

**DATE PRESENTING CLINICAL SIGNS**

9/7/21

History: Presenting Complaint: Not eating; trouble breathing.

PATIENT

Date: 09-04-2021 Notes: PC: hyporexia, panting/ increased RR, vomiting, weight loss. Hx of GI upset. Tried bland diet ATO- more lethargic, panting, no specific pain, hyporexia - owner thought it was the food. He vomited once on Monday and has lost weight.

Vanilla Durbin

Assessment: 11 yr FS Rat terrier Problems: vomiting, weight loss, hyporexia, panting. On PE- < 5% dehydrated, tense abdomen, no back or neck pain, ambulatory. DDX: pancreatitis vs gastroenteritis vs neoplasia vs IBD vs back pain (not seeing evidence of this) vs liver vs kidney vs diabetes vs other. Plan: Recommend to o - start with diagnostics testing (Blood work and Radiographs cbc/chem/lytes, +- 4dx, x ray 2 view, ua). AUS recommended - gave drop off aus

SPECIES

Canine

BREED

Rat Terrier

Current Medications: Not provided by the veterinarian.

Lab Results: Attached separately.

Radiographs: AFAST- no FF- mottled abnormal/ large spleen TFAST- no FF. Rads: Whole Body 2 view- enlarged spleen; rest nsf.

SEX

Spayed Female

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: not needed

Stat Report: not requested

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**AGE**

9/28/09

Urinary SystemThe **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.**WEIGHT**

31.8 Pounds

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 5.3 cm. The left kidney measured 5.21 cm.**INTERPRETED BY**Eric Lindquist, DMV
DABVP, Cert. IVUS**HOSPITAL NAME**Animal Emergency
Hospital**Adrenal Glands**Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The right adrenal gland measured 2.0 cm x 0.67 cm at the caudal pole and 0.78 cm at the cranial pole. The left adrenal gland measured 1.98 cm x 0.54 cm at the cranial pole and 0.66 cm at the caudal pole.**REFERRING VET**

Dr. Kalwa

SpleenThe **spleen** presented multifocal hypoechoic coalescing nodular changes with lacey appearance, generalized splenomegaly, scalloping, and enhanced surrounding mesentery.**INVOICE**

25223

LiverThe **liver** was uniformly enlarged with heterogeneous parenchymal changes and increased portal markings. The biliary tree appeared compressed owing to internal mass effects. The gallbladder deviated.**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

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.

Free Abdomen

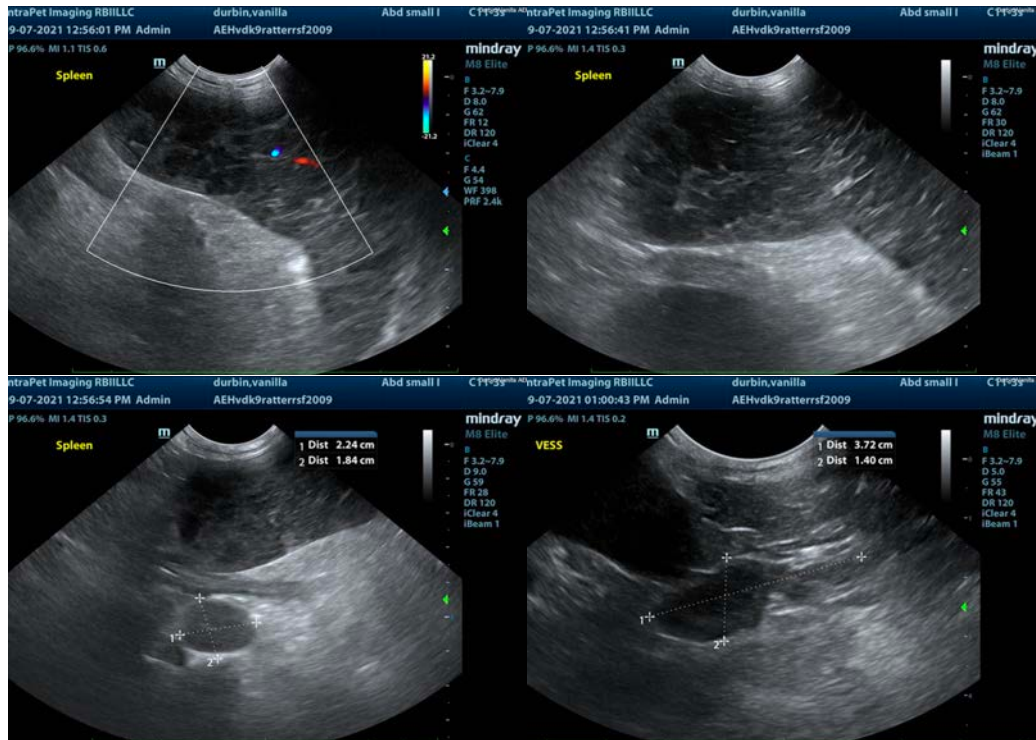
A sublumber lymph node was rounded, hypoechoic and irregular, measuring 1.53 cm. A separate lymph node measured 1.2 cm x 1.14 cm. An iliac lymph node measured 3.7 cm x 1.14 cm, undifferentiated and hypoechoic.

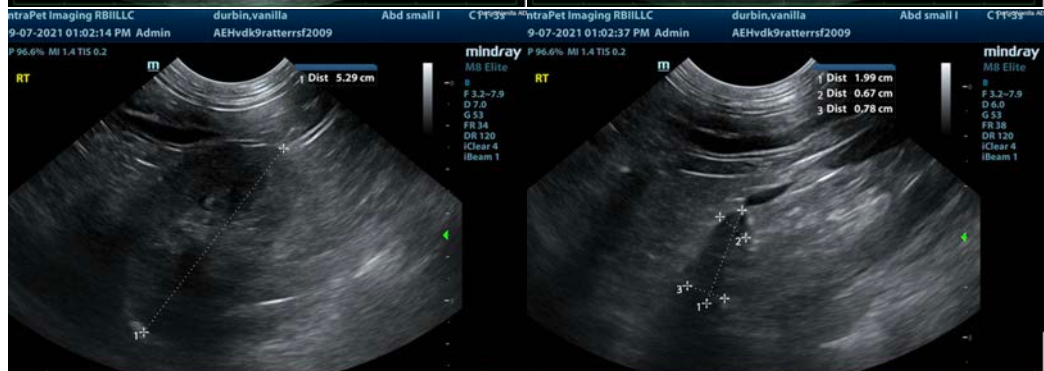
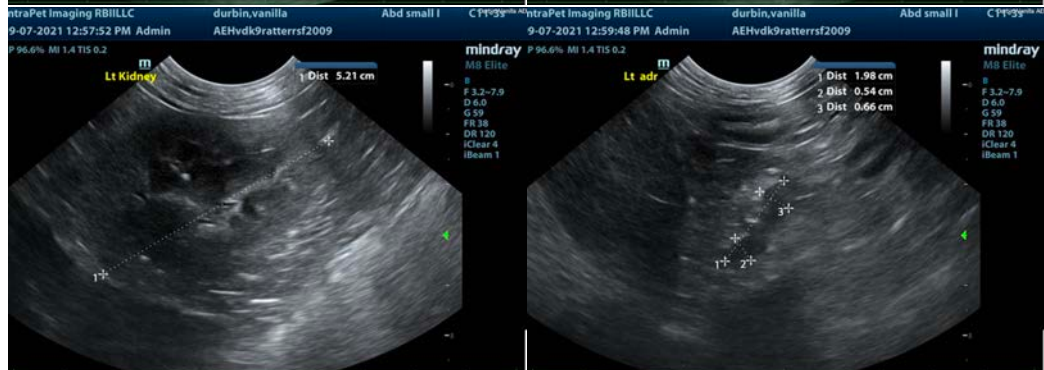
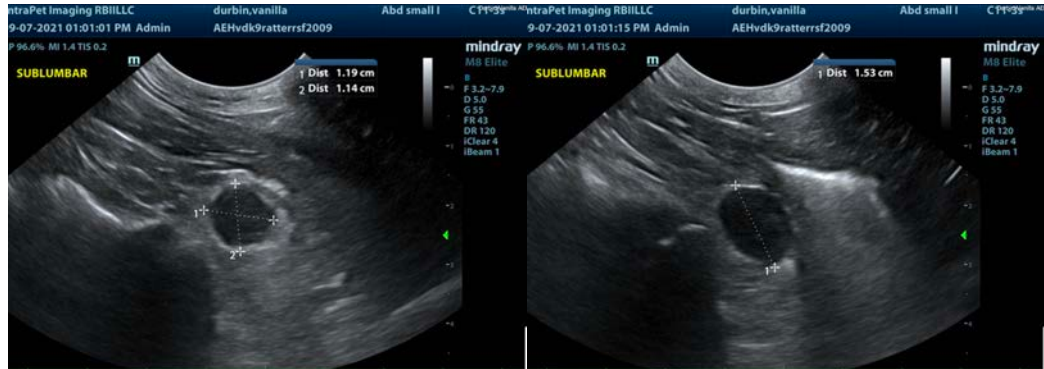
ULTRASONOGRAPHIC FINDINGS

- Infiltrative splenic and hepatic patterns with sublumber and iliac lymphadenopathy – strongly suggestive for lymphoma.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA lymph nodes, spleen and liver indicated. Prognosis is guarded to poor depending upon cytology results.





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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