



**PATIENT**

Jameson Sebastian

**PRESENTING CLINICAL SIGNS**

History: V+ (fecal like material as per O), lethargy.  
Abnormal PE/Chem/CBC/UA Results: NSF

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Mastiff Mix

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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.

**SEX**

Neutered male

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. Occasional cortical cyst was noted in the kidneys. The left kidney measured 7.25 cm. The right kidney measured 6.73 cm.

**AGE**

8 years

**WEIGHT**

83.5 lbs

**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 right adrenal gland measured 2.79 x 1.07 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 2.76 x 0.71 cm at the cranial pole and 0.76 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. 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.

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**Liver**

The **liver** revealed slightly increased portal markings with mild irregular hepatic contour. The gallbladder and common bile duct were unremarkable.

**INVOICE**

31061

**Gastrointestinal**

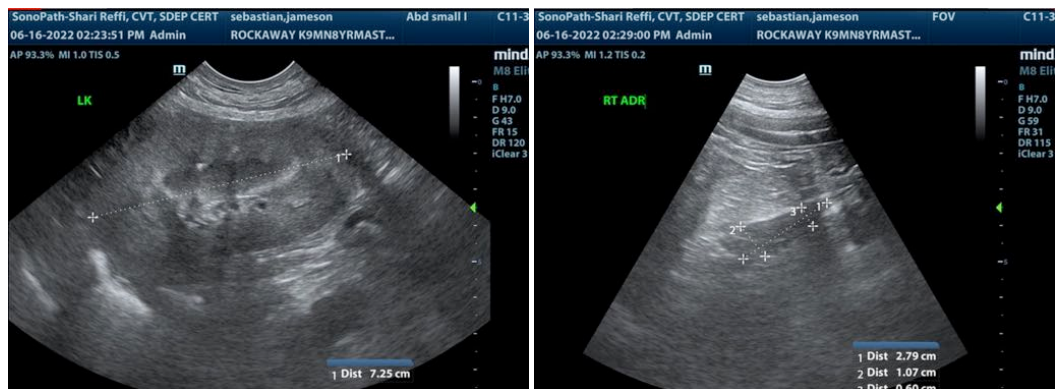
**DATE**

6/16/22

The gastric wall was mildly thickened. The intestines were free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated



<b>PATIENT</b>	normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.
Jameson Sebastian	
<b>SPECIES</b>	<b>Pancreas</b>
Canine	The base and limbs of the <b>pancreas</b> 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.
<b>BREED</b>	
Mastiff Mix	
<b>SEX</b>	Minor gastritis pattern, slight hepatic remodeling. History of cholangitis is likely, yet the changes were minor.
Neutered male	
<b>AGE</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
8 years	Bile acid profile is warranted. GI protectant protocol such as the following would be recommended.
<b>WEIGHT</b>	<b>Helicobacter/Gastritis protocol</b>
83.5 lbs	A clinical trial of <b>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.), Sucralfate (0.5-2 g/dog PO) and Omeprazole (1 mg/kg p.o. s.i.d.)</b> over the next 3 weeks along with a <b>novel-protein or hydrolyzed diet</b> 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.
<b>INTERPRETED BY</b>	
Eric Lindquist, DMV DABVP, Cert. IVUSS	
<b>IMAGING PERFORMED BY</b>	
Shari Reffi, CVT	
<b>HOSPITAL NAME</b>	
Rockaway AH	
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
31061	
<b>DATE</b>	
6/16/22	





**PATIENT**

Jameson Sebastian

**SPECIES**

Canine

**BREED**

Mastiff Mix

**SEX**

Neutered male

**AGE**

8 years

**WEIGHT**

83.5 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

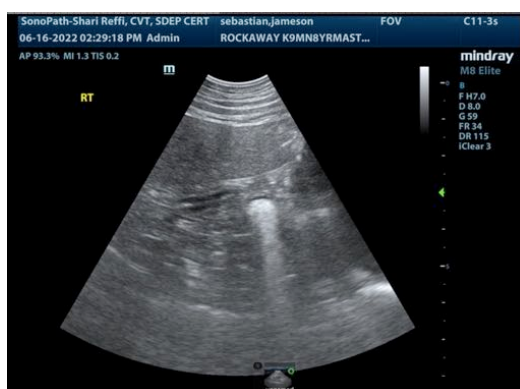
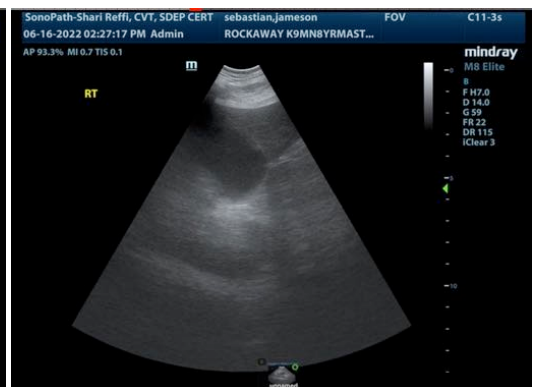
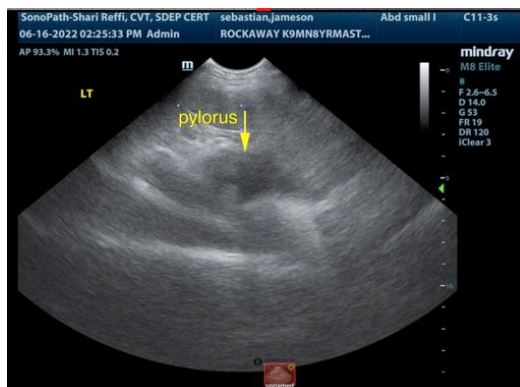
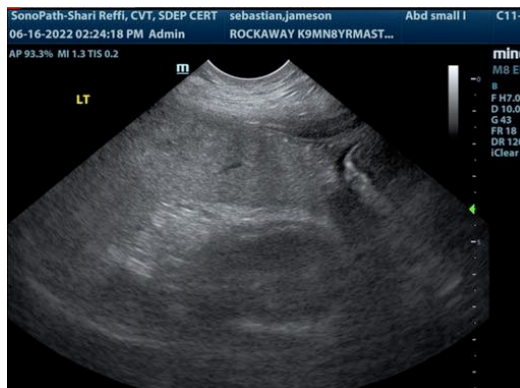
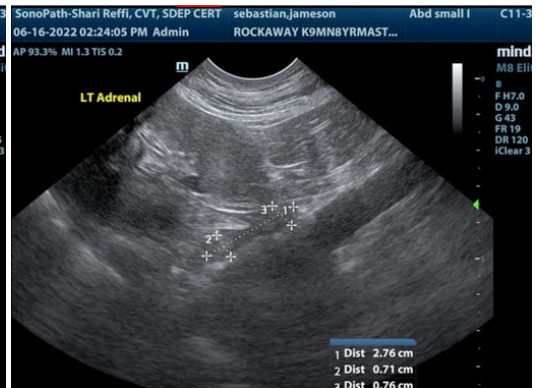
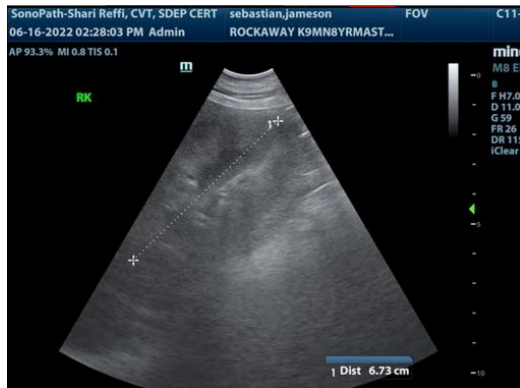
Dr. Maniar

**INVOICE**

31061

**DATE**

6/16/22





**PATIENT**

Jameson Sebastian

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.

**SPECIES**

Canine

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.

**BREED**

Mastiff Mix

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
Info@SonoPath.com

**SEX**

Neutered male

**AGE**

8 years

**WEIGHT**

83.5 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

31061

**DATE**

6/16/22