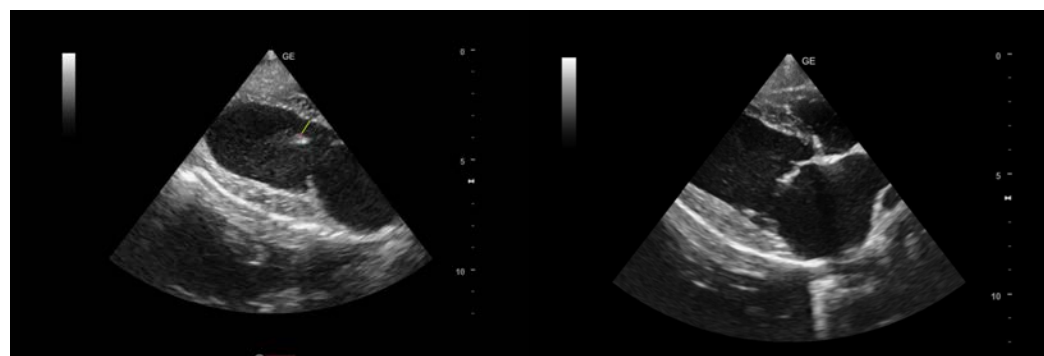
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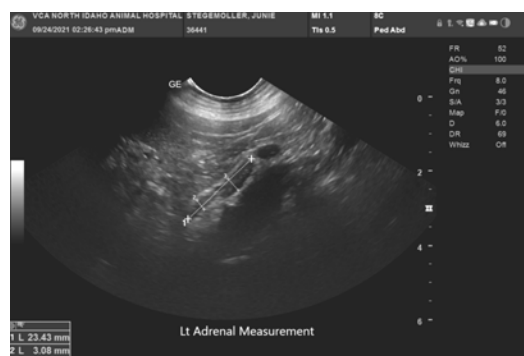
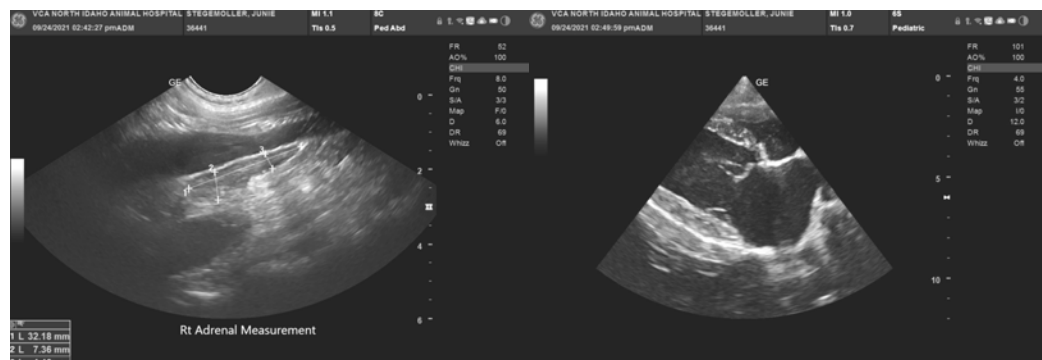
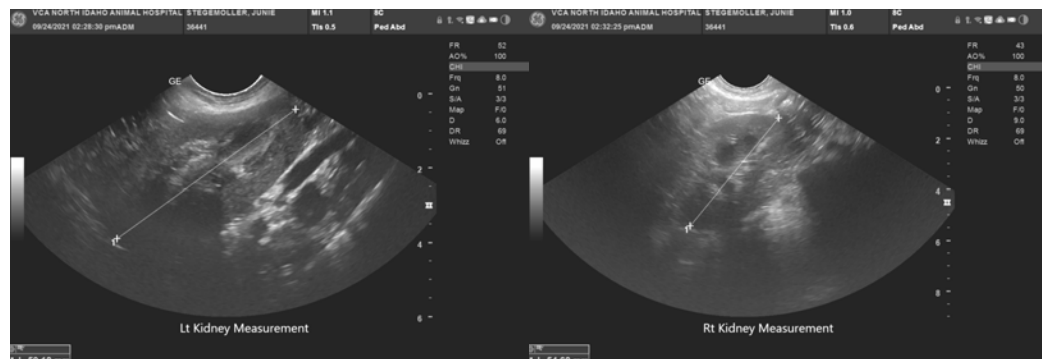
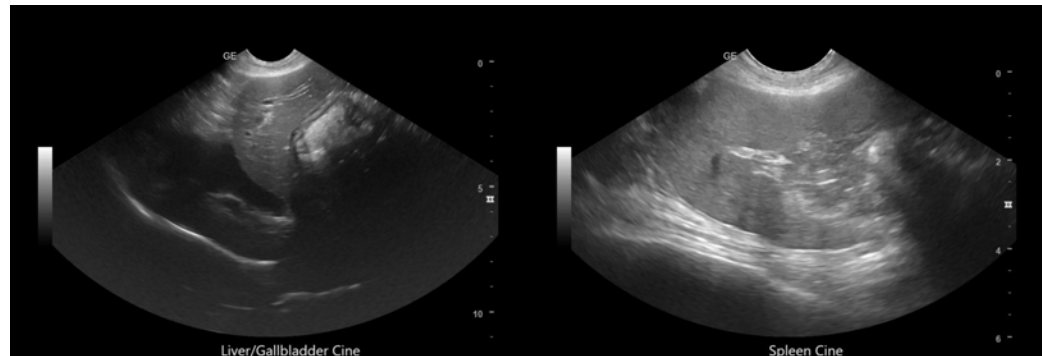
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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