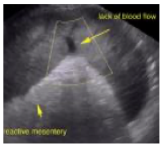
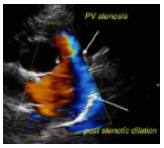
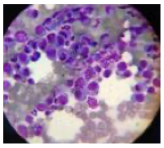
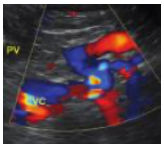
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Charley Marcel

SPECIES
Canine

BREED
Austr Shepherd

SEX
Neutered Male

AGE
3 years

WEIGHT
50 lbs

INTERPRETED BY
Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

IMAGING PERFORMED BY
Sonya Myers DVM

HOSPITAL NAME
Oviedo VC & Emergency

REFERRING VET
Dr. Rivera

INVOICE
12233

DATE
2.16.23

PRESENTING CLINICAL SIGNS

History: Diarrhea. Eosinophilia. Fecal negative.

24 still images and 2 video clips are available for interpretation.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

The prostate is normal in size (1.23 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is normal in size (5.52 cm in length) with a normal shape, architecture and 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 is normal in size (5.58 cm in length) with a normal shape, architecture and 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.

Adrenal Glands

The left adrenal gland is normal in size (0.33 cm at cranial pole) (0.43 cm at caudal pole) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is in normal size (0.45 cm at cranial pole) (0.45 cm at caudal pole) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (1.96 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.

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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. 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. A few prominent mesenteric lymph nodes are visualized (the largest measuring 3.26 cm in length). In addition, a 1.40 cm medial iliac lymph node is seen.

ULTRASONOGRAPHIC FINDINGS

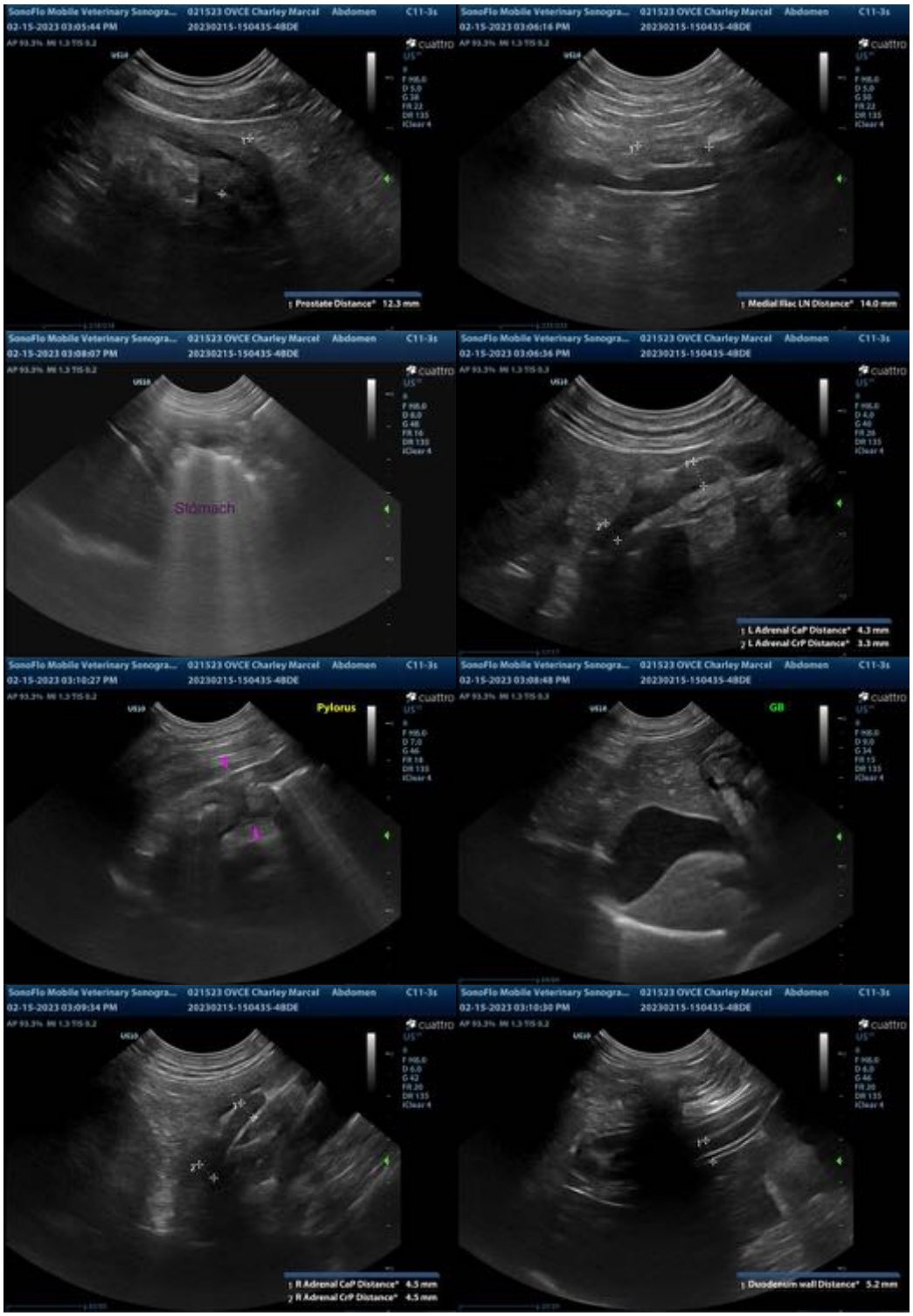
Primary Findings

- The prominent abdominal lymph nodes are most consistent with reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.

  *An obvious cause for the patient's clinical signs is not definitively identified in this study. Considerations include microscopic gastrointestinal disease (i.e., food allergy/intolerance, infectious/parasitic disease, inflammatory bowel disease), underlying metabolic issue (i.e., atypical hypoadrenocorticism), mild pancreatitis, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Despite the negative fecal evaluation, consider prophylactic deworming with Fenbendazole.
- Malabsorption panel, including serum cobalamin and folate, TLI and PLI and a resting cortisol level is recommended (send to Texas A&M).
- Consider initiation of limited antigen or hydrolyzed protein diet.
- Also consider initiation of a probiotic as well as a fiber supplement.
- Ultimately, endoscopic, or surgical GI biopsies may be necessary to get a definitive diagnosis.


SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:05:44 PM 20230215-150435-48DE
Prostate Distance* 12.3 mm
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
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Medial Iliac LN Distance* 14.0 mm
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02-15-2023 03:08:07 PM 20230215-150435-48DE
Stomach
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:06:36 PM 20230215-150435-48DE
L Adrenal CaP Distance* 4.3 mm
L Adrenal CrP Distance* 3.3 mm
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:10:27 PM 20230215-150435-48DE
Pylorus
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:08:48 PM 20230215-150435-48DE
GB
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:09:34 PM 20230215-150435-48DE
R Adrenal CaP Distance* 4.5 mm
R Adrenal CrP Distance* 4.5 mm
SonoFlo Mobile Veterinary Sonogra... 021523 OVCE Charley Marcel Abdomen C11-3s
02-15-2023 03:10:30 PM 20230215-150435-48DE
Duodenum wall Distance* 5.2 mm

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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com