



PATIENT

Laya Urribarri

SPECIES

Canine

BREED

Maltese

SEX

FS

AGE

7yr

WEIGHT

9.9lb

PRESENTING CLINICAL SIGNS

Reason for Visit: not sleeping, panting at night History: 7 y/o sf maltese presents for not sleeping at night for aprox two weeks. O says that P shakes/trembles, and pants at night, also has a decreased appetite throughout the day. Licking her lips excessively. Took to the ER last week and they gave methadone, fluids, gabapentin and cerenia. Before going to the ER she had diarrhea but not anymore. O has not seen any improvement in the sleeping. Normal chest/ab rads Elevated ALT, GGT, Tbili

Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: N Oral Cavity: mm pink-pale pink tacky, moderate tartar Lymph Nodes: N Skin: N CV/Respiratory: N Abd/GI: tense Uro/Perineum: N Musculoskeletal: grade 2 MPL's Neurological: N Chem: ALT 133 (10-125)

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.

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 3.4 cm in length. The right kidney measured 4.0 cm in length.

Adrenal Glands

The left adrenal gland had 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 0.5 cm. The right adrenal gland was not visualized.

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 were noted.

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.

Gastrointestinal

The upper gastrointestinal tract in this patient revealed a minor edematous wall. There was no evidence of foreign bodies. Minor areas of fluctuant fluid accumulation were noted within the lumen

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Eric Lindquist, DMV
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IMAGING PERFORMED BY

Michaleen

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REFERRING VET

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with hyperperistalsis. This pattern continued to the ileocecal valve. The colon revealed a fluid filled lumen. This presentation is most consistent with gastrointestinal irritation/inflammation without obstruction.

SPECIES

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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.

BREED

Maltese

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

7yr

- Non-specific GI upset
- Structurally normal liver

WEIGHT

9.9lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A fresh fecal analysis is recommended to rule out parasitic ova/giardia. 24 hour NPO and broad spectrum deworming protocol recommended. Acute hepatitis is a potential given the liver enzyme elevation. A leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area. The cause of the panting in this patient is unclear. No evidence of significant disease.

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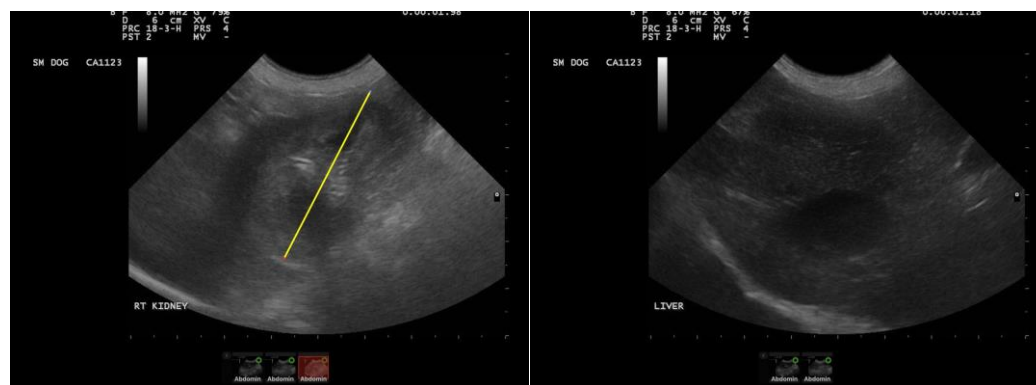
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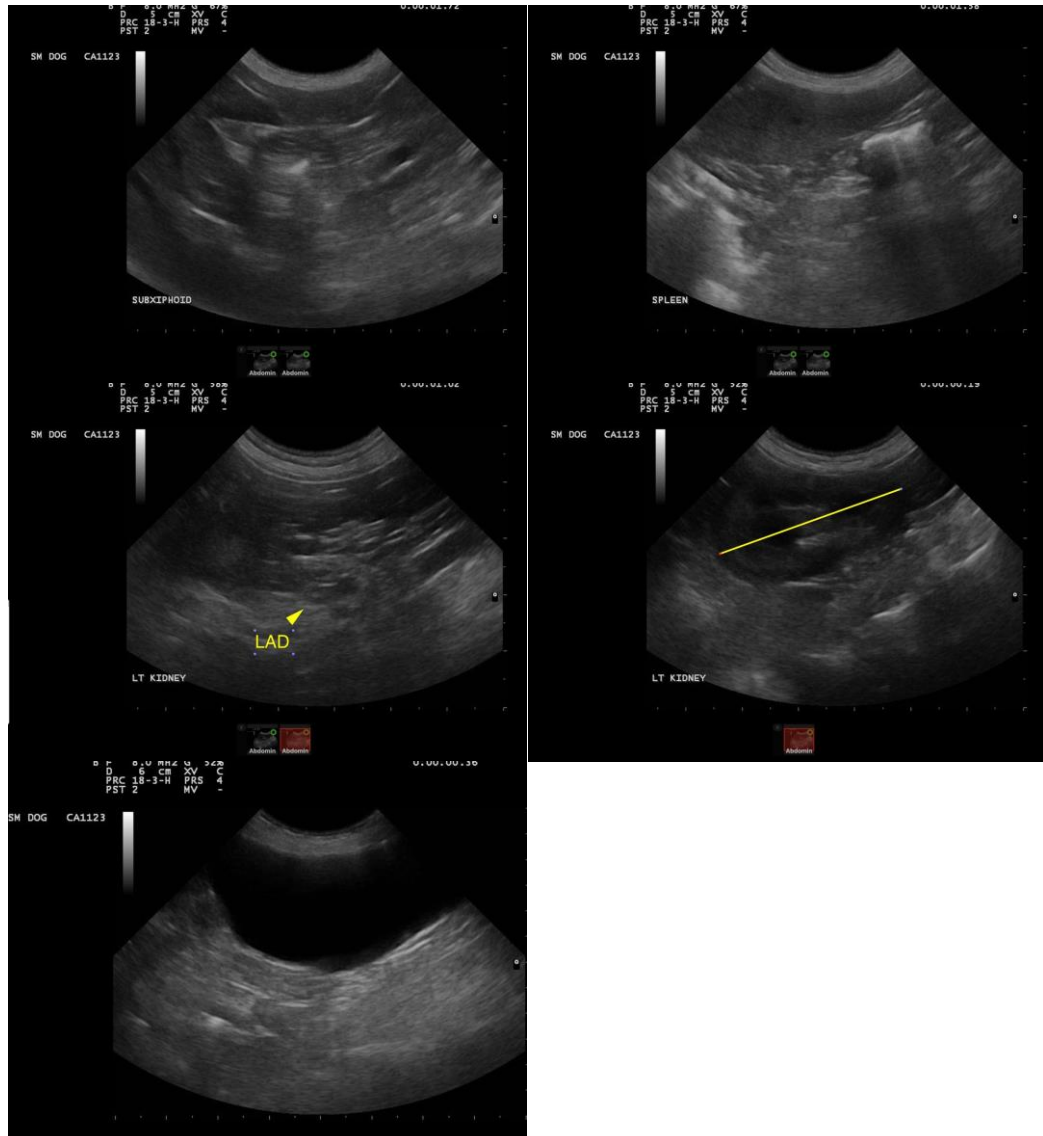
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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