

**PATIENT**

Blanton Steel

**PRESENTING CLINICAL SIGNS**

Abdominal ultrasound for possible underlying cause of thrombocytopenia  
 Abnormal PE/Chem/CBC/UA Results: Please see attached records and labs

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder is well distended with anechoic contents. The wall is smooth and regular. No abnormalities are noted with the trigone or proximal urethra, and there is no evidence of sediment,

**BREED**

Lab

**Kidneys**

The **left** kidney measures 6.55 cm. The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, is preserved. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

**SEX**

Spayed Female

The **right** kidney measures 6.30 cm. Its overall architecture, including the definition of the cortico-medullary junction, is preserved. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

**AGE**

5 Years

**Aortic bifurcation/trifurcation**

No abnormalities observed.

**WEIGHT**

82 Pounds

**Adrenal Glands**

The **left** adrenal gland measures 0.62 cm at the cranial pole, 0.52 cm at the caudal pole. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

**INTERPRETED BY**

Lisa Carioto, DVM,  
 DVSc, Diplomate  
 ACVIM

The **right** adrenal gland measures 0.49 cm at the cranial pole, 0.44 cm at the caudal pole. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

**IMAGING PERFORMED BY**

Amy Mayhew, LVT

**Spleen**

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

**HOSPITAL NAME**

SVS Imaging MI

**Liver**

There are no obvious signs of microhepatica (as per the radiology report) and the liver's borders are smooth and sharp. The liver's echotexture is homogeneous and it is within normal limits in echogenicity. Focal lesions are not observed and no abnormalities are observed with the hepatic vessels.

**REFERRING VET**

Rochester VH

The gallbladder (GB) is mildly dilated (consistent with a fasted individual). There is no evidence of echogenic material within the GB or edema surrounding it. The GB wall is within normal limits in thickness and echogenicity. The portions of the cystic and/or common bile ducts observed are not dilated or tortuous, i.e. there are no signs of an obstruction.

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**Gastrointestinal****DATE**

6/17/22

A large amount of gas is present within the lumen of the stomach. The gastric wall is within normal limits in thickness and the wall layers are well defined. No obvious abnormalities are observed with its peristalsis.

## IMAGING PERFORMED BY

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The small intestinal wall thickness, including the duodenum, is within normal limits and the definition of the wall layers is preserved. Gas is present within the lumen of the duodenum. Abnormally dilated loops of bowel are not observed.

### SPECIES

Canine

The colonic wall is not thickened and mural detail is considered normal. Gas is present within the descending colon.

There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction in the gastrointestinal tract.

### BREED

Lab

#### ***Pancreas***

No abnormalities are observed with the architecture, contours, echogenicity or echotexture of the pancreas. There is no evidence of hyperechogenicity of the surrounding mesentery, i.e., signs of active pancreatitis are not present.

### SEX

Spayed Female

#### **Other**

#### **Lymph nodes**

No abnormalities are observed

### AGE

5 Years

**Abdominal effusion** is not visualized.

### WEIGHT

82 Pounds

### ULTRASONOGRAPHIC FINDINGS

- No abnormalities are observed on today's abdominal ultrasound, and none to explain the history of thrombocytopenia.

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Leptospirosis will have been treated with the administration of doxycycline. *Bartonella* spp. would have most likely been treated with treatment of both doxycycline and enrofloxacin.

Macrothrombocytosis has been described in breeds other than Cavalier King Charles, however, this condition does not tend to cause platelets as low as  $9 \times 10^9/L$ . The platelet count performed at Oakland Veterinary Emergency Critical Care on May 20<sup>th</sup> was  $84 \times 10^9/L$ , which is more consistent with macrothrombocytosis. Treatment for macrothrombocytosis is not necessary.

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### REFERRING VET

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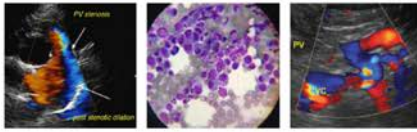
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**SPECIES**

Canine

**BREED**

Lab

**SEX**

Spayed Female

**AGE**

5 Years

**WEIGHT**

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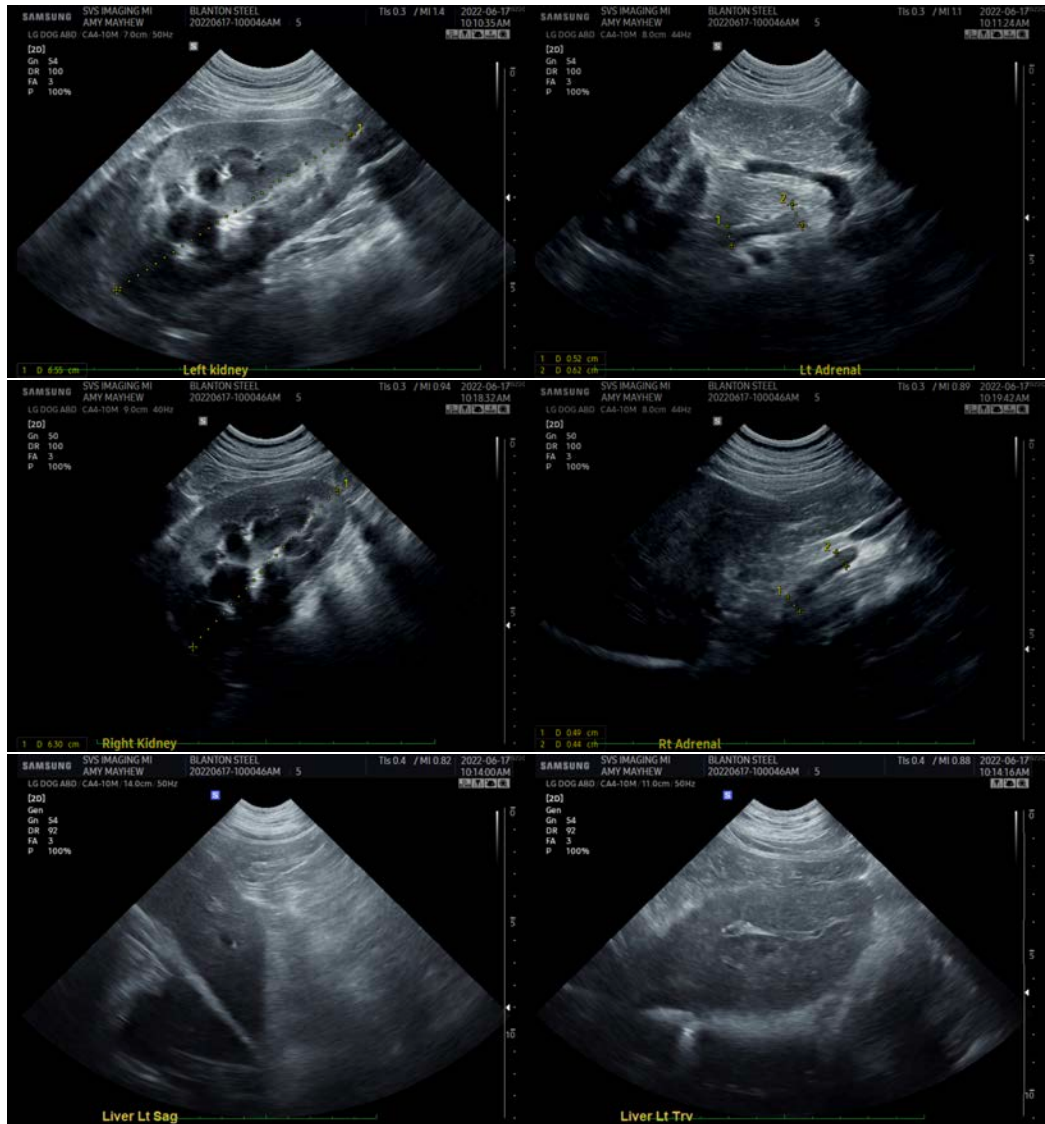
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**Clinical Sonography & Telectology**

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Canine

**BREED**

Lab

**SEX**

Spayed Female

**AGE**

5 Years

**WEIGHT**

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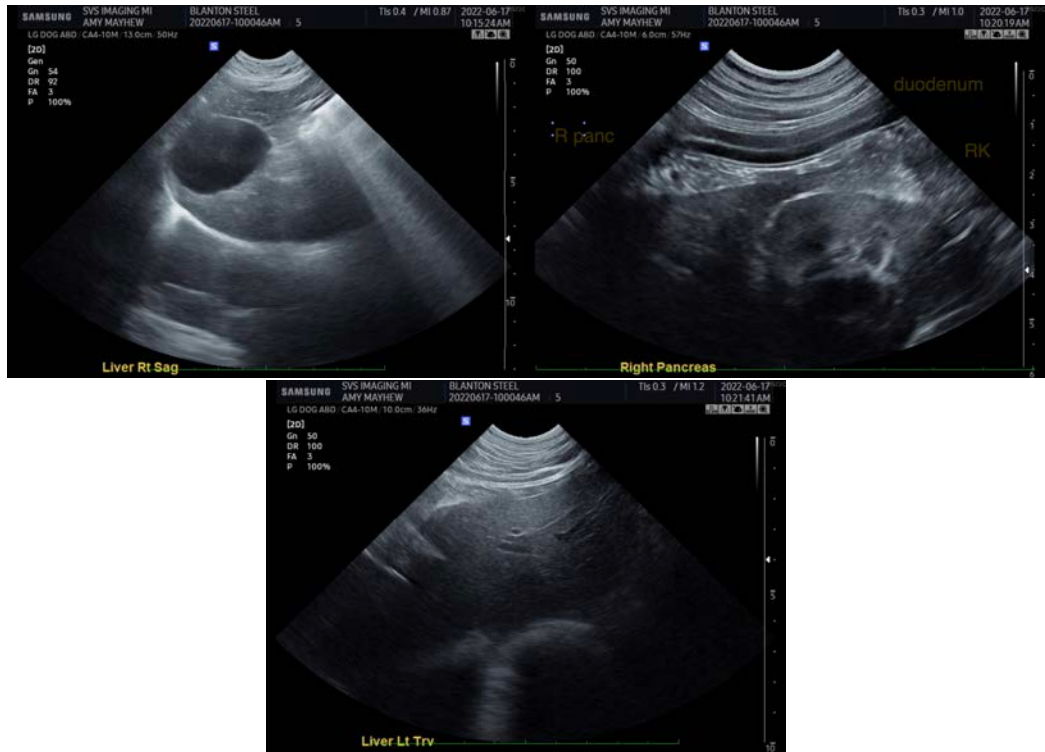
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Lisa Carioto, DVM, DVSc, Diplomate ACVIM

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