

PATIENT PRESENTING CLINICAL SIGNS

Chase Knipe PU/PD.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

SEX The prostate is normal in size (0.84 cm) and shape for this neutered male dog. The parenchyma is homogenous and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

Neutered Male The left kidney is hyperechoic with mildly reduced corticomedullary distinction and measured 6.34 cm. Small cortical cysts were noted. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE 2007 The right kidney is hyperechoic with mildly reduced corticomedullary distinction and measured 6.44 cm. There is a large cortical cyst measuring 1.4 cm and many smaller cortical cysts. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT 35.3 lbs

Adrenal Glands

INTERPRETED BY

Kathleen Sennello
DVM, MS, Diplomate
ACVIM (Small Animal
Internal Medicine)

The left adrenal gland is normal in size measuring 0.74 cm at the caudal pole It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.73 cm at the caudal pole It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

Spleen

HOSPITAL NAME

Mill Pond

The spleen is subjectively small in size. The splenic capsule is somewhat irregular and most consistent with small, hypoechoic, ill-defined splenic nodule.

REFERRING VET

Dr. Schnolis

Liver

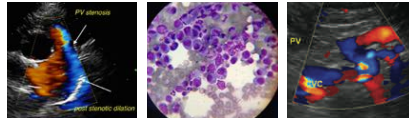
The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is diffusely heterogenous in echotexture with subtle, indistinct focal mottling. There are numerous, ill-defined hypoechoic nodules noted throughout the parenchyma varying in size from 0.5-1.0 cm. The gallbladder lumen is moderately distended. The wall of the gallbladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

INVOICE

96128

DATE

2/17/22



PATIENT *Gastrointestinal*

Chase Knife The stomach contains minimal luminal contents. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

SPECIES

Canine The visualized areas of duodenum, jejunum and ileum have a uniform diameter with minimal fluid distension. Wall appears subjectively, mildly increased. Bowel loops follow a typical curvilinear path with distinct wall layering. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed

BREED

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

SEX

Neutered Male

Pancreas

AGE

2007

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.

WEIGHT

35.3 lbs

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

INTERPRETED BY

Kathleen Sennello
DVM, MS, Diplomate
ACVIM (Small Animal
Internal Medicine)

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS:

- Hyperechoic kidneys with small cortical cysts. The findings are most consistent with degenerative renal changes and interstitial nephrosis.
- Mottled, borderline nodular spleen. The diffuse splenic changes are non-specific and could be consistent with lymphoid hyperplasia, extramedullary hematopoiesis, infiltrative neoplasia, inflammation, other. Cytology or histopathology would be necessary to get a definitive diagnosis.
- Large, heterogenous liver. The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, nodular hyperplasia, inflammatory/immune-mediated disease, fibrosis, extramedullary hematopoiesis, toxic hepatopathy (e.g., copper), infiltrative neoplasia (less likely) or other hepatopathy.
- Subjectively thickened small intestine. The mild small intestinal wall changes may be a normal variant in this patient or could be consistent with an inflammatory process (e.g., inflammatory bowel disease).

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Mill Pond

REFERRING VET

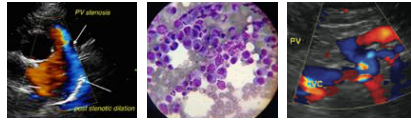
Dr. Schnolis

INVOICE

96128

DATE

2/17/22



PATIENT **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Chase Knife The two most likely causes for possible PU/PD in this patient would be either renal disease or liver/endocrine disease.

SPECIES The kidneys are hyperechoic and somewhat cystic.

- Canine**
- Consider urinalysis and culture
 - Recommend blood pressure evaluation
- BREED**
- Recommend urine protein to creatinine ratio

The liver is large and heterogenous. Correlate this with blood work findings. If there is an ALP elevation or liver enzyme elevation consider the following.

SEX

Neutered Male

- Consider close evaluation of history for possible toxic changes examine medications, diet, dietary indiscretion etc...

AGE

2007

- Consider PCR on urine/serum for leptospirosis (if not on antibiotics)/serology if recent antibiotic history

WEIGHT

35.3 lbs

- If not already done, consider pre and post prandial bile acids to evaluate liver function
- If the ALP is significantly elevated relative to the ALT and symptoms consistent with Cushing's are present, consider adrenal function testing (ACTH stim)
- Consider Fine needle aspirate if round cell neoplasia is on your differential list (25 g needle, normal coags)

INTERPRETED BY

Kathleen Sennello
 DVM, MS, Diplomate
 ACVIM (Small Animal
 Internal Medicine)

Based on the appearance of the spleen consider a FNA. Additionally I recommend three view thoracic radiographs.

While both adrenal glands are within normal limits they are on the upper end of normal size this could be consistent with Cushing's disease if the clinical picture is consistent with the disease process and adrenal function testing could be considered.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

HOSPITAL NAME

Mill Pond

REFERRING VET

Dr. Schnolis

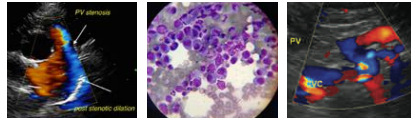


INVOICE

96128

DATE

2/17/22



PATIENT

Chase Knife

SPECIES

Canine

BREED

SEX

Neutered Male

AGE

2007

WEIGHT

35.3 lbs

INTERPRETED BY

Kathleen Sennello
DVM, MS, Diplomate
ACVIM (Small Animal
Internal Medicine)

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Mill Pond

REFERRING VET

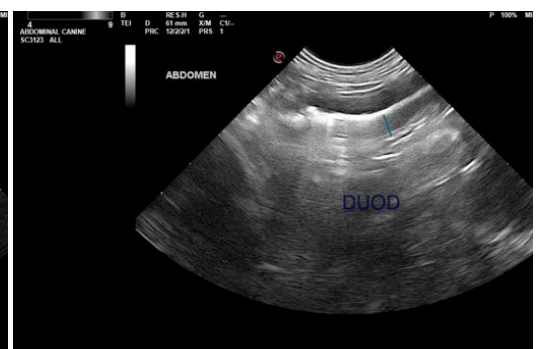
Dr. Schnolis

INVOICE

96128

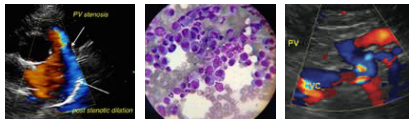
DATE

2/17/22



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.



PATIENT

Chase Knipe

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

SPECIES

Canine

kathleen.sennello@sonopath.com

BREED

SEX

Neutered Male

AGE

2007

WEIGHT

35.3 lbs

INTERPRETED BY

Kathleen Sennello
DVM, MS, Diplomate
ACVIM (Small Animal
Internal Medicine)

**IMAGING
PERFORMED BY**

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Mill Pond

REFERRING VET

Dr. Schnolis

INVOICE

96128

DATE

2/17/22