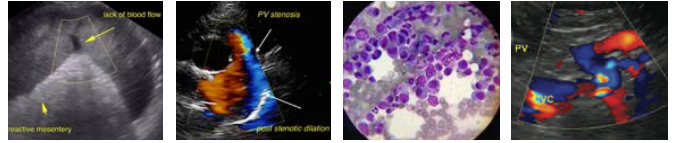


PATIENT	PRESENTING CLINICAL SIGNS
Frankie Taylor	History: History of vomiting and diarrhea since 6/1/22, initially coincident with transition to a new diet, but not resolving. Abnormal PE/Chem/CBC/UA Results: No significant abnormalities, fecal analysis, Giardia negative
SPECIES	
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Terrier Mix	Urinary bladder is adequately distended. It has a normal uniform wall thickness. Contents include primarily anechoic fluid with occasional echogenic non-shadowing debris, most consistent with exfoliated cells, mucous and/or small blood clots. Both sterile inflammation as well as urinary tract infection can also present with echogenic debris. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.
SEX	
Neutered male	The prostate is normal for a neutered dog.
AGE	Left kidney is normal is size (4.7 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.
11 years	Right kidney is normal is size (5.1 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.
WEIGHT	
26.8 lbs	Adrenal Glands
INTERPRETED BY	Left adrenal gland is normal in size (0.61 cm at cranial pole and 0.59 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
Beth Johnson, DVM DACVIM	Right adrenal gland is normal in size (0.74 cm at cranial pole and 0.69 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.
IMAGING PERFORMED BY	Spleen
Dr. Green	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.
HOSPITAL NAME	
Healing Spirit	Liver
REFERRING VET	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.
Dr. Green	INVOICE
INVOICE	31086
DATE	6/20/22
6/20/22	Gallbladder is moderately distended with anechoic bile as well as suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.



PATIENT

Gastrointestinal

Frankie Taylor

The visible stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is mildly distended with very echogenic reverberation artifact from intraluminal gas. There is no evidence of obstruction, foreign material or infiltrative disease; however, complete visualization of far wall is partially inhibited by gas. 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 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.

BREED

Terrier Mix

SEX

Neutered male

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with fluid, liquid, stool and gas. This is consistent with the reported diarrhea.

Pancreas

AGE

11 years

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

WEIGHT

26.8 lbs

Free Abdomen

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

ULTRASONOGRAPHIC FINDINGS

IMAGING PERFORMED BY

Dr. Green

PRIMARY FINDINGS:

- Mildly, diffusely fluid filled bowel including colon consistent with gastroenteritis.

HOSPITAL NAME

Healing Spirit

SECONDARY FINDINGS:

- Chronic Cystitis - Urinary bladder wall changes are most consistent with chronic cystitis. Infiltrative neoplasia cannot be ruled out but is considered less likely give the location and diffuse nature of the changes.
- Gallbladder debris - Cholecystic debris is of unknown clinical significance. It can be seen with biliary stasis from fasting or illness. Cholecystic debris is not necessarily related to hepatobiliary disease. Echogenic bile is most commonly an incidental finding in dogs and should be interpreted in combination with clinical signs such as nausea, inappetence, cranial abdominal discomfort and/or laboratory changes such as increased ALP and/or increased Tbili.

REFERRING VET

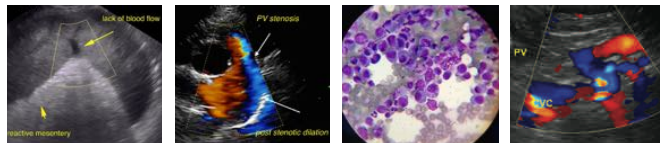
Dr. Green

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DATE

6/20/22



PATIENT

Frankie Taylor

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered male

AGE

11 years

WEIGHT

26.8 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Green

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Green

INVOICE

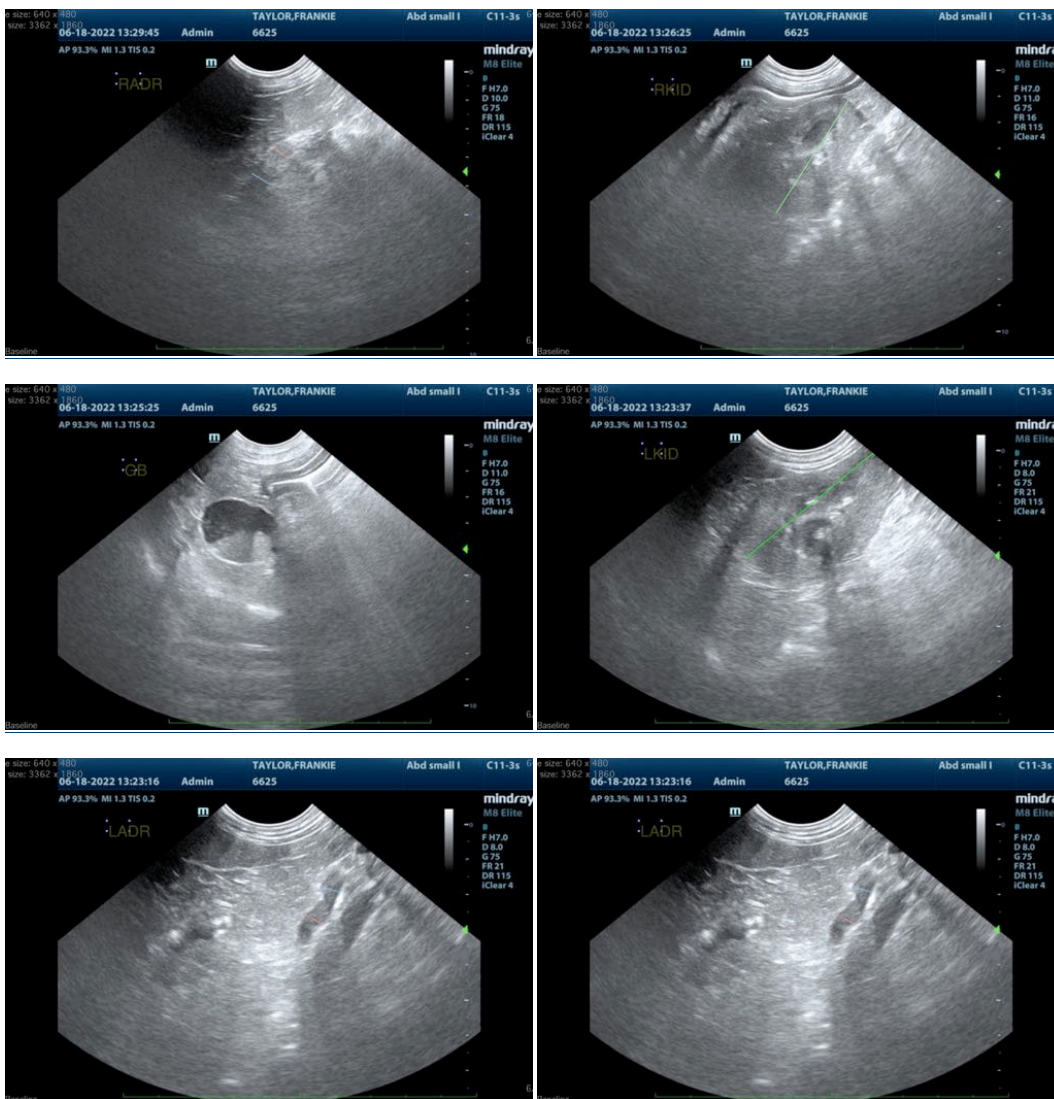
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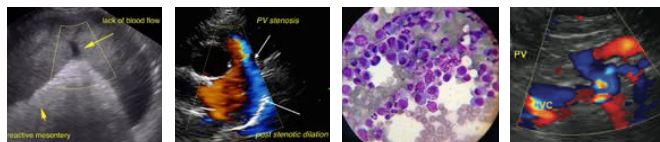
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6/20/22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Urinalysis and, if indicated based on urinalysis results, urine culture are recommended. If protein is present in an otherwise quiet sediment, protein quantification with a urine protein to creatinine ration is recommended.
2. 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.
3. In the meantime, given that these clinical began with a change in diet food sensitivity/allergy is a differential and recommendations include diet trials beginning with a bland, easy to digest diet and if there is no improvement progressing to a novel or hydrolyzed protein diet. A 5-day course of Panacur for empirical deworming and the addition of a probiotic to current therapy is also recommended.





PATIENT

Frankie Taylor

SPECIES

Canine

BREED

Terrier Mix



SEX

Neutered male

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.

AGE

11 years

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.

WEIGHT

26.8 lbs

Beth Johnson, DVM DACVIM

Beth.Johnson@SonoPath.com

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Green

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Green

INVOICE

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DATE

6/20/22