

PATIENT

Nudge Gleisburg

PRESENTING CLINICAL SIGNS

History: acute vomiting /lethargy; runt of the litter, did not thrive in the beginning.
Abnormal PE/Chem/CBC/UA Results: crea 3.4, BUN 86, P 8.1, Ca 12.4, lept negative. USPG 1.012

SPECIES

Canine

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.

BREED

Rough Coated Collie

The uterus was uniform and was unremarkable and measured 0.67 cm.

SEX

Intact female

The **kidneys** are relatively normal in size and structure. Mildly increased cortical echogenicity was noted with minor loss of corticomedullary definition. The left kidney measured 5.08 cm and the right kidney measured 4.58 cm.

AGE

8 months

Adrenal Glands

The left **adrenal gland** was flattened and isoechoic measuring 2.14 x 0.23 cm at the caudal pole and 0.25 cm at the cranial pole. The right adrenal gland was flattened and isoechoic measuring 2.3 x 0.25 cm.

WEIGHT

32 lbs

Spleen

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Diane McFadden, RVT

Liver

HOSPITAL NAME

Blairstown AH

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.

REFERRING VET

Dr. Clegg

INVOICE

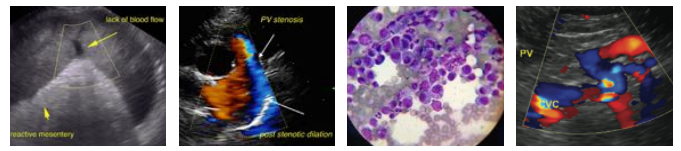
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Gastrointestinal

DATE

8/10/23

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.



PATIENT *Pancreas*

Nudge Gleisburg

The **pancreas** revealed mild heterogenous changes in the right limb. Low-grade inflammation is indicated.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Subnormal adrenal size. Potential underlying Addison's.

BREED

Acute renal failure.

Rough Coated Collie

Low-grade pancreatic inflammation.

SEX

Intact female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a potential for renal dysplasia. I recommend screening for Addison's with baseline cortisol or ACTH stimulation as well as Leptospirosis titers to assess for acute insult. Assessment for toxin exposure is also warranted. IV Ampicillin, 72 hour IV fluid protocol is warranted as well as urine culture and blood pressure measurements.

AGE

8 months

WEIGHT

32 lbs

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Eric Lindquist, DMV
DABVP, Cert. IUUSS

IMAGING PERFORMED BY

Diane McFadden, RVT

HOSPITAL NAME

Blairstown AH

REFERRING VET

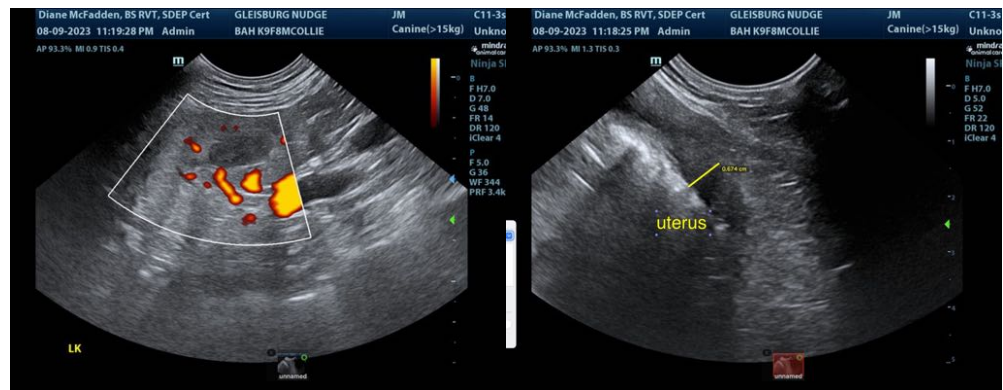
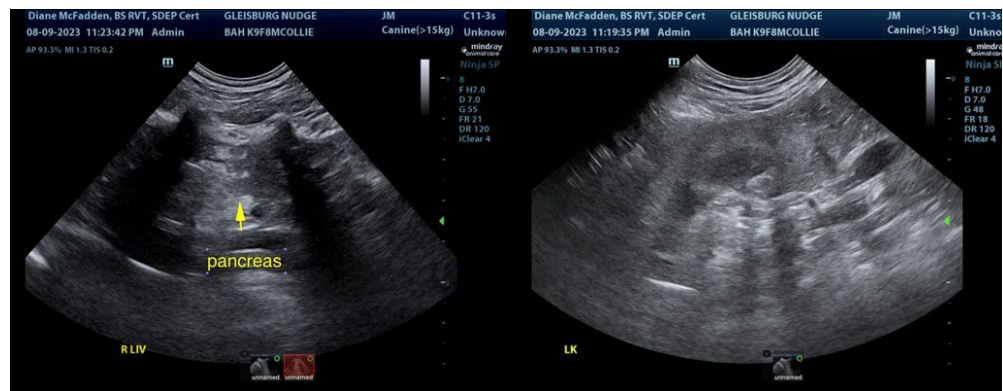
Dr. Clegg

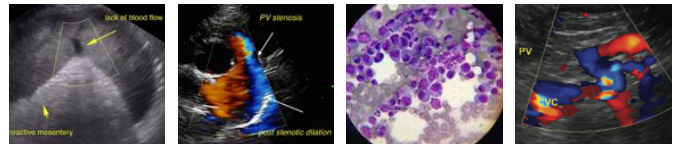
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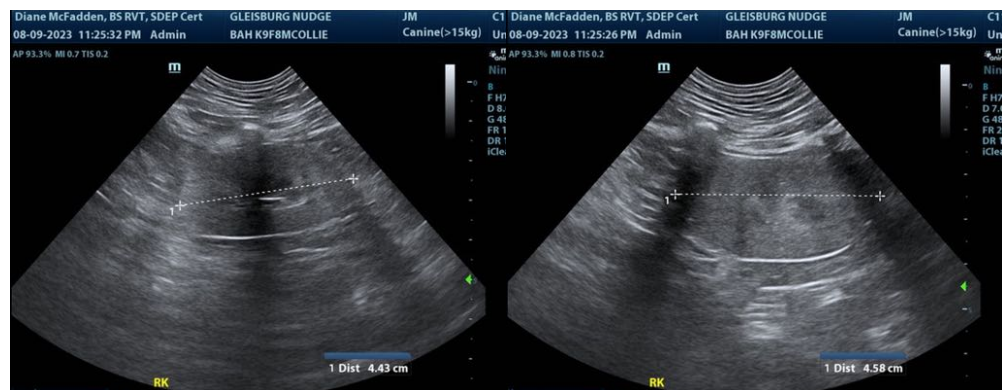
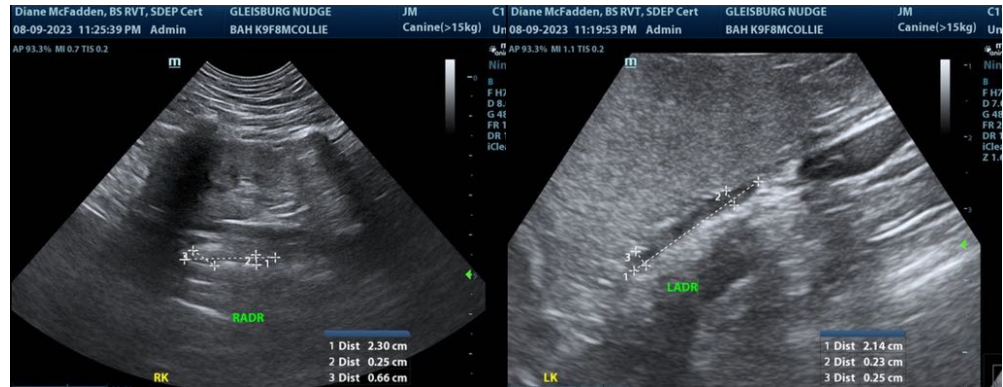
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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