**DATE PRESENTING CLINICAL SIGNS**

12/10/21 History: O reporting chronic diarrhea for 3 years. We have record of diarrhea 6/2018, 7/2020, 9/2020, 7/2021, 9/2021, 12/2021. Presented today 12/8/2021 with vomiting, diarrhea, and lethargy.

PATIENT

Henri Jacobson

Current Medications: Has been treated with Metronidazole and probiotics in past. Eating science diet i/d diet since 7/2021. 12/8/21: Cerenia 32mg IV, 700ml LRS SQ, Disp Cerenia 60mg 1 PO SID x 4 days, Rx Tylan powder 1/4 tsp PO BID.

SPECIES

Canine

Lab Results: senior profile with GI panel pending.

Radiographs: abdominal rads unremarkable.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

BREED

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Golden Retriever

One brief video clip is available for interpretation.

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**AGE**

10/15/17

Urinary System

In the visualized portion of the bladder, the lumen is moderately distended with anechoic urine. The wall is normal in thickness with a smooth mucosal surface. No cystic calculi are observed.

WEIGHT

70.4 Lbs.

Prostate

The prostate is not definitively visualized due to its pelvic location.

INTERPRETED BY

Andrea Nicastro, DMV,
Diplomate DACVIM
(Small Animal
Internal Medicine)

The left kidney presented normal size (6.09 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney presented normal size (6.44 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

IMAGING PERFORMED BY

Andi Parkinson RDMS

Adrenal Glands

The left adrenal gland is normal size (0.41 cm at cranial pole) (0.46 cm at caudal pole) (2.56 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

HOSPITAL NAME

Timonium AH

The right adrenal gland is normal size (0.61 cm at cranial pole) (0.77 cm at caudal pole) (2.33 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

REFERRING VET

Dr. Brand

Spleen

The spleen is normal in size (1.61 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

INVOICE

10032

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of suspended echogenic debris is suspended within the lumen. The cystic and common bile ducts are normal.

Gastrointestinal

The gastric lumen is gas distended. The gastric wall and is normal in thickness with a normal layering pattern. The small intestinal lumen is diffusely gas distended, obscuring visualization of some regions. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

Free Abdomen

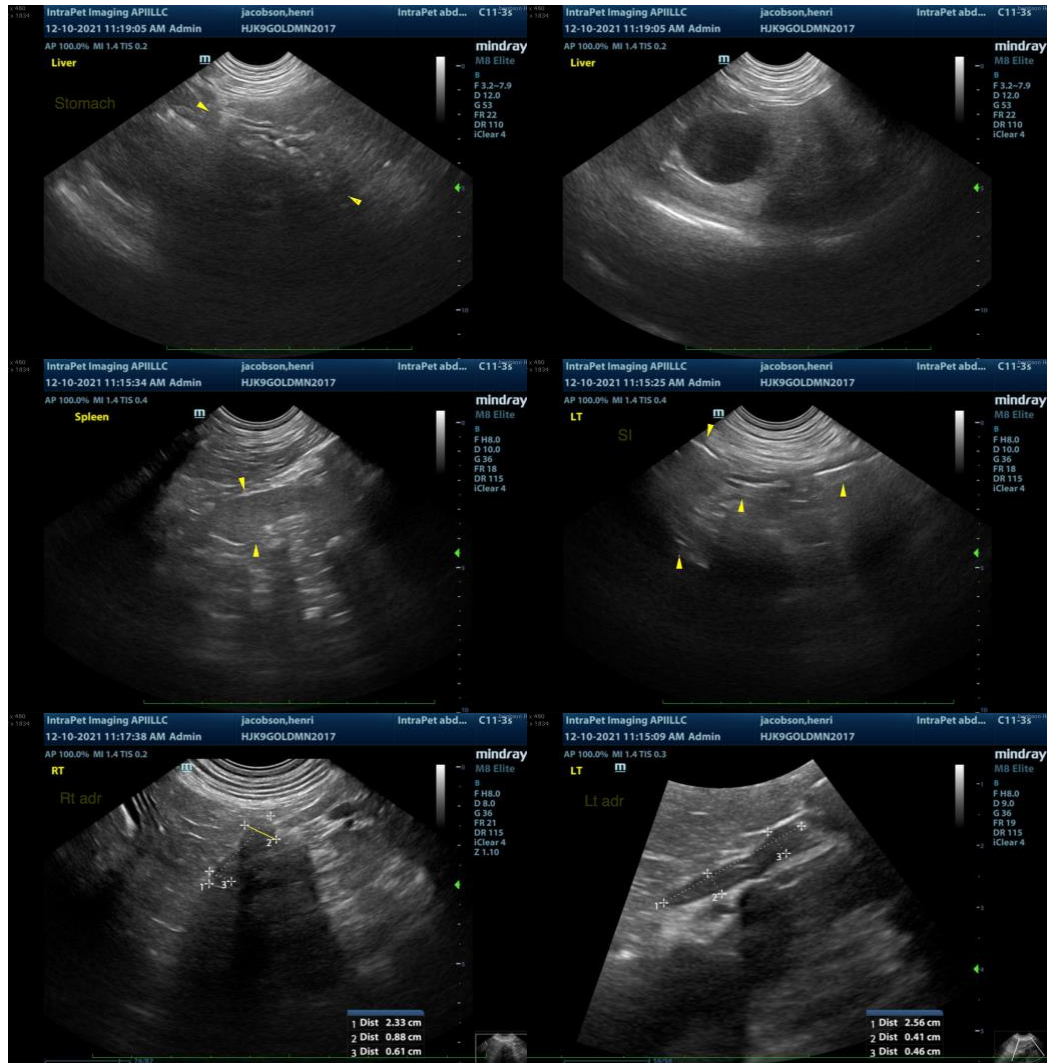
The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

ULTRASONOGRAPHIC FINDINGS

- Unremarkable abdomen. An obvious cause for the patient's clinical signs is not identified in this study. Possible differentials include microscopic gastrointestinal disease (i.e., inflammatory bowel disease, food allergy, intestinal dysbiosis), pancreatic disease, metabolic issue, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Fecal evaluation for ova and Giardia
- Prophylactic deworming with Fenbendazole at 50 mg/kg once a day for 5 days is recommended. Repeat above protocol in 3 weeks.
- 6-week limited antigen diet trial.
- Resting cortisol level to screen for hypoadrenocorticism.
- Depending on the results of the above diagnostics, endoscopic or surgical gastrointestinal biopsies may be necessary to get a definitive diagnosis.
- Three-view thoracic radiographs should be performed prior to any anesthetic event.



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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