

PATIENT PRESENTING CLINICAL SIGNS

Ozzy Aare
August 2022: elevated liver enzymes and bile acids (pre and post) with inappetance, correlated with P getting a potentially contaminated treat September 2022: liver enzymes close to normal (very mildly elevated) P is BAR on PE on June 12, 2023. One day a week P is hyporexic, and overall is lethargic. Previous bloodwork in May 2023 WNL. P is quite flatulent at home. Enlarged adrenals on ultrasound in 2022.

SPECIES

Canine

BREED

Retriever Mix

Abnormal PE/Chem/CBC/UA Results: ABNORMAL Laboratory Findings WNL Current Medications none

SEX

Neutered Male

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.

AGE

8 yrs.

Prostate is normal for a neutered dog.

WEIGHT

74lbs

The right kidney is normal in size (6.57 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.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

The left kidney is normal in size (6.98 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.

Adrenal Glands

IMAGING PERFORMED BY

Sara Hansen

The right adrenal gland is normal in size (caudal pole 0.58 cm, the cranial pole is difficult to fully visualize in these images), shape, and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

HOSPITAL NAME

VCA Vitality

The left adrenal gland is normal in size (3.28 cm long, cranial 0.8 cm, caudal 0.77 cm), shape, and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

REFERRING VET

Dr Primavera

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.

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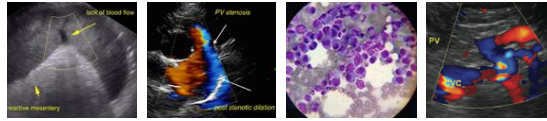
Liver

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.

DATE

6/14/2023

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.



PATIENT *Gastrointestinal*

Ozzy Aare The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction or foreign material. Pyloric outflow tract appears patent.

SPECIES

Canine

The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction or foreign material.

BREED

Retriever Mix

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

SEX

Neutered Male

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.

AGE

8 yrs.

Free Abdomen

WEIGHT

74lbs

There is no evidence of free peritoneal effusion noted in these images.

There is no apparent lymphadenopathy noted in these images.

INTERPRETED BY

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DACVIM

ULTRASONOGRAPHIC FINDINGS

- This is a relatively unremarkable/normal abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Sara Hansen

Given this patient presenting complaint of intermittently decreased appetite and flatulence. Further evaluation of the gastrointestinal tract could be considered beginning with a fecal exam if not recently evaluated. As well as 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, +/- a fecal enteropathogen PCR panel to Texas A&M GI Laboratory could be considered for further evaluation of possible infectious disease.

HOSPITAL NAME

VCA Vitality

In the meantime, empirical deworming with a 5-day course of Panacur is recommended as is a transition in diet based on trial-and-error response. A starting recommended diet being a hydrolyzed protein diet. Some patient's response better to one brand or version of hydrolyzed protein diet better than another, so sometimes several trials are warranted. Alternatively, a bland easy to digest or low-fat diet could be considered but again ultimately best diet is based on trial-and-error response.

REFERRING VET

Dr Primavera

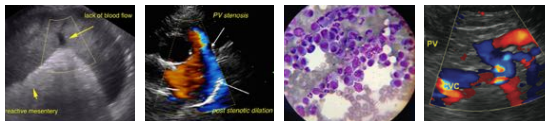
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Additionally, antacid therapy could be considered as could a probiotic such as Visbiome or Proviale.

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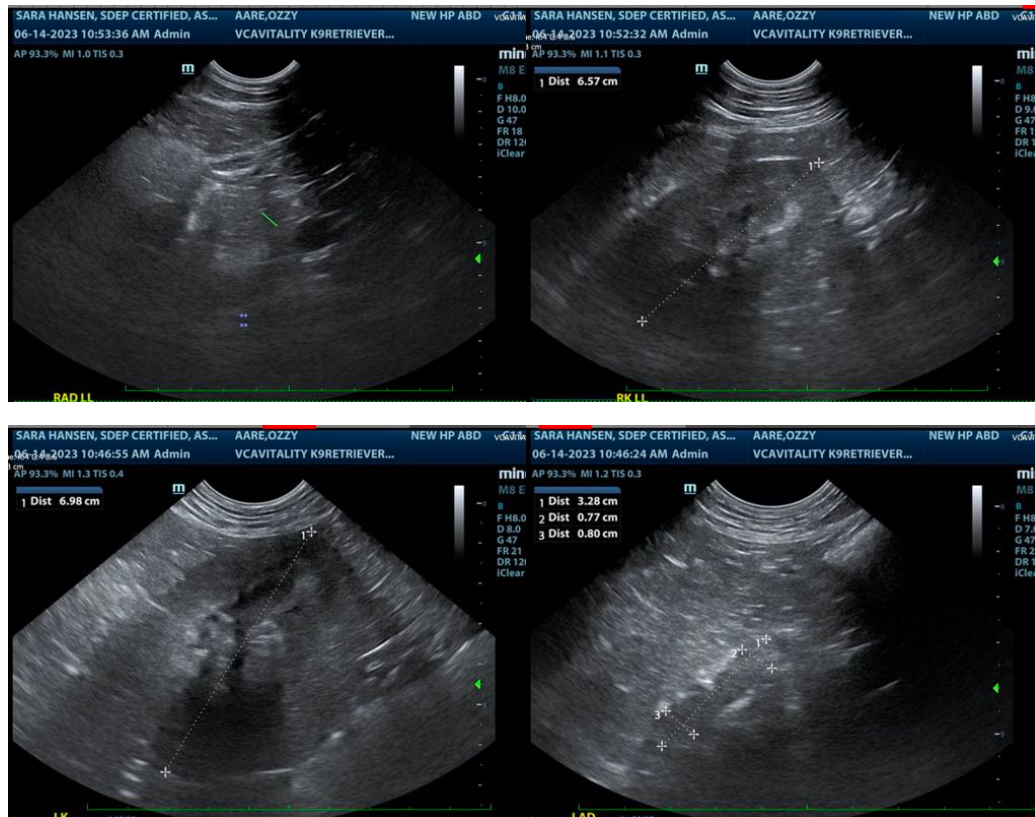
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM, DACVIM
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