



PATIENT

PRESENTING CLINICAL SIGNS

Clara Johnson

History: vomiting since 8/31 after eating chocolate chip cookies, decreased appetite slightly lethargic.

SPECIES

Labs; Pre-anesthetic: WBC 18 k/ul, neu 15.06 k/ul, retic 165.9 k/ul, ALP 743 u/l, ALT 2325 EPOC: HCT 49%, Crea 2.26 mg/dl, Glu 134 mg/dl, K+ 2.8, Lac 4.58 mmol/l, Bicarb 14.9 mmol/l, PCO2 28.9 mmHg, pH 7.319, TCO2 16.0 mmol/l, BE -11.2 mmol/l U/A: USG 1.022, pH 6.0, Glu 1000 mg/dl, ket 15 mg/dl, bld 250 mg/dl, WBC 9/HPF, RBC 5/HPF, suspect rods and cocci, non-squam epithelial 3-5/HPF

Canine

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Australian Cattle Dog

Urinary System

SEX

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 was noted. Ureteral papillae were normal.

Spayed Female

AGE

The **kidneys** were normal in size and contour. However, subcapsular fluid accumulation was noted. Subcapsular fluid and regional inflammation was noted. This is suggestive for an acute insult. The right kidney measured 5.0 cm. The left kidney measured 4.0 cm.

7 years

WEIGHT

54.6 lbs

Adrenal Glands

INTERPRETED BY

The **adrenal glands** were not visualized.

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

IMAGING PERFORMED BY

The **spleen** was uniformly enlarged with relatively uniform parenchyma without evidence of masses. The capsule was mildly swollen. This is most consistent with hypersplenism and reactive hyperplasia deriving from splenic white or red pulp. However, early infiltrative disease, such as lymphoma or mast cell neoplasia can, at times, present in this manner. True hypersplenism from an internal medicine standpoint causes sequestering of thrombocytes resulting in thrombocytopenia and anemia. Clinical manifestation of this phenomenon should be considered. US-guided FNA would be best in order to ensure only reactive hyperplasia is present. If clinical signs fit with potential neoplasia or mast cell disease, then Benadryl injection (1 mg/pound IM) 15 minutes prior to FNA would be recommended.

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Harmon

Liver

The **liver** was largely normal. Mildly increased portal markings were noted. The gallbladder and common bile duct were unremarkable.

INVOICE

91659

Gastrointestinal

DATE

The **stomach** revealed fluid filled lumen. The small intestines and colon were unremarkable.

9/6/21



PATIENT

Pancreas

Clara Johnson

Minor heterogenous pancreatic changes were noted.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Acute hepatitis.

BREED

Nephritis pattern.

Australian Cattle Dog

Gastroenteritis.

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis should be considered as a potential in this patient. Urine culture, ultrasound-guided FNA of the liver is warranted for further definition, and Leptospirosis titers are all indicated. IV fluid support, Ampicillin, Metronidazole and nutraceuticals are all recommended. There was no evidence of neoplasia.

AGE

7 years

WEIGHT

54.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

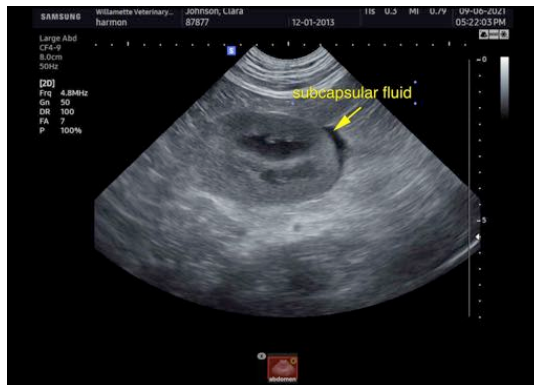
Dr. Harmon

INVOICE

91659

DATE

9/6/21





PATIENT

Clara Johnson

SPECIES

Canine

BREED

Australian Cattle Dog

SEX

Spayed Female

AGE

7 years

WEIGHT

54.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Harmon

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Harmon

INVOICE

91659

DATE

9/6/21



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