



PATIENT

Molly Angier

SPECIES

Canine

BREED

Cockapoo

SEX

Spayed female

AGE

13 years

WEIGHT

20.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Krell

HOSPITAL NAME

Paws and Prairie AC

REFERRING VET

Dr. Krell

INVOICE

32745

DATE

9/6/22

PRESENTING CLINICAL SIGNS

History: History: ADR since Sunday early morning around 2:00am. O says she became extremely lethargic and was vomiting. The vomit started out as vomiting up her kibble but then turned to yellow bile. Has not been wanting to eat since - o hasn't seen her eat since Saturday. On thyroid tablets but hasn't been able to give her them since Saturday. Has drank some water but immediately vomits after drinking. Last seen for dermat issues and mass removal, blood work in April relatively unremarkable. Abnormal PE/Chem/CBC/UA Results: PE: QAR, depressed, mildly icteric, tacky gums. Tachycardic 160 bpm. Dermal changes present (dermatitis, cysts). Abdomen VERY tender. CBC: MCH 26.5 pg 21.2 - 25.9 HIGH MCHC 40.8 g/dL 32.0 - 37.9 HIGH RETIC 39.0 K/ μ L 10.0 - 110.0 WBC 50.65 K/ μ L 5.05 - 16.76 HIGH NEU 46.95 K/ μ L 2.95 - 11.64 HIGH LYM 0.53 K/ μ L 1.05 - 5.10 LOW MONO 3.14 K/ μ L 0.16 - 1.12 HIGH EOS 0.01 K/ μ L 0.06 - 1.23 LOW BASO 0.01 K/ μ L 0.00 - 0.10 PLT 560 K/ μ L 148 - 484 HIGH PCT 0.56 % 0.14 - 0.46 HIGH Chem: GLOB 5.4 g/dL 2.5 - 4.5 HIGH ALB/GLOB 0.5 ALT 868 U/L 10 - 125 HIGH ALKP > 2000 U/L 23 - 212 HIGH TT4 0.8 μ g/dL 1.0 - 4.0 LOW cPL: Abnormal Pending abdominal fluid cytology, sample very sanguineous, non-clotting.

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 was 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 left kidney measured 4.45 cm. The right kidney measured 4.4 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 left adrenal gland measured 1.97 x 0.56 cm at the cranial pole and 0.63 cm at the caudal pole. The right adrenal gland measured 1.53 x 0.44 cm at the cranial pole and 0.56 cm at the caudal pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. Occasional hyperechoic, lipogranuloma was noted. 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.



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Liver

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The **liver** is enlarged and irregular with enhanced mesentery. Nodular The gallbladder was inflamed and over distended with striating bile measuring 6.0 x 5.0 cm. This is consistent with inflamed gallbladder mucocele.

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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 **pancreas** revealed heterogenous changes.

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Free Abdomen

WEIGHT

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Free fluid was noted in the abdomen. This may be owing to a neoplastic process or related to the bile peritonitis.

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ULTRASONOGRAPHIC FINDINGS

Inflamed gallbladder mucocele with bile partitionists pattern. Potential underlying pancreatic and hepatic neoplasia.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Immediate exploratory surgery is indicated.

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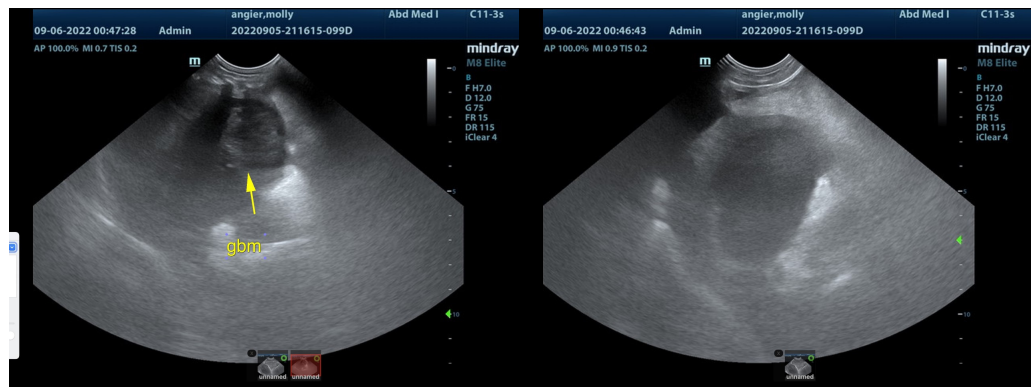
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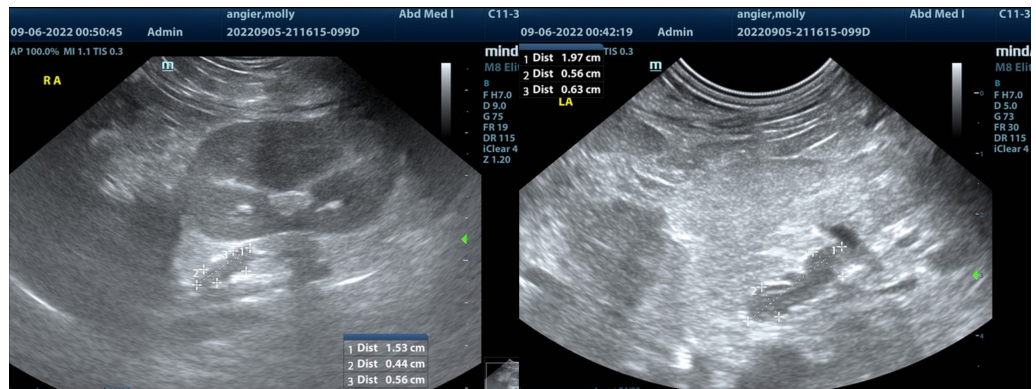
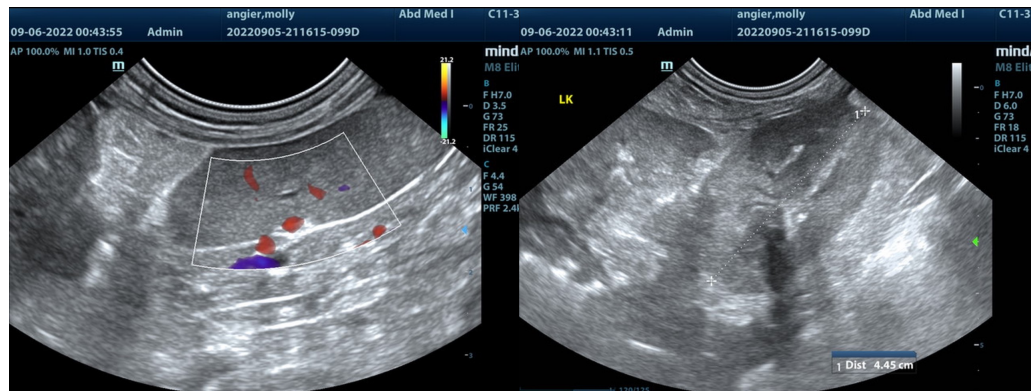
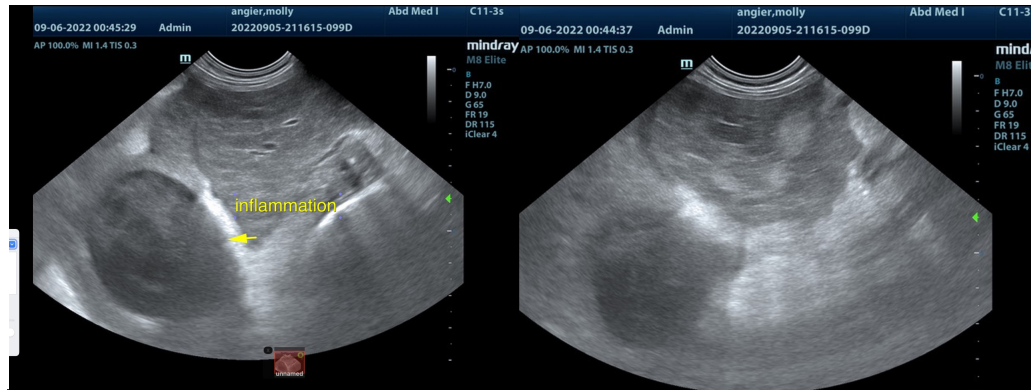
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com