

**DATE**

10/31/22

PRESENTING CLINICAL SIGNS**PATIENT**

Lily Bitner

History: Recheck AUS. Presents for vomiting - was doing well for past 2 weeks - out of medications previously prescribed on Monday - Follow up BW Monday, continued denamarin, two values returned to normal, one still elevated - last night found vomit, 2 biles of vomiting, food in vomitus, on ground turkey and rice has been on bland diet - vomit after eating, vomited water this morning, retching prior - not interested in eating this AM - was given bland Cheerios - no C/S/D - FB - no known history. Medications: Medication Doses per Neuro as of 8/1/2022 - Zonisamide 100mg capsules: continue to give 2 capsules by mouth BID

SPECIES

Canine

BREED

Australian Shepherd

until otherwise directed. - Phenobarbital 64.8mg tablets: continue to give 1 tablet by mouth BID- Keppra XR 500mg tablets: continue to give 1 tablets by mouth in the Morning, and 31tablets - Midazolam: continue to give 1.5mL PRN for seizures - Gabapentin 300mg capsules: continue to give 1 capsule by mouth PRN after the first seizure - Potassium Bromide (compounded) 1250mg capsules discontinued - started on Sodium Bromide 1000 mg SID - Denamarin - no other medications did not get medications this morning usually gets 6am/6pm

SEX

Spayed Female

Current Medications: Ondansetron, Buprenorphine, Denamarin, Phenobarbital, Keppra, Zonsamide. Lab Results: See attached.

AGE

8/7/18

Date of Previous IntraPet Ultrasound: 10/14/22. See attached.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

WEIGHT

60.5 Pounds

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 were noted. Ureteral papillae were normal.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS

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 6.43 cm. The right kidney measured 6.21 cm. Blood flow to the kidneys appeared to be adequate.

HOSPITAL NAMEAnimal Emergency
Hospital**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 2.85 cm x 0.83 cm at the caudal pole and 0.79 cm at the cranial pole. The right adrenal gland measured 2.46 cm x 0.9 cm at the cranial pole and 0.74 cm at the caudal pole.

REFERRING VET

Dr. Thompson

INVOICE

17925

Spleen

The **splenic** parenchyma was uniform. Caudal folding of the spleen was noted- this is not overtly pathological.

Liver

The **liver** revealed mild coarse architecture and slight increased portal markings. The gallbladder and common bile duct were unremarkable.

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

Residual **pancreatic** pathology was noted. A hypoechoic undifferentiated region of approximately 3.2 cm was noted with hyperechoic granulomatous type pattern otherwise. There is some blood flow to the region. FNA of the pancreatic pathology is indicated to assess for potential underlying carcinoma.

Free Abdomen

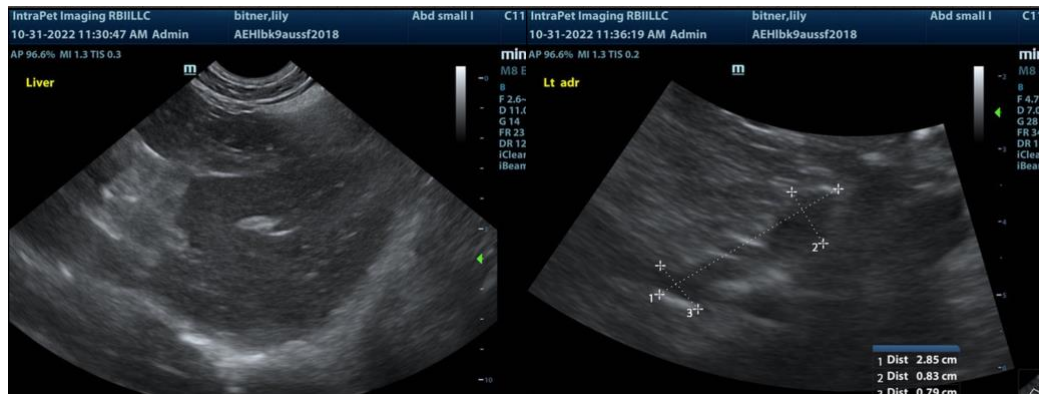
Slight **free fluid** was noted in the caudal abdomen adjacent to the spleen.

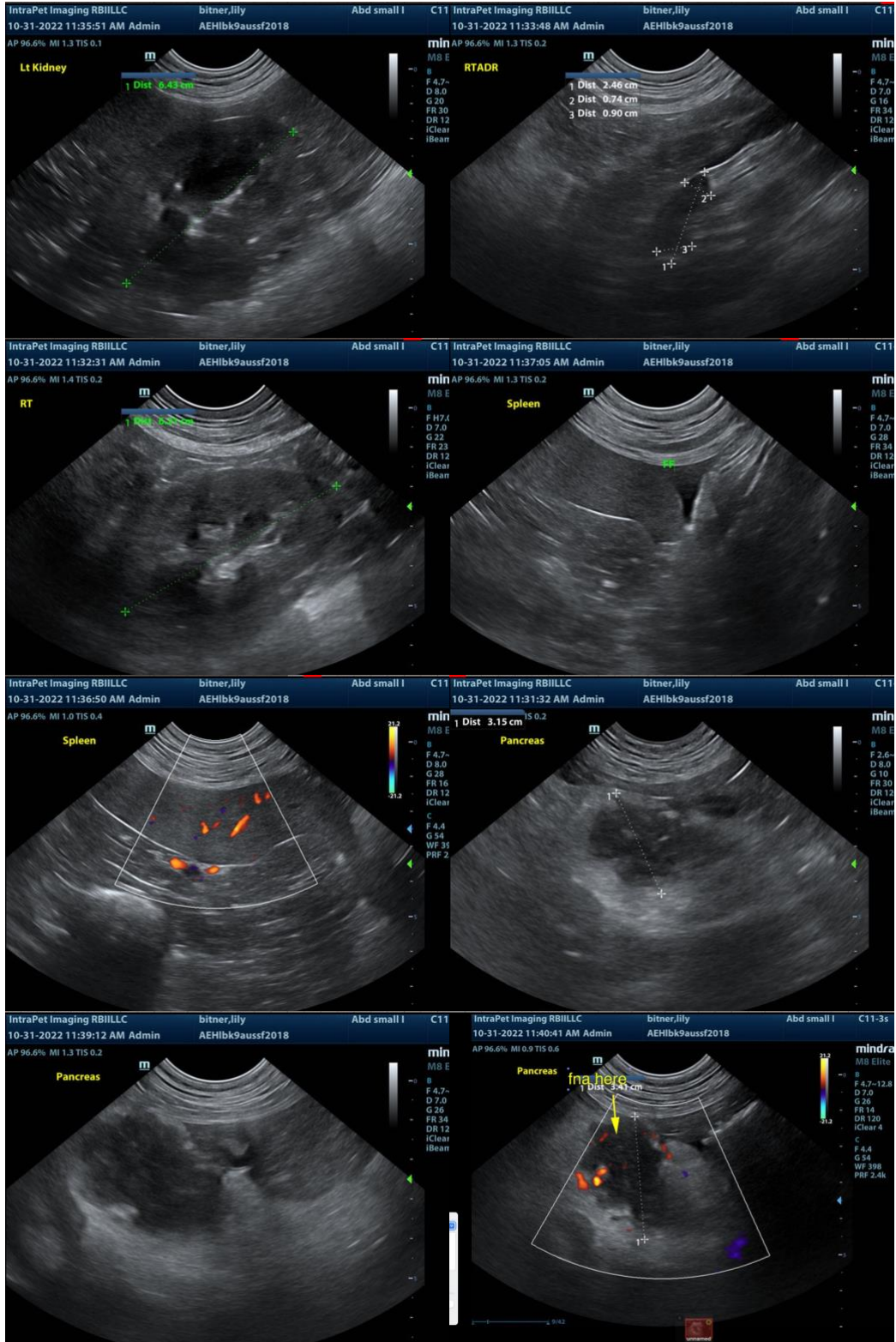
ULTRASONOGRAPHIC FINDINGS

- Pancreatitis/ necrosis pattern with potential underlying carcinoma in the right limb
- Cholangitis liver pattern
- Splenic fold
- Free fluid

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA is strongly recommended. Ultrasound guided abdominocentesis and cytospin of the free fluid is indicated as well. Treatment for pancreatitis is warranted. The pancreatic pathology was primarily in the right limb and involving the upper duodenum, likely contributing to clinical signs. Cytology and culture are warranted.







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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