

PATIENT

Tank Boone

PRESENTING CLINICAL SIGNS

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

Geriatric

WEIGHT

97 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Grass Valley VH

REFERRING VET

Dr. Kristi Cortright

INVOICE

38343

DATE

6/2/22

P began experiencing V/D ~1mo ago. Also presumptive spinal OA. Rads/labs taken at emergency mid-may. Hips/knees ok, but spinal OA noted. P was on carprofen previously, but it was d/c'd w/ the V/D. O feels GI signs improved when nsaid was d/c'd, but spinal pain worsened. P presented to me a week or so later w/ persistent diarrhea. We repeated labwork (ALP 186, USG 1.008 - only abnormal findings) and fecal (negative float). Despite metro, bland diet (rice and chicken), and now tylan, P's diarrhea is liquid and persistent. DWO options of fecal PCR vs abd U/S (allows us to visualize adrenals too which is good w/ USG finding). O elects to begin w/ U/S. -SM P was panting/wiggling. Ultrasonographer concerned w/ ability to image GI well. Requests sedation. Approved by O. 0.1ml dexdom + 0.1ml butorphanol IV. Very mild sedation - allowed still imaging. Reversed w/ 0.1ml antisedan IM - good recovery.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall appears generally of normal thickness, but there is mild diffuse mucosal irregularity visualized. The area of the trigone, ureteral papillae and proximal urethra to a depth of 2.0 cm appear free of any mass lesions or calculi. Findings are most consistent with diffuse cystitis or lack of urine distention.

The prostate is normal in size (1.17 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.

The left kidney has a normal shape and size (7.16 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (7.61 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

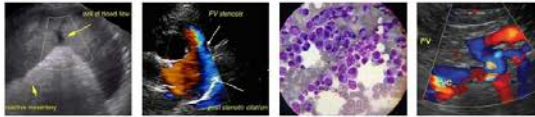
Adrenal Glands

The left adrenal gland is normal in size measuring 0.66 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.

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.



PATIENT

Tank Boone

Liver

The liver is normal/small in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

SPECIES

Canine

The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

BREED

Labrador Retriever

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. Duodenum wall measured 0.50 cm. Jejunum wall measured 0.35 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

AGE

Geriatric

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.

WEIGHT

97 Pounds

Pancreas

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.

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. An occasional visible mesenteric lymph node is imaged. Once such lymph node measures 0.84 cm in diameter. The omentum is generally of normal echogenicity.

IMAGING BY

Loetitia Saint-Jacques,
LVT

Other

A brief view of the heart was submitted. No significant pericardial effusion was seen.

ULTRASONOGRAPHIC FINDINGS

HOSPITAL NAME

Grass Valley VH

- Mildly irregular urinary bladder mucosa – most consistent with diffuse cystitis or lack of urine distention. Recommend urinalysis and culture.

REFERRING VET

Dr. Kristi Cortright

- Borderline small liver – This is subjective. Correlate with abdominal radiographs and gastric axis. If the liver appears small, you could consider a liver function test.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

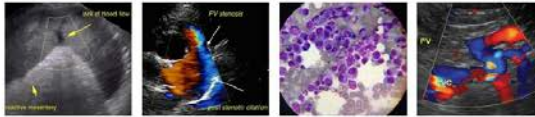
INVOICE

38343

No focal lesions were visualized today in regards to the GI tract to explain the chronic diarrhea reported. Unfortunately, there are many causes for chronic diarrhea that cannot be diagnosed by ultrasound alone. Consider such differentials as food allergy/dietary sensitivity, GI parasitism,

DATE

6/2/22



PATIENT

Tank Boone

dysbiosis, pancreatitis (none seen), IBD, and less likely intestinal neoplasia.

SPECIES

Canine

- Recommend a novel protein/hydrolyzed protein prescription diet.
- Recommend chronic probiotic therapy (particularly if there is a history of systemic antibiotic use).

BREED

Labrador Retriever

- Recommend GI panel to Texas A&M for a qualitative PLI, TLI, cobalamin and folate to further evaluate the pancreas and small intestine.
- Consider empirical parasite testing and treatment (if not already done).

SEX

Neutered Male

Consider three view thoracic radiographs to rule out concurrent thoracic disease/involvement.

AGE

Geriatric

WEIGHT

97 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Grass Valley VH

REFERRING VET

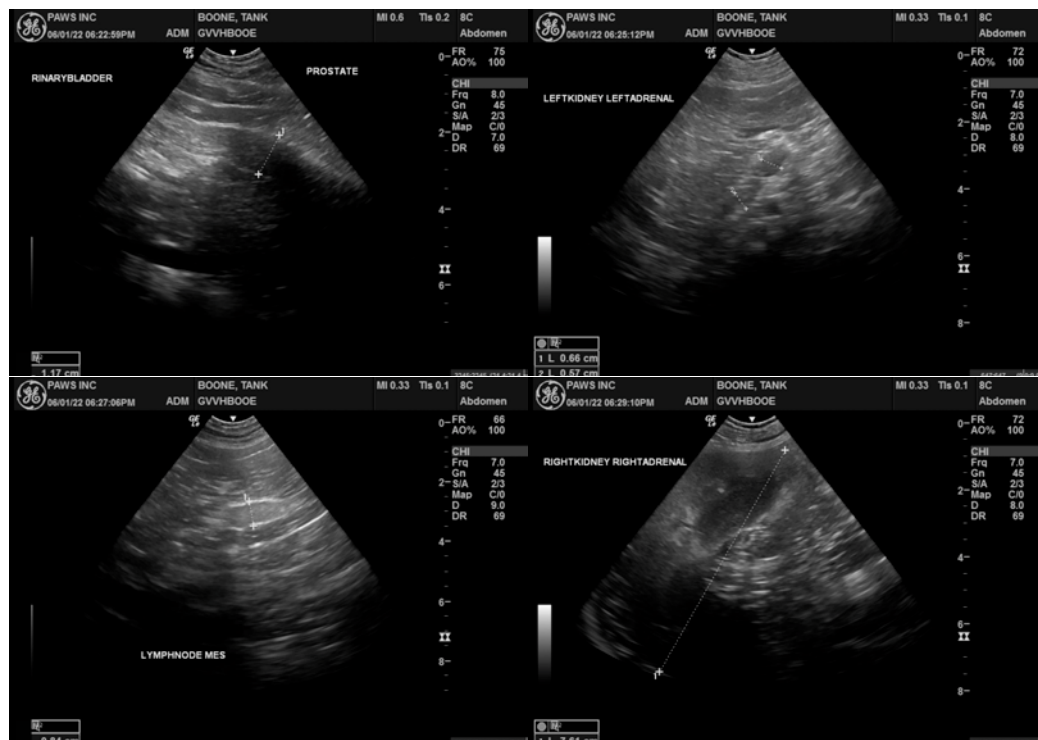
Dr. Kristi Cortright

INVOICE

38343

DATE

6/2/22





PATIENT

Tank Boone

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

Geriatric

WEIGHT

97 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Grass Valley VH

REFERRING VET

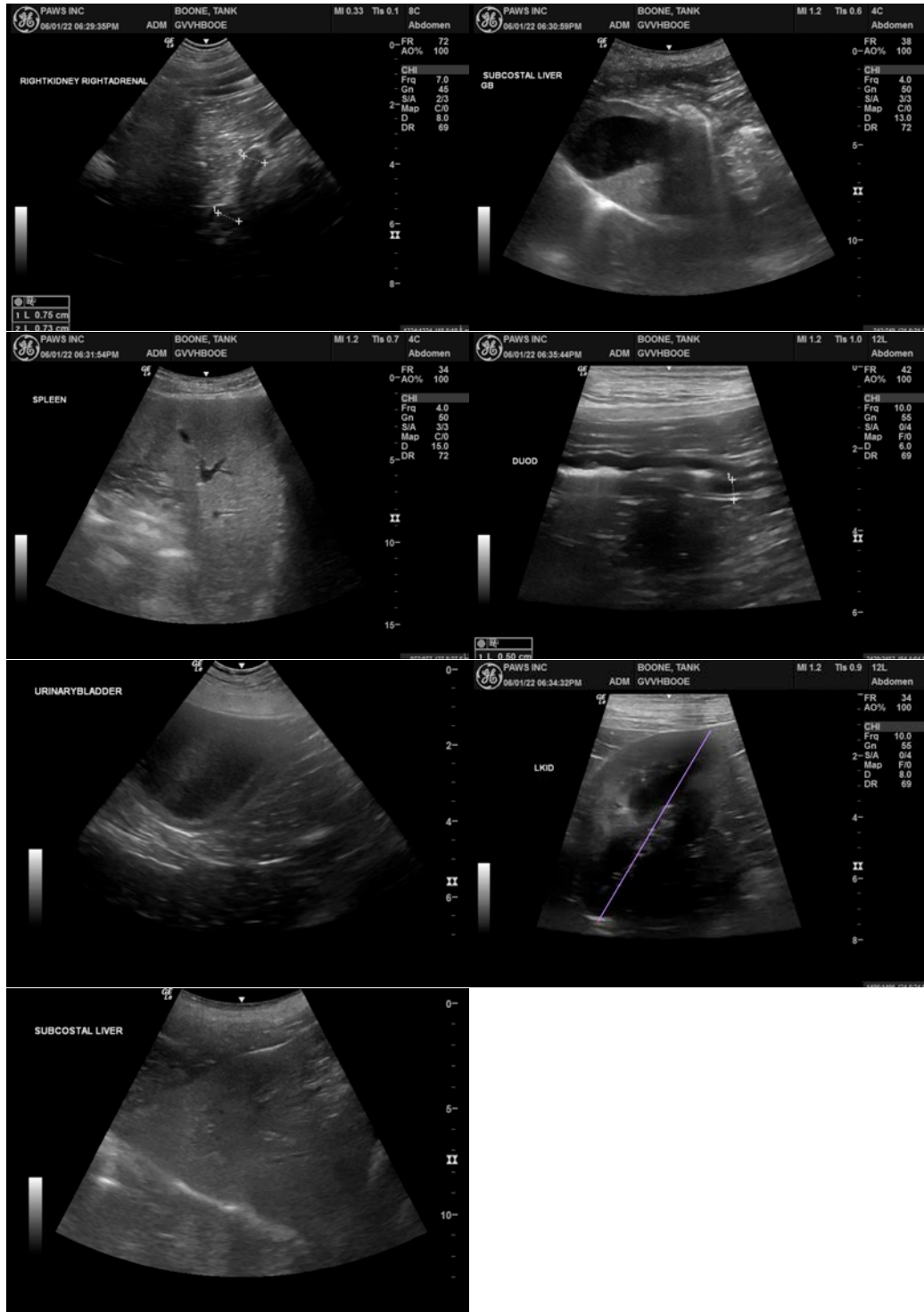
Dr. Kristi Cortright

INVOICE

38343

DATE

6/2/22





PATIENT

Tank Boone

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

Labrador Retriever

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

SEX

Neutered Male

AGE

Geriatric

WEIGHT

97 Pounds

INTERPRETED BY

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

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Grass Valley VH

REFERRING VET

Dr. Kristi Cortright

INVOICE

38343

DATE

6/2/22