

**DATE PRESENTING CLINICAL SIGNS**

9/7/21 History: Consist problems with diarrhea and vomiting despite diet change and medications.
Current Medications: currently on Metronidazole 500mg - 1.5 tabs every 12 hours for 10 days.

PATIENT Date of Previous IntraPet Ultrasound: No previous.

Lola Sorel Sedation: Not needed.

Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SPECIES**

Canine

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.

BREED

Terrier X

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 7.18 cm. The left kidney measured 3.79 cm.

SEX

Spayed Female

AGE

2013

Adrenal Glands

The **adrenal glands** were flattened, isoechoic, and poorly visible. The right adrenal gland measured 1.65 cm x 0.29 cm at the caudal pole and 0.23 cm at the cranial pole. The left adrenal gland measured 2.28 cm x 0.42 cm at the caudal pole and 0.41 cm at the cranial pole.

WEIGHT

80 Pounds

Spleen

The **spleen** revealed a focal, hypoechoic nodule in the mid body measuring 1.25 cm x 0.65 cm.

INTERPRETED BY

Eric Lindquist, DMV
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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 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.

HOSPITAL NAME

Padonia Vet Hospital

REFERRING VET

Dr. Youssef

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.

INVOICE

25228

Pancreas

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.

Heart

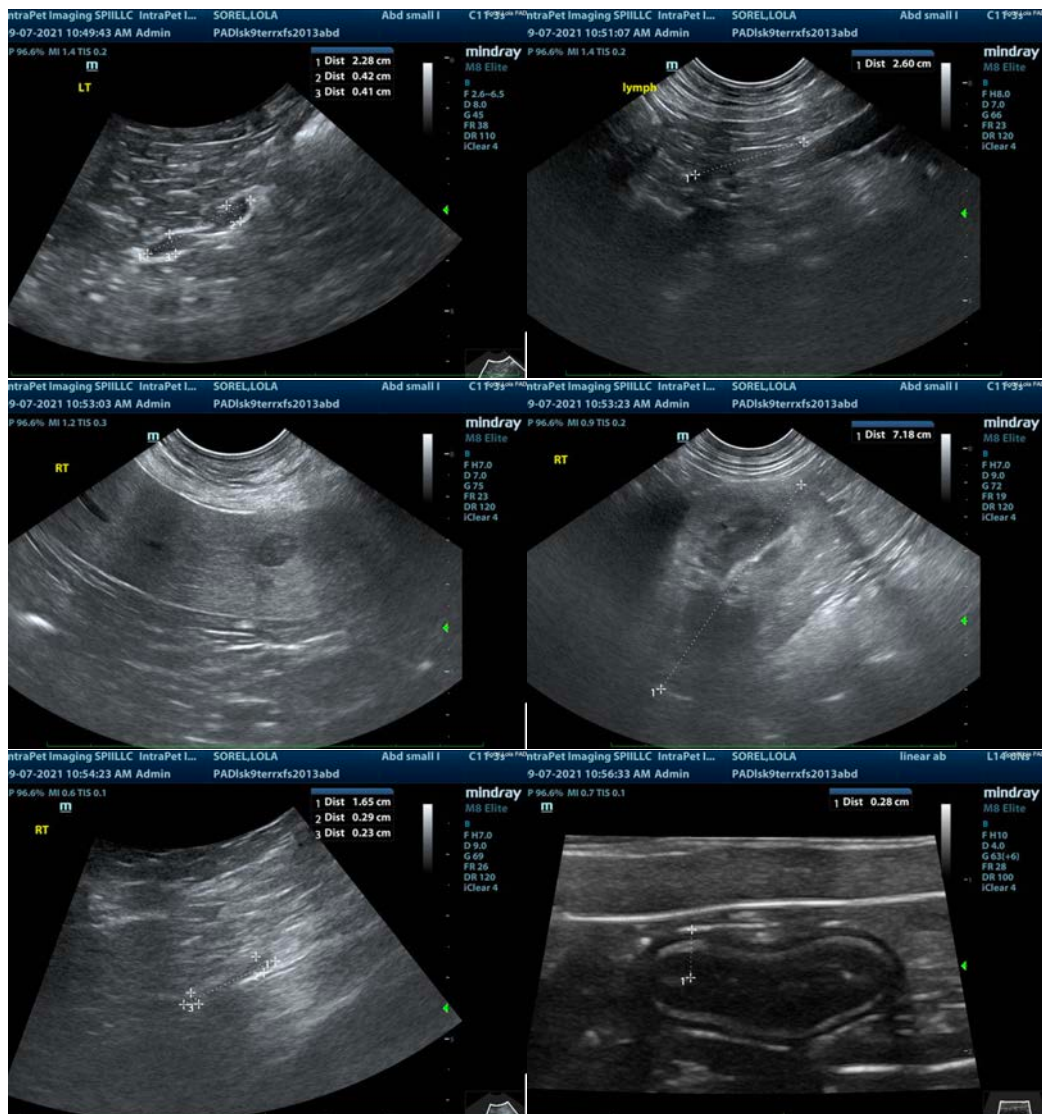
Rapid view of the heart revealed no evident pathology.

ULTRASONOGRAPHIC FINDINGS

- Subnormal adrenal size
- Undefined splenic nodule

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening for Addison's warranted. FNA indicated. Hyperplasia likely. Emerging round cell neoplasia or hemangiosarcoma possible, should be monitored. Otherwise, supportive care for GI upset should prove effective. Dietary indiscretion, food intolerance, structurally insignificant inflammatory bowel or occult parasitism and occult Addison's are all potentials.



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.

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