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Clinical Sonography & Telecytology
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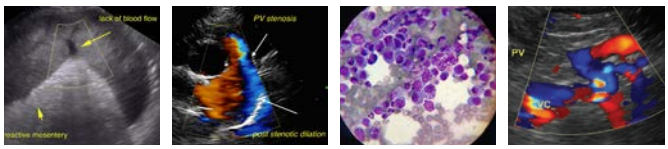

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1-800-838-4268 info@sonopath.com

PATIENT
Clover Hoffman

SPECIES
Canine

BREED
Jack Russell Terrier X

SEX
Spayed Female

AGE
5 Months

WEIGHT
19.8 Pounds

INTERPRETED BY
Jessica Midence, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY
Dr. Leon Anderson

HOSPITAL NAME
Elizabeth AH

REFERRING VET
Dr. Leon Anderson

INVOICE
46352

DATE
3/31/23

PRESENTING CLINICAL SIGNS

Acute onset, 24 hour lethargy, inappetence, and anorexia. RF limb amputation secondary to trauma in Early February. No vomiting or diarrhea. X-rays submitted as well.

Abnormal PE/Chem/CBC/UA Results: PE: 5% dehydration, mild hunched stance, uncomfortable but not isolatable pain, lower canine teeth erupting on schedule. Rectal exam: normal and stool is soft. Quick ultrasound of amputation area reveals no fluid pocket. CBC: WBC 23.86 K/uL, Neut 19.98 K/uL, Eos 0.04 K/uL Blood Smear matches, no abnormal cells Chem: BUN 4 mg/dL, remainder normal Lytes: Normal X-rays pending Review: colon very full.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 mild to moderately echogenic urine that is suspended within the lumen. The bladder thickness is considered normal for volume of urine. No masses, inflammatory changes or calculi are observed.

The left kidney is normal in size, shape and architecture with smooth peripheral margins and measures 5.64 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 5.7 cm. There is normal corticomedullary. distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is normal in size (0.39 cm at the caudal pole, 0.22 cm at the caudal pole). The left adrenal gland has normal shape and it is normal in appearance and echogenicity.

The right adrenal gland is normal in size (0.32 cm at the caudal pole, 0.37 cm at the cranial pole). The right adrenal gland has normal shape and it is normal in appearance and echogenicity.

Spleen

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.

Liver

The liver is subjectively normal in size with normal contours, structure, with smooth peripheral margins. The echogenicity appears normal 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.

The gallbladder lumen is mildly distended. The wall is a normal thickness and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not visible.

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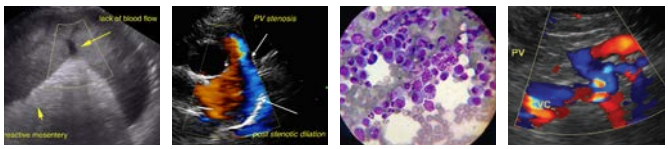

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Gastrointestinal

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 patent.

The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The duodenum measures normal with distinct wall layering. The remainder of the small intestines also measures normal with normal wall layering. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. No focal lesions observed.

Sections of colon are visualized with formed fecal material and gas shadowing distally. The colon measures normal. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

Free Abdomen

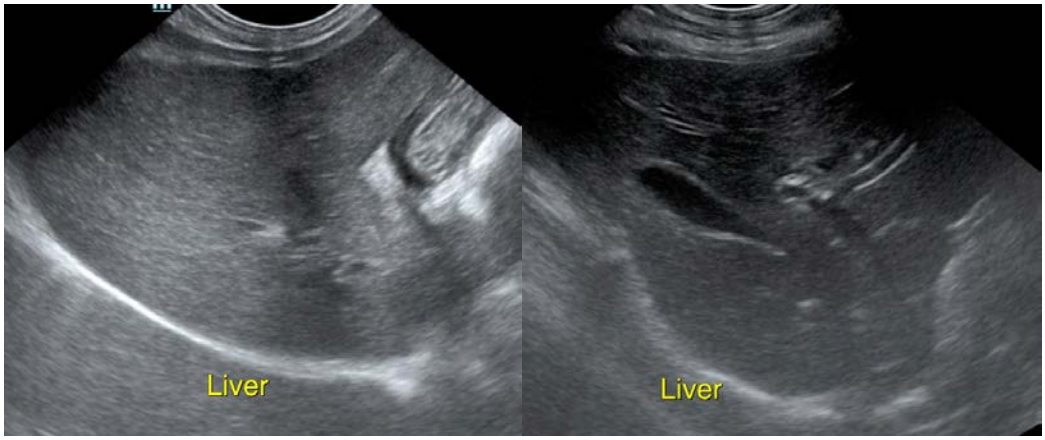
Evaluation of the peritoneal cavity did not reveal any evidence of effusion. The mesenteric lymph nodes are mildly enlarged and mildly hypoechoic, measuring 0.56 cm wide x 2.31 cm long. The omentum is of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Echogenic urine
- Reactive lymph nodes, appropriate for age of the patient

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the reported clinical signs is not obvious on this sonographic exam, which is largely normal. The mesenteric lymph nodes are mildly enlarged, but that is considered normal for the juvenile status of the patient. The urine does have echogenic debris. Consider a urinalysis if not already done to evaluate for abnormalities. Consider infectious disease testing such as tick disease or supportive care for gastroenteritis. Monitor for emergence of other symptoms to guide further workup and therapy.



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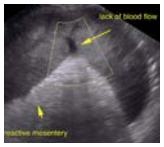
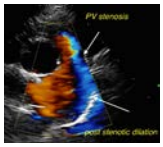
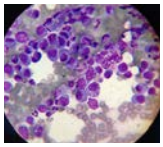
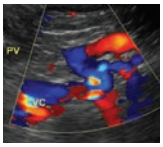

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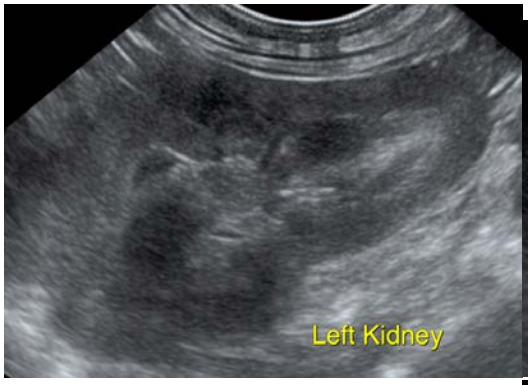

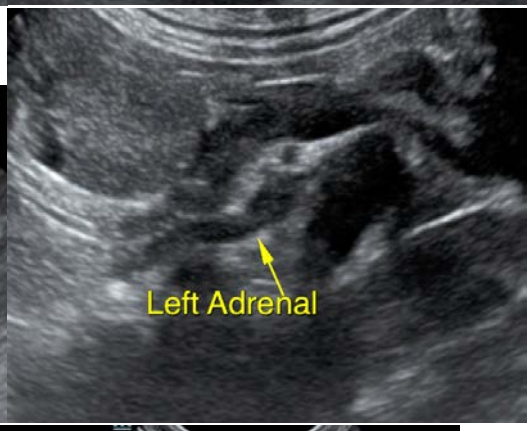

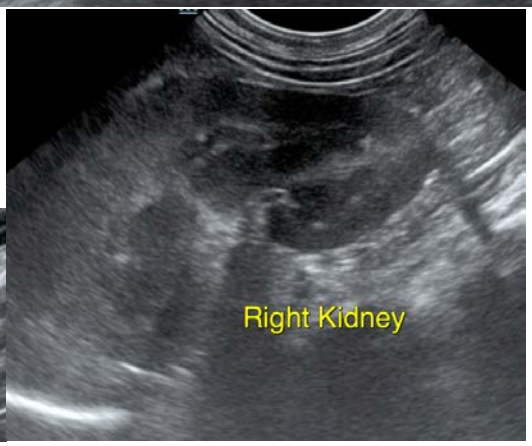

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Jessica Midence, DVM, DACVIM (SAIM)

info@SonoPath.com