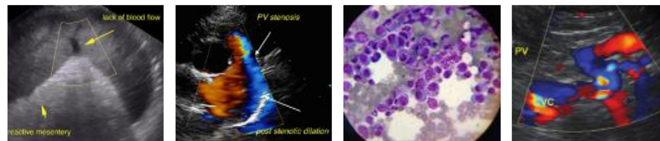

SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT

Violet Siebener

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

2 Years

WEIGHT

9.1 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores VEC

REFERRING VET

Dr. Moser

INVOICE

17492

DATE

9/30/22

PRESENTING CLINICAL SIGNS

History: Presented at our hospital for Vomiting and diarrhea that started Tuesday. Owner has been syringe feeding Pedialyte into patient. Violet has not eaten or drank anything on her own since Tuesday. Today she started with bloody diarrhea and is lethargic at home. Previous Health Concerns: none Current Medications: none

Abnormal PE/Chem/CBC/UA Results: Radiographs – gas distended colon; fluid filled bowels; empty stomach; no signs of obstruction CBC – WBC (5.35) Neu (2.61) Mono (0.09) Eos (0.01) CHEM –Ca (8.8) TP (5.1) EPOC – pH (7.5) K (3.1) iCa (1.12) cPL – normal

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a minor shadowing small calculus, measuring 4.0 mm, nonobstructive at the time of the sonogram. 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 left kidney measured 4.54 cm. The right kidney measured 5.73 cm.

Adrenal Glands

Both **adrenal glands** were somewhat subnormal in size. The left adrenal gland measured 2.39 cm x 0.29 cm at the cranial pole and 0.35 cm at the caudal pole. The right adrenal gland measured 5.0 mm at the cranial pole and 3.0 mm at the caudal pole.

Spleen

The **spleen** was mildly enlarged with slight micronodular changes. Cranial and caudal folding of the spleen was noted. Slight free fluid was noted adjacent to the spleen.

Liver

The **liver** revealed increased portal markings, consistent with remodeling and history of cholangitis. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

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.

Pancreas

Heterogeneous **pancreatic** changes were noted through the left and right limbs.

Free Abdomen

Reactive **mesentery** was noted associated with the small intestine and pancreas with minor areas of free fluid.

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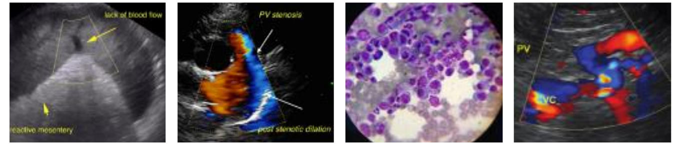

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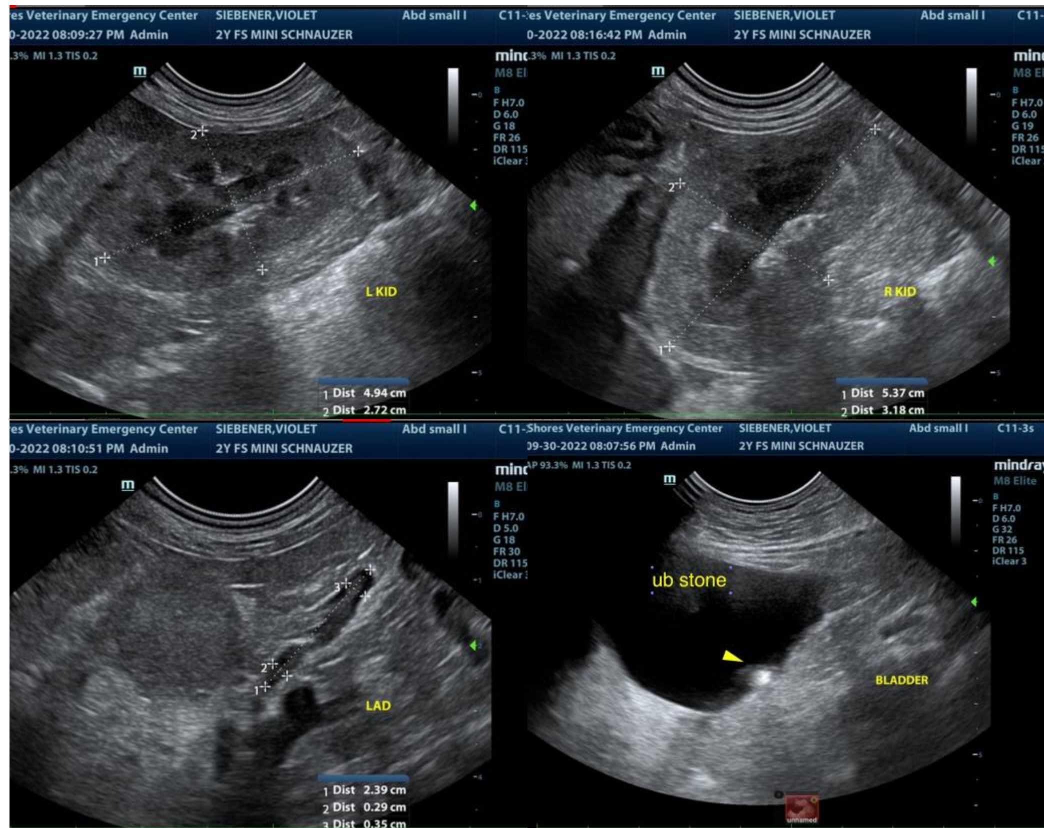
ULTRASONOGRAPHIC FINDINGS

- Extensive pancreatitis/enteritis pattern
- Free fluid, minor peritonitis
- Reactive mesentery
- Small bladder calculi
- Subnormal adrenal size
- Mild splenic enlargement
- Hepatic remodeling

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided abdominocentesis of the small pockets of fluid is recommended. Treatment for pancreatitis is warranted, however, I cannot rule out the possibility of an underlying neoplastic event, such as mast cell disease. GI protectants, plasma expanders, broad spectrum antibiotics are all indicated. Splenic and hepatic FNA could also be justified to ensure these are reactive and remodeled states as opposed to emerging round cell neoplasia (less likely).



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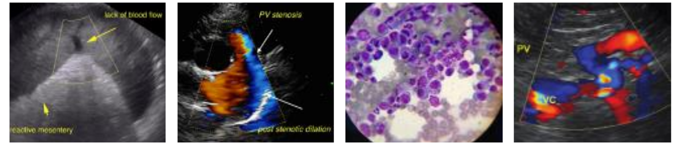

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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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