

PATIENT

Chance Burnell

PRESENTING CLINICAL SIGNS

SPECIES

Canine

BREED

Jack Russel X

Chief Concern/Provisional Diagnosis: semi regulated diabetes, concerned about spleen vs pancreas. Diagnosis: diabetes History/Physical Findings: P was dx with diabetes in April 2022 after going to the emergency room. Since then, his glucose has been semi-regulated. He seems to be responding to insulin but not as well as we would like. At the exam on May 18, abdomen feels distended. O states that P is still acting sick. Summary of Laboratory Abnormalities: BW was ran on 5/18/2022. ALK phos was elevated at 496, glucose was elevated at 503, platelets were elevated at 467, neutrophils were decreased at 58, lymphocytes were mildly elevated at 31, all other values WNL. Radiographic Abnormalities: N/A Current Therapy and Medications: Novalin N 5 IU BID, glycobalance diet

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

AGE

5 Years

The visualized areas of prostate and surrounding tissue appear normal. Unfortunately, the prostate is not fully visualized likely due to its intrapelvic location. Correlate with rectal exam findings.

WEIGHT

12.9 Pounds

The left kidney has a normal shape and size (4.62 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. Corticomedullary rim sign is evident. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

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

The right kidney has a normal shape and size (5.2 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. Corticomedullary rim sign is present. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

IMAGING BY

Loetitia Saint-Jacques,
LVT

Adrenal Glands

The left adrenal gland is normal in size measuring 0.57 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.

HOSPITAL NAME

Valley Vet Clinic

The right adrenal gland is normal in size measuring 0.46 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.

REFERRING VET

Dr. Megan Plateman

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

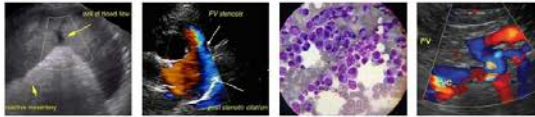
The liver is large in size, and normal in echogenicity with smooth peripheral margins. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible

INVOICE

38345

DATE

6/2/22



PATIENT

Chance Burnell

portions of the vasculature and biliary tract appear normal. The right side of the liver appears diffusely nodular with hypoechoic, somewhat ill-defined intraparenchymal nodules measuring from 0.25-1.0 cm. A few of these have a somewhat target like appearance.

SPECIES

Canine

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. There is a moderate amount of non-organized echogenic debris. The cystic and common bile ducts are normal/not visible.

BREED

Jack Russel X

Gastrointestinal

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.

SEX

Neutered Male

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (between 0.3-0.5cm in wall thickness) and the jejunum measured as normal (between 0.2-0.47cm.) Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

AGE

5 Years

WEIGHT

12.9 Pounds

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.

Pancreas

The pancreas is prominent and hypoechoic as compared to the surrounding isoechoic mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

INTERPRETED BY

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

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.

IMAGING BY

Loetitia Saint-Jacques,
LVT

ULTRASONOGRAPHIC FINDINGS

HOSPITAL NAME

Valley Vet Clinic

- Corticomedullary rim sign visualized in both kidneys – Clinical significance uncertain, can be seen in normal patients and in cases of ethylene glycol toxicity, FIP, chronic interstitial nephritis, and leptospirosis.
- Hypoechoic, prominent pancreas – There is no evidence of significant generalized pancreatic inflammation, but some focal areas of the right pancreas do appear hypoechoic with surrounding hyperechoic mesentery. Changes are most consistent with mild focal pancreatitis.
- Large, heterogeneous liver with a focal right-sided area of diffuse hypoechoic nodules – The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, nodular hyperplasia, inflammatory/immune-mediated disease, fibrosis, extramedullary

REFERRING VET

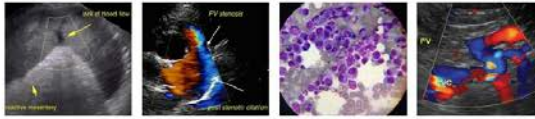
Dr. Megan Plateman

INVOICE

38345

DATE

6/2/22



PATIENT

Chance Burnell

SPECIES

Canine

BREED

Jack Russel X

hematopoiesis, toxic hepatopathy (e.g., copper), infiltrative neoplasia (less likely) or other hepatopathy. The nodular appearance in the right side of the liver has a somewhat benign appearance, but it is more concerning because it is more prominent focally, and because some of the nodules have a somewhat target type appearance. Recommend fine needle aspirate.

- Moderate gallbladder debris – The significance of the aggregated gallbladder sludge is unclear. This could represent an early mucocele, cholestasis, or may be secondary to fasting.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Neutered Male

Many of the changes observed are commonly seen in dogs with diabetes. The liver is large and heterogeneous. This is most consistent with a vacuolar hepatopathy. In this case, there are also some hypoechoic nodules that are somewhat concerning. A fine needle aspirate from the right side of the liver is recommended, particularly if one of the target like nodules can be sampled. There are some focal areas of pancreas, particularly on the right side near the duodenum, which appear to have surrounding hyperechoic mesentery. I suspect these represent focal patchy pancreatitis. Correlate these findings with a quantitative PLI and consider symptomatic treatment for pancreatitis.

WEIGHT

12.9 Pounds

The gallbladder debris observed is relatively mild. Continued monitoring is warranted.

INTERPRETED BY

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

There are no dramatic lesions observed on today's exam to definitively diagnosis a cause for the difficulty regulating this individual. The liver lesions and the changes in the pancreas are somewhat concerning, but they could represent completely incidental findings (remodeling, benign nodules, etc.). Recommend a fine needle aspirate of the liver and PLI testing in addition to a urinalysis and culture if this has not been done recently. Depending on the specifics of the case, sometimes the use of a freestyle libre device can be helpful in trying to figure out what is going on in these difficult to regulate diabetics, but patient and owner selection is crucial, as there is no perfect diagnostic and treatment strategy for these cases.

IMAGING BY

Loetitia Saint-Jacques,
LVT



HOSPITAL NAME

Valley Vet Clinic

REFERRING VET

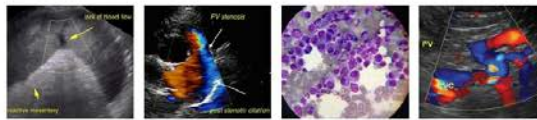
Dr. Megan Plateman

INVOICE

38345

DATE

6/2/22



PATIENT

Chance Burnell

SPECIES

Canine

BREED

Jack Russel X

SEX

Neutered Male

AGE

5 Years

WEIGHT

12.9 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Valley Vet Clinic

REFERRING VET

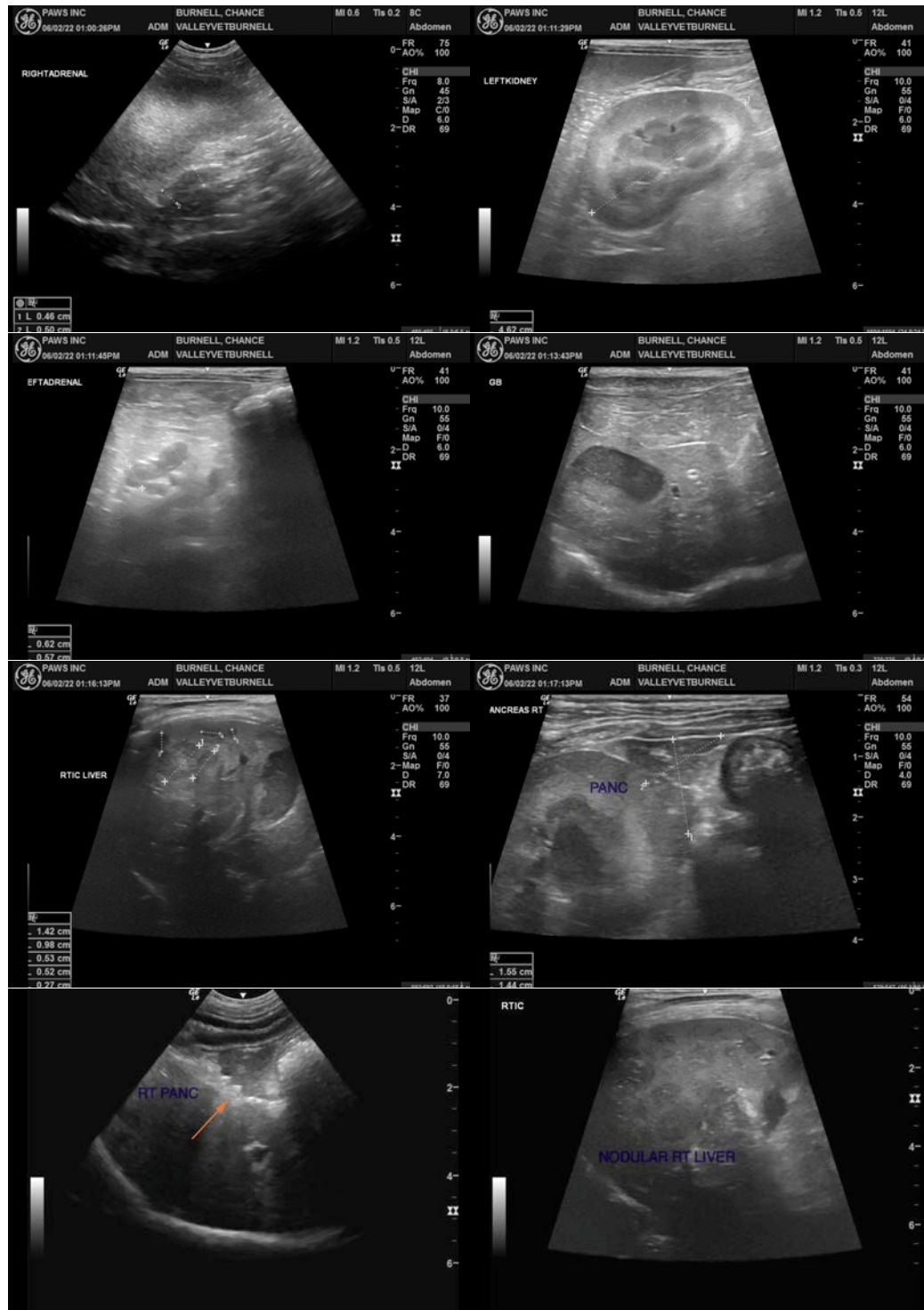
Dr. Megan Plateman

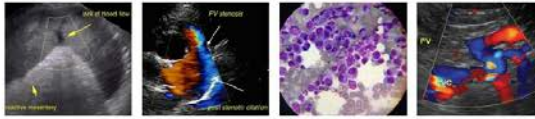
INVOICE

38345

DATE

6/2/22





PATIENT

Chance Burnell

SPECIES

Canine

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.

BREED

Jack Russel X

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)
kathleen.sennello@sonopath.com

SEX

Neutered Male

AGE

5 Years

WEIGHT

12.9 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Valley Vet Clinic

REFERRING VET

Dr. Megan Plateman

INVOICE

38345

DATE

6/2/22