



PATIENT PRESENTING CLINICAL SIGNS

Dottie Malone

SPECIES

Canine

BREED

French Bulldog

SEX

Spayed female

AGE

18 years

WEIGHT

23 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Carissa Rhoades

HOSPITAL NAME

Elizabeth AH

REFERRING VET

Dr. Anderson

INVOICE

39612

DATE

9/26/22

History: A couple of days ago when the Malone's where driving back Dottie started to throw up 2-3 times a day and she is turning her nose away from food. Randy said it seems like her mouth is sore. It is very unusual for Dottie to turn food away. She is drinking less water and when she does drink she drinks slowly. The Malone's traveled to Virginia and Maine they where gone for 2 weeks.

Abnormal PE/Chem/CBC/UA Results: PE: Mucous RED WITH INFLAMMATION, Abdomen- mildly tense, SCLEROSIS NORMAL FOR AGE NASAL HYPERKERATOSIS NORMAL FOR AGE. No nasal or ocular discharge, long nails that curl, severe stage 4 dental disease, weight stable. Sending out a full blood panel today (9-26-22), waiting for results.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. 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 **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Minor microcystic changes were noted in the renal cortices. The left kidney measured 4.46 cm. The right kidney measured 4.12 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 right adrenal gland measured 2.44 x 0.72 cm at the cranial pole and 0.76 cm at the caudal pole. The left adrenal gland measured 2.0 x 0.5 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 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



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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.

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A minor amount of non-shadowing, non-obstructive ingesta was noted in the stomach. 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.

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Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

Age related abdominal changes.

Full stomach.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

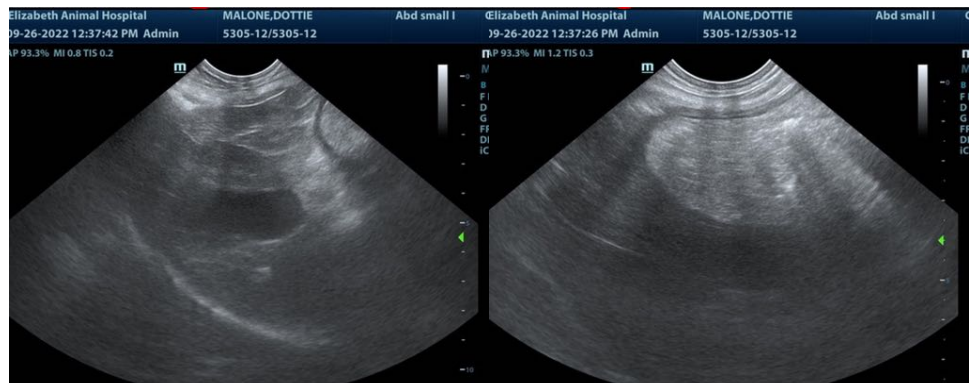
There is no evidence of obstruction. I am assuming this patient is post prandial; however, if the patient was n.p.o. at the time of the sonogram then cause of obstruction is not visible. If clinical signs are persisting despite medical management and the patient was not n.p.o. then rescanning at full n.p.o. status is indicated.

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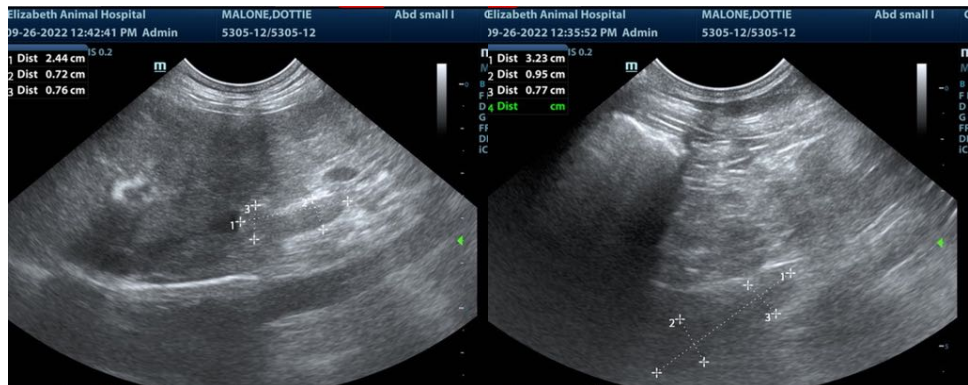
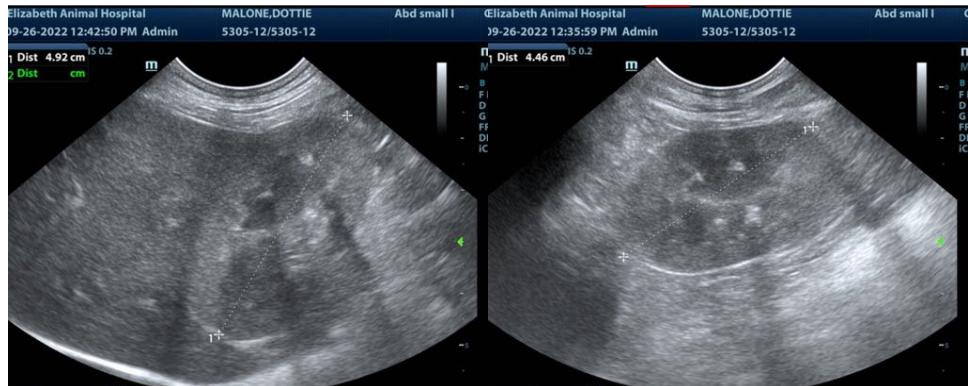
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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