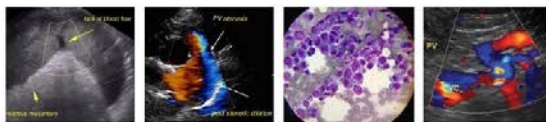


PATIENT	PRESENTING CLINICAL SIGNS
Charlie Szmit	Presenting for vomiting bile in the morning, 2 day history of diarrhea and thinning hair coat lateral to both eyes Slight thinning of hair coat lateral to eyes, slight overweight - otherwise unremarkable PE
SPECIES	Current Medications Metronidazole, Cerenia, Famotidine, Denamarin
Canine	Abnormal PE/Chem/CBC/UA Results: Elevated ALT 297 U/L Elevated GGT 43 U/L
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Border Terrier	Urinary System
SEX	Urinary bladder is only mildly distended (empty). Visible contents are anechoic. Urinary bladder wall is unable to be fully assessed for pathology without further distension. No visible masses or cystoliths are observed. The trigone and visible pelvic urethra are normal thickness with a smooth mucosal surface. If there are urinary signs and/or concern for urinary bladder pathology, reassessment after complete filling is recommended.
Intact Male	
AGE	The area of the prostate is examined without evident prostatic pathology.
1.5 Years	
WEIGHT	The right kidney is normal in size (4.31 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 kg	
INTERPRETED BY	The left kidney is normal in size (5.2 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.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	Adrenal Glands
Kelly Reschny	The right adrenal gland is normal in size (1.4 cm at the cranial pole and 0.64 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
HOSPITAL NAME	The left adrenal gland is normal in size (0.38 cm at the cranial pole and 0.41 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
Graham AH	
REFERRING VET	Spleen
Dr. Seager	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.
INVOICE	Liver
44913	The liver is subjectively mildly decreased 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	
8/24/23	



PATIENT

Charlie Szmit

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.

SPECIES

Canine

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The lumen of the stomach 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. Pyloric outflow tract appears patent.

BREED

Border Terrier

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.

SEX

Intact Male

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

AGE

1.5 Years

Pancreas

WEIGHT

11 kg

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.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Free Abdomen

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

There is no apparent lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- Subjective possible mild microhepatica – Rule outs include normal patient variant versus vascular anomaly versus less likely (given young age of this patient) chronic end stage liver disease.

IMAGING PERFORMED BY

Kelly Reschny

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Graham AH

Further evaluation of liver function could be considered, beginning with bile acids.

REFERRING VET

Dr. Seager

Given the concurrent gastrointestinal signs, pending results:

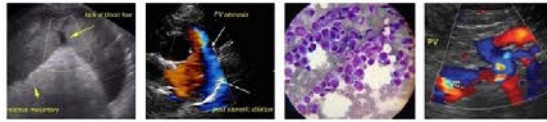
- A gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory is recommended for further evaluation of GI and pancreatic function.
- A fecal enteropathogen PCR panel to Texas A&M GI Laboratory could be considered for further evaluation of possible infectious disease.
- A baseline cortisol is recommended. If baseline cortisol is less than 2, a full ACTH stimulation test is recommended to rule out hypoadrenocorticism.

INVOICE

44913

DATE

8/24/23



PATIENT

Charlie Szmit

In the meantime, empirical deworming with a 5-day course of Panacur is recommended in addition to supportive/symptomatic care of the vomiting and diarrhea, such as antiemetics, probiotics such as Visbiome or Provable, potentially hepatic nutraceuticals given the reported ALT, etc.

SPECIES

Canine

BREED

Border Terrier

SEX

Intact Male

AGE

1.5 Years

WEIGHT

11 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Graham AH

REFERRING VET

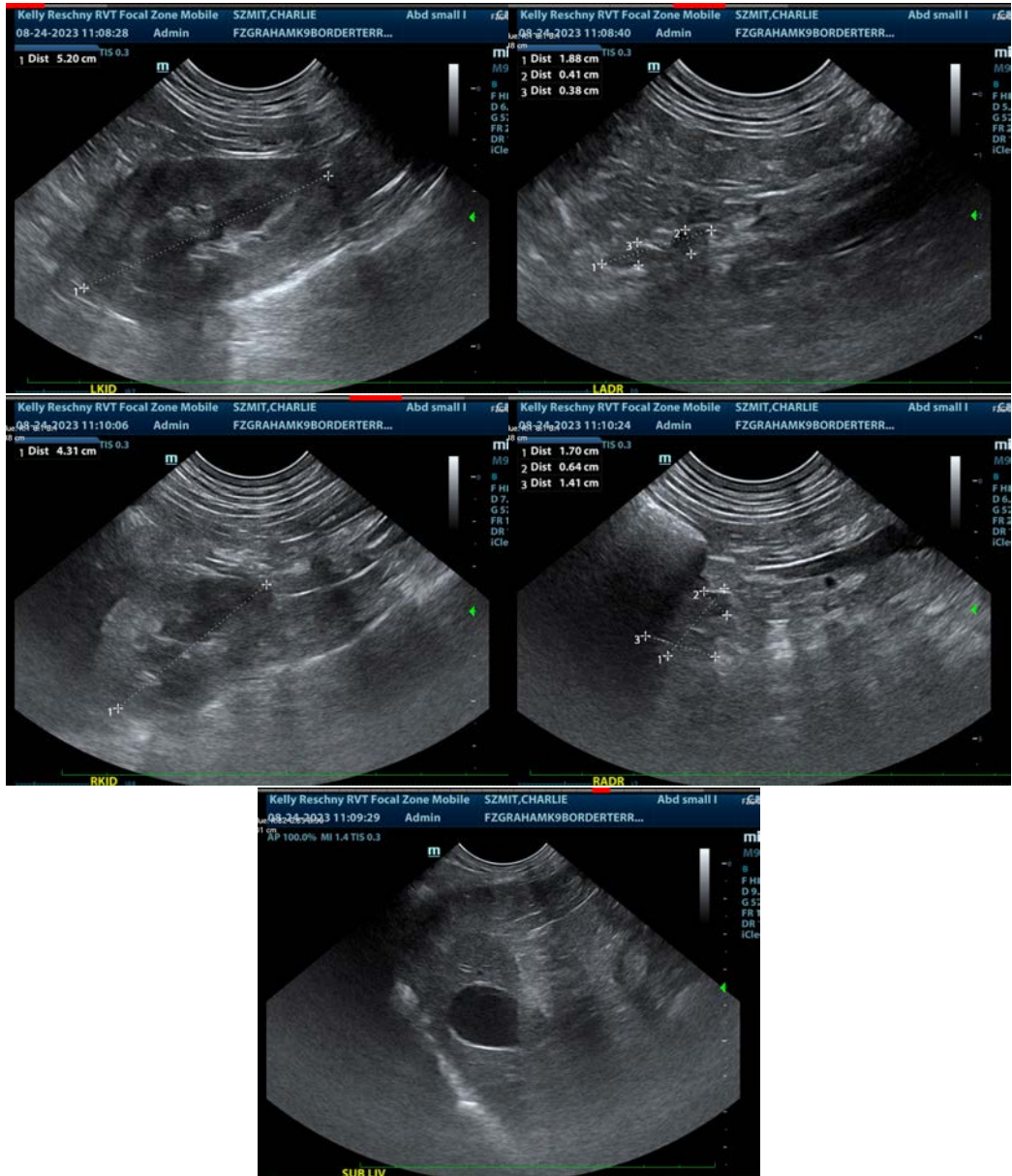
Dr. Seager

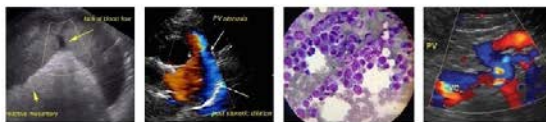
INVOICE

44913

DATE

8/24/23





PATIENT

Charlie Szmit

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.

SPECIES

Canine

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.

BREED

Border Terrier

Beth Johnson, DVM, DACVIM
info@sonopath.com

SEX

Intact Male

AGE

1.5 Years

WEIGHT

11 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Graham AH

REFERRING VET

Dr. Seager

INVOICE

44913

DATE

8/24/23