



PATIENT

Lana Sandro

PRESENTING CLINICAL SIGNS

PU/PD, lost 13 lbs over the last year. Neoplasia hunt.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Bloods WNL as of 1/9/23. U/A: WNL as of 1/19/23. USG low: 1.006. Recent fecal negative. UTD on Lepto vax.

BREED

Bull Terrier

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

SEX

Spayed Female

The right kidney is normal in size (4.4 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed. A hyperechoic band parallel to the corticomedullary border is present.

AGE

5 Years

The left kidney is normal in size (5.35 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed. A hyperechoic band parallel to the corticomedullary border is present.

WEIGHT

51 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Adrenal Glands

The right adrenal gland is normal in size (2.11 cm long x 1.27 cm at the cranial pole and 0.83 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

IMAGING PERFORMED BY

Kelly Vazquez

The left adrenal gland is normal in size (2.03 cm long x 0.61 cm at the cranial pole and 0.54 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

HOSPITAL NAME

Ramapo Valley AH

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

REFERRING VET

Dr. Katara

Liver

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion. Portal vein to CVC ratio is visualized and normal.

INVOICE

44440

DATE

1/24/23

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The stomach is moderately distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. However, given the reported history of fasting, delayed gastric emptying could be considered. Soft (cloth) fluid absorbing foreign material is



PATIENT	considered less likely but cannot be definitively ruled out. If clinical signs are consistent (vomiting, etc.), recommendations include supportive medical care, 24 hours fasting and re-image.
Lana Sandro	
SPECIES	The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease.
Canine	
BREED	The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.
Bull Terrier	
SEX	Pancreas The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.
Spayed Female	
AGE	Free Abdomen There is no evidence of free peritoneal effusion noted in these images.
5 Years	
WEIGHT	In the cranial abdomen, just cranial to the spleen, there are heterogeneous, ovoid, hypoechoic structures noted consistent with enlarged splenic lymph nodes.
51 Pounds	
INTERPRETED BY	Additionally, there are ringdowns noted at the level of the diaphragm.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Kelly Vazquez	<ul style="list-style-type: none"> • Bilateral medullary rim sign - This finding is of unknown clinical significance and can be a normal variant, often idiopathic. Medullary rim sign can be present with renal disease including FIP, lymphoma, hypercalcemic nephropathy, Leptospirosis, tubular disease, other and should be interpreted in combination with other more specific indications of kidney disease such as isosthenuria, proteinuria, azotemia, etc. This is a common incidental finding in patients with diabetes mellitus. • Reactive cranial abdominal/splenic lymph nodes - infiltrative neoplastic disease cannot be ruled out but is considered less likely. • Ringdowns noted - suggestive of possible concurrent pulmonary pathology.
HOSPITAL NAME	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Ramapo Valley AH	Given this patient's reported weight loss, polyuria, polydipsia, and the appearance of the kidneys, a recheck blood glucose is recommended, despite normal bloodwork a couple of weeks ago, to rule out diabetes mellitus.
REFERRING VET	Testing for Leptospirosis could be considered, as vaccines can't 100% rule this out.
Dr. Katara	Given the suspected ringdowns, three view thoracic radiographs are recommended for further assessment of cardio-pulmonary status as well as to further evaluate for any evidence of metastatic disease, if not recently evaluated.
INVOICE	A gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory is recommended for further evaluation of GI and pancreatic function.
44440	A fine needle aspirate of the cranial abdominal lymph nodes is recommended if patient's coagulation status is appropriate.
DATE	
1/24/23	



PATIENT

Lana Sandro

In the meantime, while awaiting diagnostic results, double checking that caloric intake is appropriate and hasn't been inadvertently decreased by a diet change or a competitive eating environment of some sort, etc. is recommended, as is empirical deworming with a 5-day course of Panacur.

SPECIES

Canine

If gastrointestinal signs are present such as vomiting or diarrhea or a decrease in appetite, recheck imaging of the stomach, ideally fasted, could also be considered to rule out unlikely but possible pathology missed by the post-prandial state of this study.

BREED

Bull Terrier

SEX

Spayed Female

AGE

5 Years

WEIGHT

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HOSPITAL NAME

Ramapo Valley AH

REFERRING VET

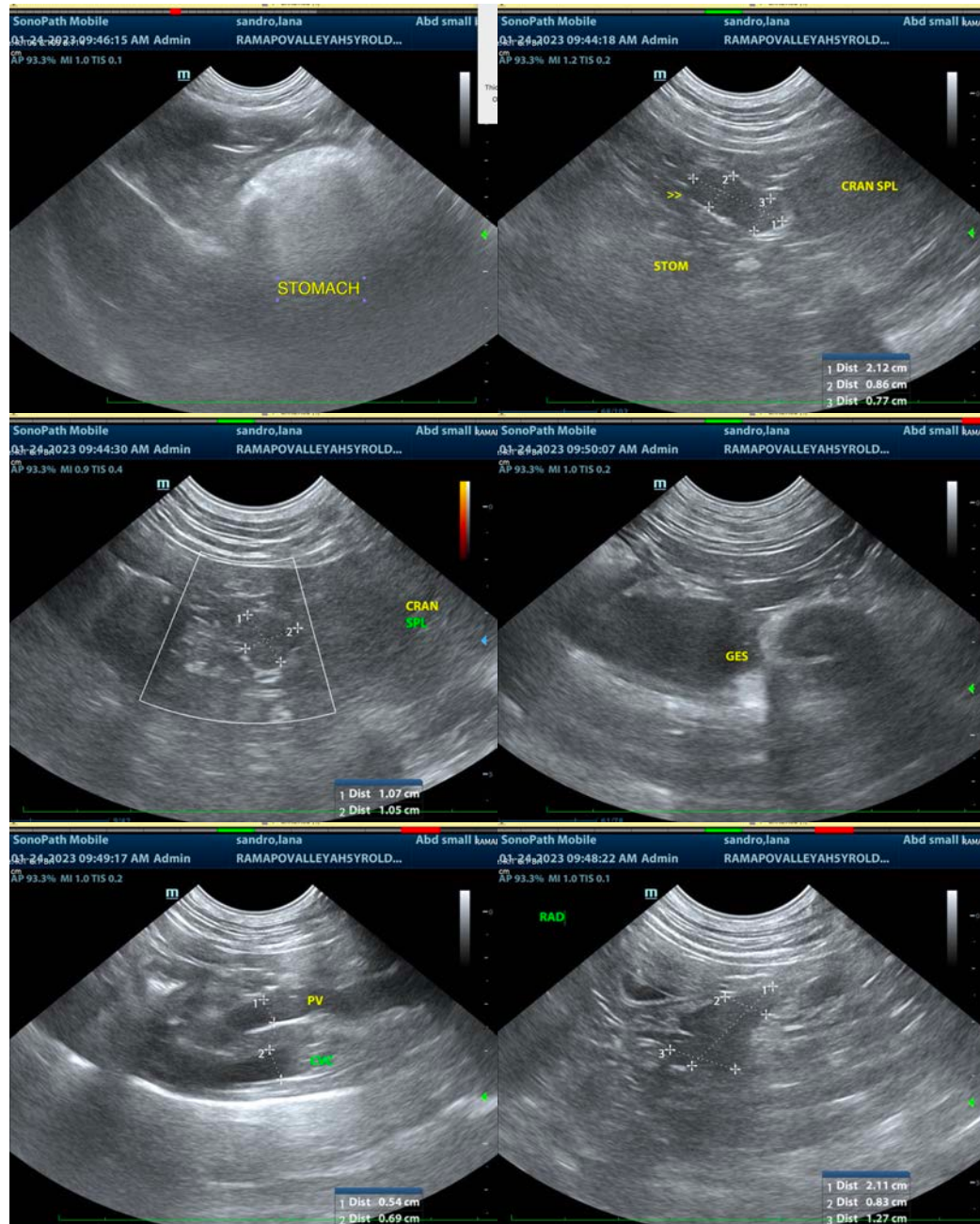
Dr. Katara

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SPECIES

Canine

BREED

Bull Terrier

SEX

Spayed Female

AGE

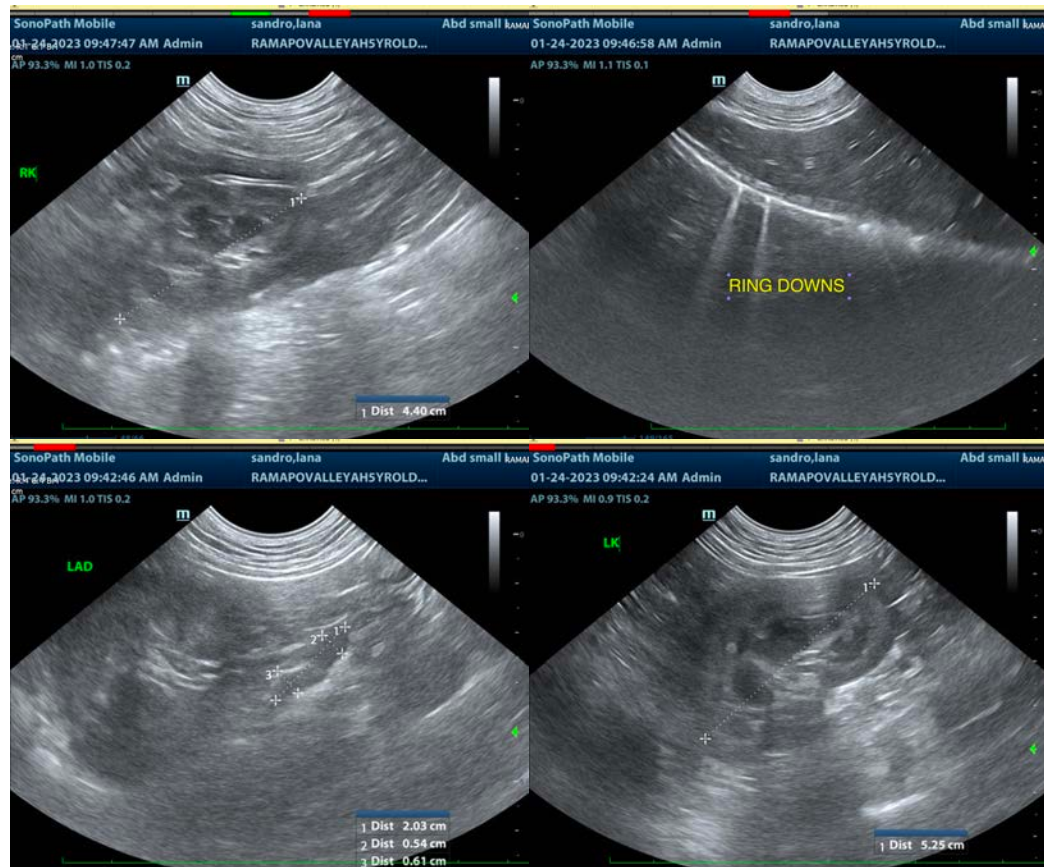
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM, DACVIM
Beth.Johnson@sonopath.com