



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Quitte Diamond  
**SPECIES** Canine  
**BREED** German Shepherd

History: Quitte presented as a referral for an abdominal ultrasound. Pt presented on September 20, 2021 for vomiting and diarrhea. The history showed there was dietary indiscretion. Abdominal rads were done ( moderate amount of gas in the GI tract but no obvious Foreign body. Bloodwork was WNL. Pt was sent home with Cerenia, Metronidazole and ratinidine. Pt presented again in Sept 28, 2021 with the same presentation and abdominal rads were done and showed less gas in the GI tract but the stomach wall appeared inflamed. It also seems that the mediation sent home the first visit were not administered.

**BREED** Abnormal PE/Chem/CBC/UA Results: The PE was wnl The BW was wnl Rads as described above.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SEX Urinary system**

**SEX** Spayed Female  
**AGE** 2 Years

The urinary bladder, trigone und pelvic urethra present normal findings without evidence of uroliths or sediment. Wall layering is intact on all views without focal or diffuse thickening. Ureters are not visualized and considered to be normal. No evidence of an inflammatory or neoplastic process are noted.

Both kidneys appear normal, there is a clear corticomedullary definition. Renal pelvises and exit to the ureters are unremarkable.

**INTERPRETED BY** The uterus is inconspicuous.

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 German Board  
 Certified Vet Specialist  
 in Diagnostic Imaging

**Adrenal glands**  
 Both adrenal glands are normal.

**HOSPITAL NAME Spleen**

**HOSPITAL NAME** Paseos VC  
 Splenic echogenic texture is mildly inhomogeneous. Surface is inconspicuous and vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins. There are no signs of nodular/focal changes are noted.

**REFERRING VET Liver/Gallbladder**

**REFERRING VET** Dr. Carlos Zequeira  
 Liver images are inconspicuous. Echotexture, size and vasculature appear regular. Evidence of nodular or focal changes are not visible.

**INVOICE** Gallbladder is inconspicuous with small amounts of sludge, a florid process or cholestasis are not recognized.  
 13370

**DATE Gastrointestinal**

9/30/21



**PATIENT**

Quitte Diamond

The stomach appears moderately filled with mixed ingesta. Peristalsis is noted with a regular and circular thickening of the gastric wall. The small intestine and colon present intact wall layers being normal in width and echogenicity. Adjacent mesentery and fat tissue appear mildly hyperechoic at the level of the ileocolic junction. Mesenteric lymph nodes are moderately enlarged but present still normal shape and periphery.

**SPECIES**

Canine

**Pancreas**

All pancreatic parts displayed show isoechoic echogenicity to the surrounding omental fat. Signs of inflammatory changes or focal lesions are missing.

**BREED**

German Shepherd

**Free Abdomen**

No peritoneal or retroperitoneal effusion. Abdominal fat and great vessels show no pathological findings.

**SEX**

Spayed Female

**Ultrasonographic findings**

- Mild mesenteritis ileocolic junction
- Moderate mesenteric lymphadenomegaly
- Mild and unspecific splenomegaly

**AGE**

2 Years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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Ultrasonographic findings are mild and likely consistent with an inflammatory process as seen with enteritis. Focal and subtle mesenteritis is noted at the level of the ileocolic junction. The enlarged lymph nodes represent moderate, reactive-inflammatory lymphadenopathy. Regarding the acute onset, I assume infectious disease to be most likely. If empiric therapy is not successful fecal examination could be performed next.

**HOSPITAL NAME**

Paseos VC

Normal sonographic appearance of the GI tract does not exclude functional problems such as indigestibility going along with IBD.

**REFERRING VET**

Dr. Carlos Zequeira

Splenomegaly is an unspecific finding and commonly is secondary to systemic inflammatory/infectious disease.

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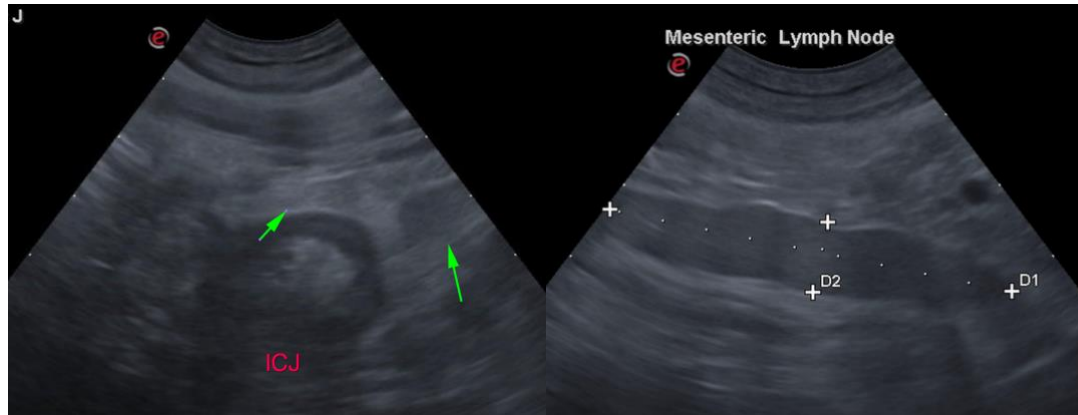
Quitte Diamond

**SPECIES**

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**SEX**

Spayed Female

**AGE**

2 Years

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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**HOSPITAL NAME**

Paseos VC

**REFERRING VET**

Dr. Carlos Zequeira

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