



PATIENT

Little Miss Pierce

SPECIES

Canine

BREED

Dachshund

SEX

Spayed female

AGE

5 years

WEIGHT

12.37 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Q Street AH

REFERRING VET

Dr. Bretschneider

DATE

10/26/22

Invoice

42150

PRESENTING CLINICAL SIGNS

History: painful abdomen, not eating for day. vomits if drinks water was seen on 10/22/22 at the Emergency Vet and had blood work and radiographs done. Dehydrated but otherwise all the tests were normal. Improved for a day or two - able to keep some food down. Sent home on Cerenia, Gabapentin, and Omeprazole. But back to not eating and vomiting

Abnormal PE/Chem/CBC/UA Results: ABNORMAL Laboratory Findings no significant abnorms
Current Medications cerenia Radiographic Findings done at Emergency Vet, no signif findings

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. A minor amount of suspended debris was noted. 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 4.77 cm. The right kidney measured 4.75 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 2.7 x 1.12 cm at the cranial pole and 0.54 cm at the caudal pole. The right adrenal gland measured 1.84 x 0.49 cm at the caudal pole and 0.46 cm at the cranial pole.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself cranially. This is a positional variant and is not pathological. There was no evidence of significant disease.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



PATIENT

Little Miss Pierce

SPECIES

Canine

BREED

Dachshund

SEX

Spayed female

AGE

5 years

WEIGHT

12.37 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Q Street AH

REFERRING VET

Dr. Bretschneider

DATE

10/26/22

Invoice

42150

Gastrointestinal

The **stomach** was dilated with fluid and had an edematous wall. Excessive gastric gas was noted. This is consistent with gastritis. The small intestine and colon were unremarkable. Echogenic mucosal remodeling was noted. This is suggestive for chronicity. There was no overt ulcerative disease; however, microulcerative changes may be present.

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.

ULTRASONOGRAPHIC FINDINGS

Gastritis presentation.

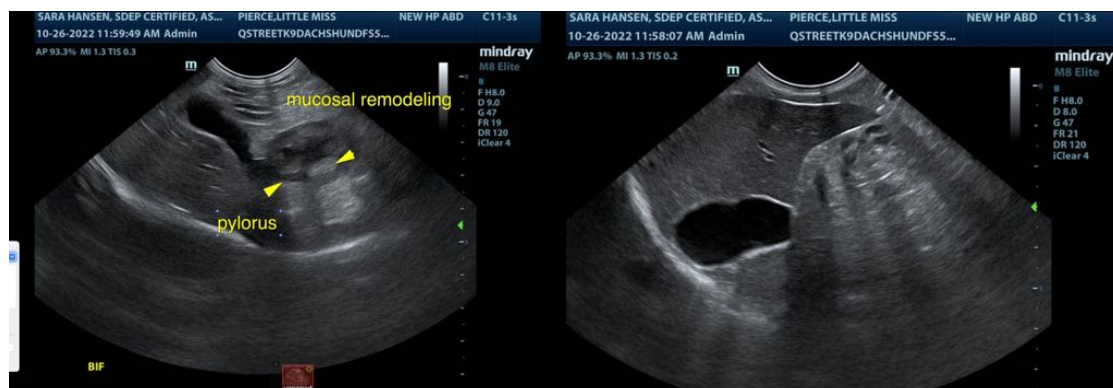
Minor bladder debris.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinalysis is warranted if not already performed. GI protectant protocol/treatment for gastritis is indicated. There was no evidence of foreign body or neoplasia. If clinical signs persist despite empirical measures then endoscopy is indicated.

Helicobacter/Gastritis protocol

A clinical trial of **Zithromax** (**Dogs:** 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), **Metronidazole** (10-20 mg/kg p.o. b.i.d.), **Pepcid** (0.5-1 mg/kg s.i.d.) and **Sucralfate** (0.5-2 g/dog PO) or **Omeprazole** (1 mg/kg p.o. s.i.d.) over the next 3 weeks along with a **novel-protein or hydrolyzed diet** with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.





PATIENT

Little Miss Pierce

SPECIES

Canine

BREED

Dachshund

SEX

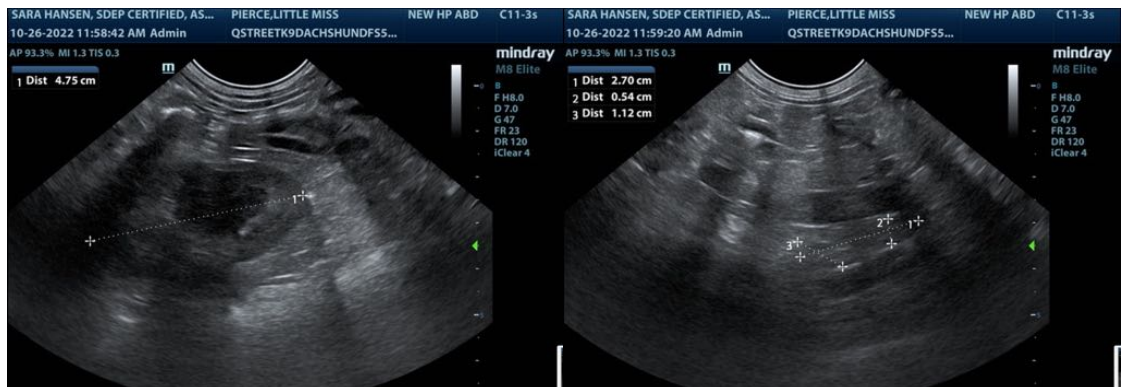
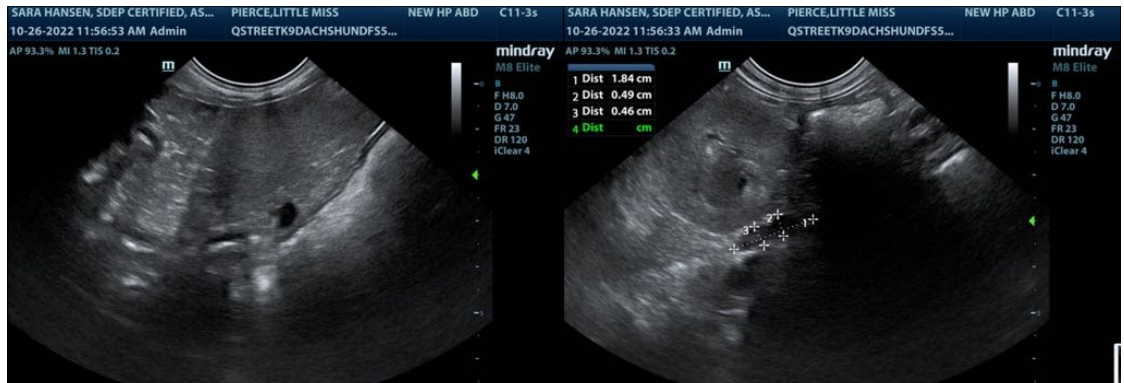
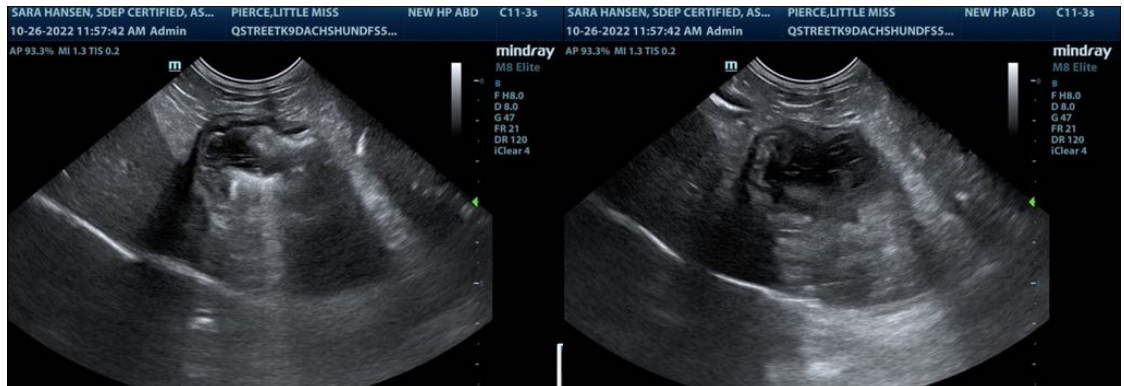
Spayed female

AGE

5 years

WEIGHT

12.37 lbs



INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Q Street AH

REFERRING VET

Dr. Bretschneider

DATE

10/26/22

Invoice

42150



PATIENT

Little Miss Pierce

SPECIES

Canine

BREED

Dachshund

SEX

Spayed female

AGE

5 years

WEIGHT

12.37 lbs



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

Eric.Lindquist@SonoPath.com

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Q Street AH

REFERRING VET

Dr. Bretschneider

DATE

10/26/22

Invoice

42150