



PATIENT	PRESENTING CLINICAL SIGNS
Reeses Colletto-Khelil	Patient presents for suspicion of Cushing's. No reported blood work or current meds.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder mucosa, trigone, and visible urethra are normal in thickness and there is no evidence of mucosal irregularities. The bladder lumen is moderately distended with anechoic urine and bladder thickness is considered normal for volume of urine.
Bichon Frise X	
SEX	The prostate measures 0.56 mm, appropriate for the neutered status of the dog. The parenchyma appears homogenous.
Neutered Male	
AGE	The left kidney is normal in size, shape and architecture with smooth peripheral margins and measures 0.45 cm at the caudal pole and 0.30 cm at the cranial pole. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.
5 Years	
WEIGHT	The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 0.78 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.
27.4 Pounds	
INTERPRETED BY	Adrenal Glands
Jessica Midence, DVM, DACVIM (SAIM)	The left adrenal gland is normal in size at 0.30 cm. The left adrenal gland has normal shape and it is normal in appearance and echogenicity.
	The right adrenal gland is normal in size at 0.78 cm. The right adrenal gland has normal shape and it is normal in appearance and echogenicity.
IMAGING PERFORMED BY	Spleen
Kelly Vazquez	The splenic echotexture is homogeneous with parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule is smooth with no irregularities. The splenic vasculature is normal without signs of congestion or thrombosis.
HOSPITAL NAME	Liver
Englewood VC	The liver is subjectively normal in size with normal contours, structure, with smooth peripheral margins. It is mildly heterogeneous and hyperechoic with normal portal markings. No overt evidence of inflammatory, infiltrative or regenerative pathology is evident. The visible portions of the vasculature and biliary tract appear normal. No pathological hepatic lymphadenopathy observed.
REFERRING VET	
Dr. Ezik	
INVOICE	The gallbladder lumen is moderately distended. The wall is a normal thickness and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not visible.
44761	
DATE	Gastrointestinal
2/3/23	The gastric lumen is empty. The stomach wall is of normal wall thickness with some variability due to rugal folds. There is normal gastric wall layering. There are no masses or focal lesions observed and the pyloric outflow tract appears appear.
	The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. . No focal lesions observed.



PATIENT

Reeses Colletto-Khelil

The colon measures normal. There is no observed focal or generalized colon wall thickening or loss of layering.

SPECIES

Canine

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is a solitary pancreatic nodule measuring 0.41 cm x 0.46 cm that was isoechoic to the rest of the pancreas. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

BREED

Bichon Frise X

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The omentum is of normal uniform echogenicity.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

AGE

5 Years

- Mildly heterogeneous, hyperechoic liver
- Pancreatic nodule isoechoic to the rest of the pancreas

WEIGHT

27.4 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver is mildly hyperechoic, and these diffuse changes are non-specific, though are most consistent with vacuolar hepatopathy (e.g., endocrine hepatopathy) such as adrenal hyperplasia, lipid accumulation, etc., inflammatory disease, fibrosis, extramedullary hematopoiesis, copper hepatopathy, infiltrative neoplasia (less likely), or other hepatopathy cannot be excluded, though is not suspected.

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

The pancreatic nodule is very smooth and isoechoic to the remainder of the pancreas and is considered likely a clinically insignificant aging change. There is not a strong suspicion for hyperadrenocorticism or adrenal gland hyperplasia based on this sonographic examination, though if the symptoms and lab work are suggestive, then testing is still warranted.

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Englewood VC

REFERRING VET

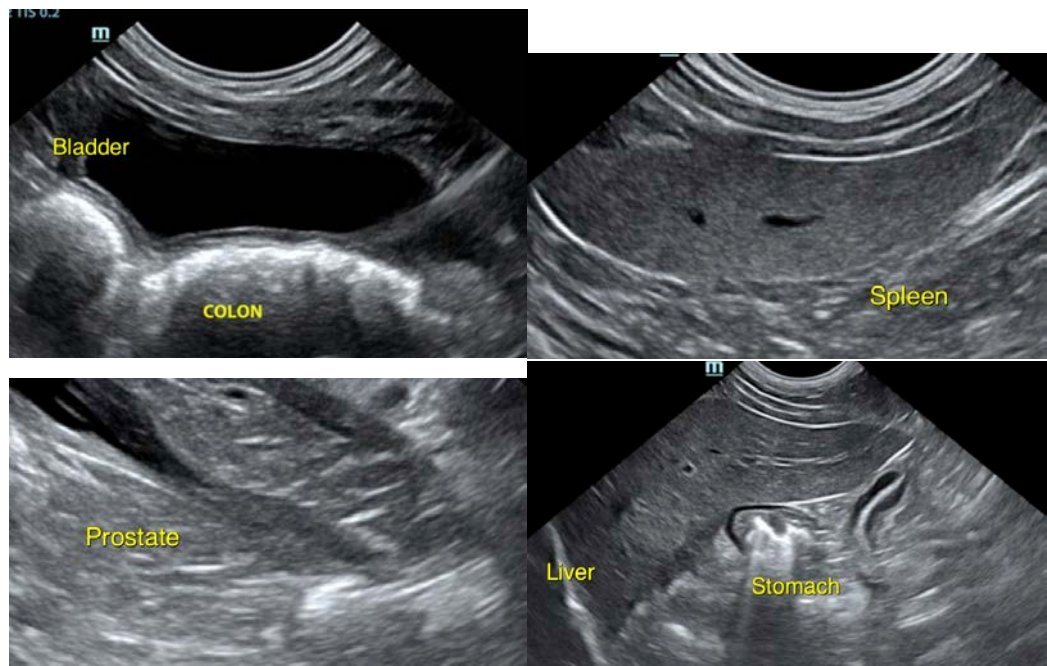
Dr. Ezik

INVOICE

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PATIENT

Reeses Colletto-Khelil

SPECIES

Canine

BREED

Bichon Frise X

SEX

Neutered Male

AGE

5 Years

WEIGHT

27.4 Pounds

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**IMAGING
PERFORMED BY**

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HOSPITAL NAME

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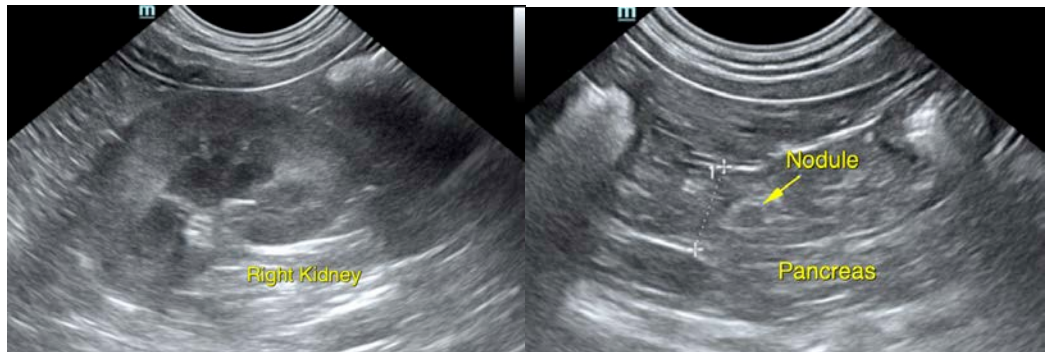
Dr. Ezik

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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.

Jessica Midence, DVM, DACVIM (SAIM)

info@SonoPath.com