



**PATIENT**

Opal Bradley

**SPECIES**

Canine

**BREED**

Labradoodle

**SEX**

Female

**AGE**

1 Year

**WEIGHT**

6.6 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**

41650

**DATE**

9/26/22

**PRESENTING CLINICAL SIGNS**

Opal, a 1-year-old Labradoodle F, presented 9/24/22 for GI upset/diarrhea. -Stool sample at rDVM was WNL. They put on 7 day course of Metronidazole 62.5 mg/dose, bland diet. Did well. - Had Lepto vaccine 2 days ago. Diarrhea started day before, worsening overnight. That AM vomited bile and a little blood. -Owner declined diagnostics yesterday, as had bloodwork/rads/cortisol level checked when at AEC for diarrhea on 9/3 which were all normal. - -Treated as outpatient with SQF, Cerenia, Famotidine, Sucralfate, and Metronidazole. -When home yesterday, offered food first, gave appetite stimulant. Ate good amount of boiled chicken/rice 1/4-1/2 chicken breast. Then gave Metronidazole ~1PM. Diarrhea through day, straining, not much produced -Went to bed ~10PM. Let out a couple of times. 2AM owner says Opal couldn't get down off couch, couldn't focus, barely crawling/wandering around yard, limp in owner's arms/couldn't hold self up. Would stand and stare at wall. Breathing a little shallow. Owner brought back in here since worried now more neurologic/musculoskeletal. History of raw diet, reported to eat Farmer's Dog frozen cooked food at last visit 9/3.

Abnormal PE/Chem/CBC/UA Results: CBC: -slight lymphopenia, else normal Chem 17: - normal From 9/3: -abdominal radiographs poor serosal detail (thin body condition), gas in colon, nsf otherwise - Baseline cortisol 2.4 -Parvo SNAP negative

**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 **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 5.02 cm. The left kidney measured 5.3 cm.

**Adrenal Glands**

The **left adrenal gland** appeared subnormal in size. The left adrenal gland measured 0.33 cm.

The region of the **right adrenal gland** was imaged, no evident pathology.

**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.



**PATIENT**

**Gastrointestinal**

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The **stomach** revealed a minor amount of retained ingesta. The small intestine and colon were unremarkable. Reactive mesenteric lymph nodes noted measuring 3.06 cm.

**SPECIES**

**Pancreas**

Canine

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**

Labradoodle

**ULTRASONOGRAPHIC FINDINGS**

- Structurally unremarkable abdomen with minor retained gastric ingesta
- Subnormal left adrenal size, non-visible right adrenal

**SEX**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Female

No evidence of visceral pathology. Underlying Addison's should be ruled out in this patient, given the patient history and sonographic appearance of the adrenal regions.

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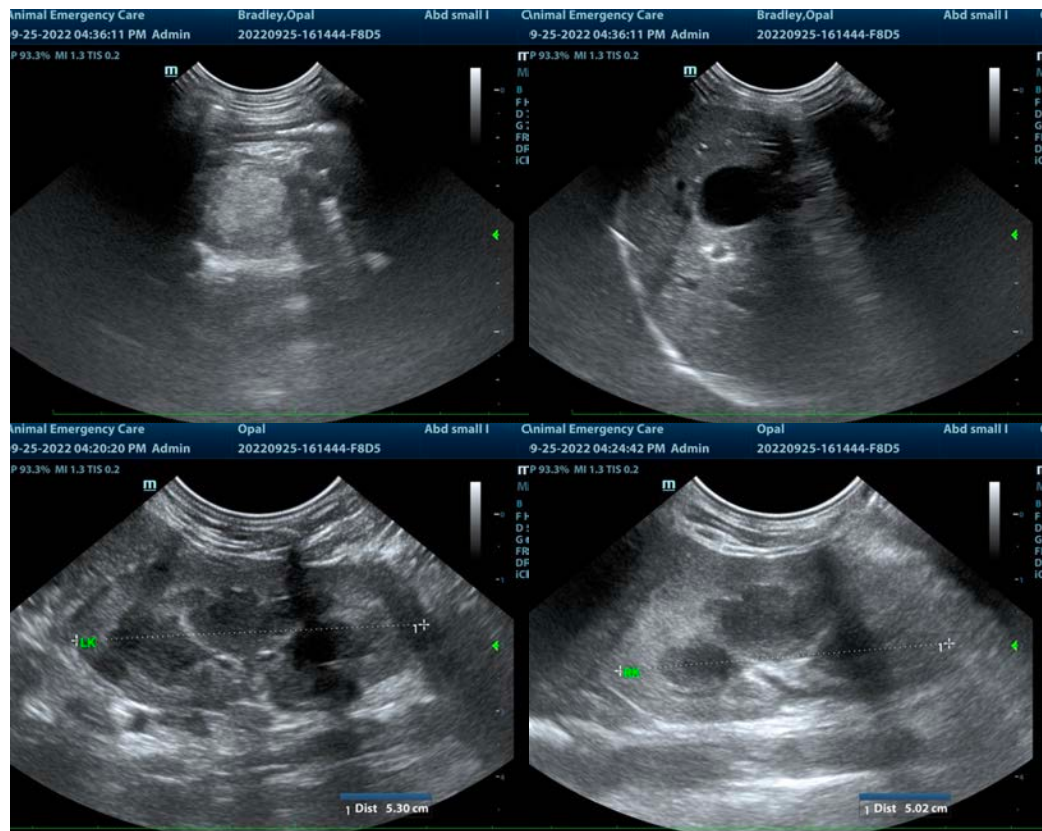
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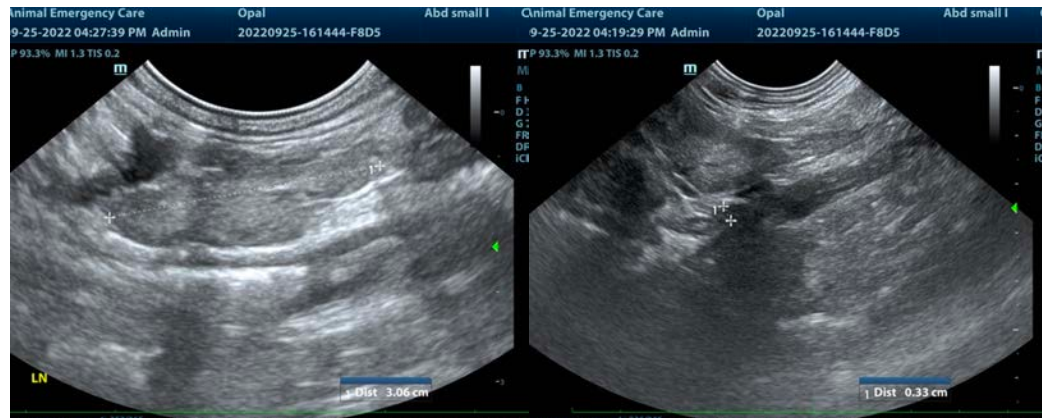
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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