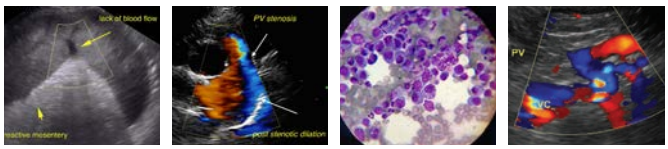
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT
Bella Manor

SPECIES
Canine

BREED
Mixed

SEX
Spayed Female

AGE
13 Years

WEIGHT
24.6 Pounds

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

IMAGING PERFORMED BY
Dr. Desen Ertunc

HOSPITAL NAME
Healing Spirit

REFERRING VET
Dr. Desen Ertunc

INVOICE
39067

DATE
6/28/22

PRESENTING CLINICAL SIGNS

Chronically progressive hyporexia, anorexic x 24 hours. No V/D, no obvious PU/PD. Liver cyst previously worked up, no significant improvement in hyporexia when emptied via aspiration. Abnormal PE/Chem/CBC/UA Results: PE- Markedly dehydrated, pale mm. CBC: WBC= 5.8 (6-17), Lym= 0.72 (1-4.8), RBC= 5.46 (5.5-8.5), Hgb= 11.5 (12-18), HCT= 39 %, MCHC= 29.4 (31-39) Chem: ALT= 151 (20-150), BUN= 104 (7-25), Ca= 12.2 (8.6-11.8), Phos= 8.9 (2.9-6.6), Creat= 4.8 (0.3-1.4), Glob= 2.0 (2.3-5.2) cPL= 99.9 (<200 in normal range) U/A: U.S.G.= 1.014, UP:C= 0.2-0.5, inactive sediment urine culture pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is mildly distended with anechoic urine. The Bladder wall appears somewhat thickened and irregular, measuring 0.50 cm. Findings are most consistent with diffuse cystitis or lack of urine distinction.

The left kidney has a normal shape and size (4.1 cm) with pyelectasia at 0.41 cm and pinpoint non-obstructive nephroliths. Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (4.0 cm) with pyelectasia at 0.41 cm and non-obstructive nephroliths, two of which measure at 0.35 and 0.39 cm. Overall echogenicity is slightly hyperechoic with poor 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 0.42 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 0.45 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.

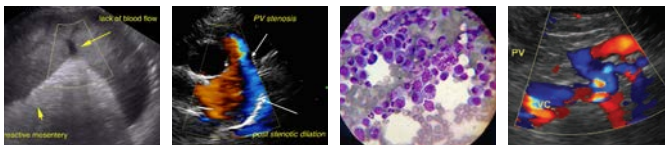
Spleen

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.

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. There is a large, somewhat irregular cystic structure visualized within the parenchyma, measuring roughly 2.89 cm in diameter.

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 suspended debris. The cystic and common bile ducts are normal/not visible.



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

PATIENT
Bella Manor

SPECIES
Canine

BREED
Mixed

SEX
Spayed Female

AGE
13 Years

WEIGHT
24.6 Pounds

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

IMAGING PERFORMED BY
Dr. Desen Ertunc

HOSPITAL NAME
Healing Spirit

REFERRING VET
Dr. Desen Ertunc

INVOICE
39067

DATE
6/28/22

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.

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.

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.

Free Abdomen

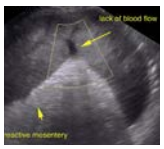
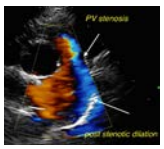
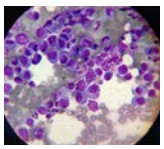
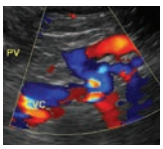
Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Mildly irregular/thickened urinary bladder wall – could be consistent with cystitis or lack of urine distention. Recommend urinalysis and culture.
- Decreased corticomedullary distinction in both kidneys with bilateral pyelectasia and non-obstructive nephroliths – Mild loss of corticomedullary distinction in both kidneys could be consistent with chronic degenerative disease or interstitial nephrosis. Pyelectasia of the left/right kidney could be consistent with pyelonephritis, chronic renal disease, secondary to PU/PD or fluid therapy (if applicable), other.
- Hypoechoic, prominent pancreas – The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- Cystic structure visualized within the liver – most consistent with a benign hepatic cyst.
- 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

Both kidneys have decreased corticomedullary distinction with pyelectasia and non-obstructive nephroliths. These findings could be consistent with pyelonephritis, previous or current partial obstruction (none appreciated), or with severe PU/PD/fluid therapy, etc. due to underlying renal disease. Recommend blood pressure evaluation, urinalysis and culture, and diuresis in addition to

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

PATIENT

Bella Manor

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

13 Years

WEIGHT

24.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Desen Ertunc

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Desen Ertunc

INVOICE

39067

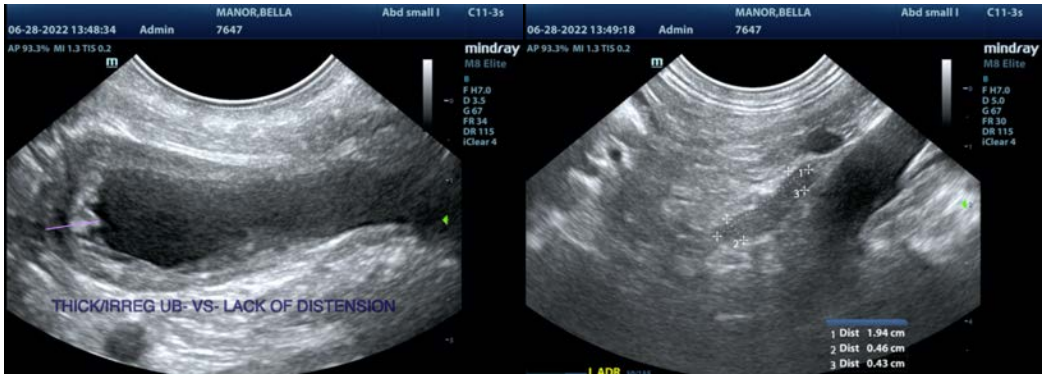
DATE

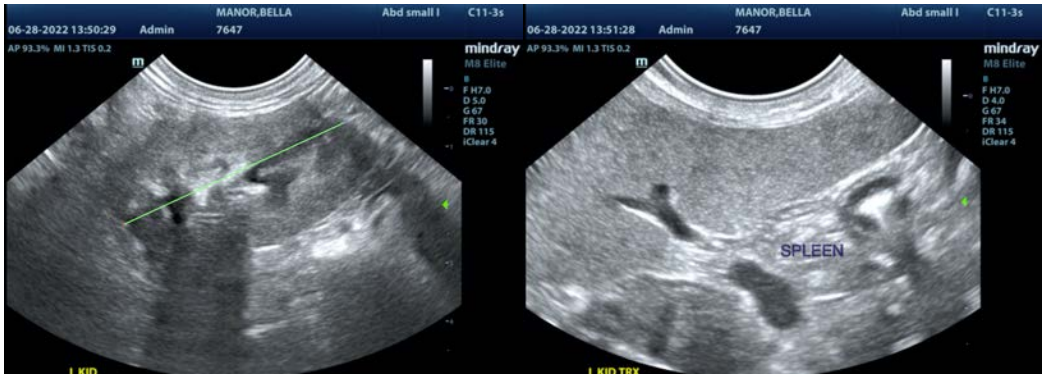
6/28/22

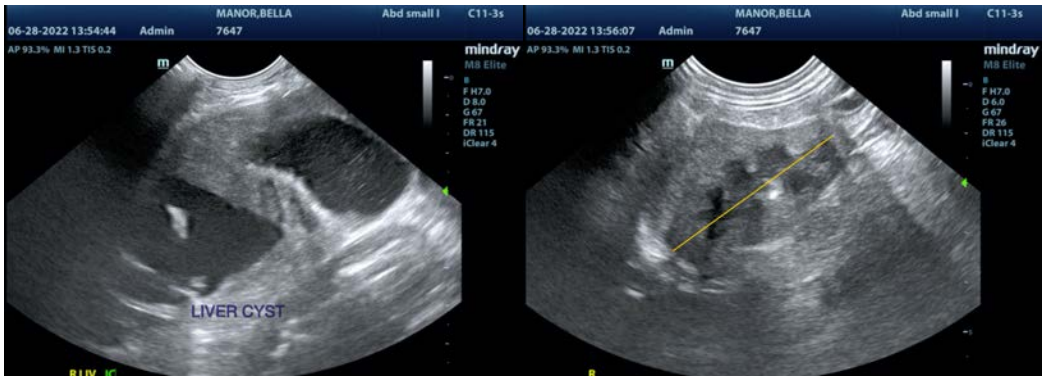
symptomatic therapy for uremia.

Additionally, the urinary bladder appears slightly irregular and thickened, but it is not fully distended with urine, so these findings are not definitive.

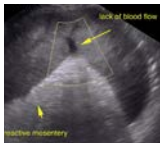
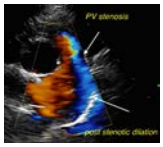
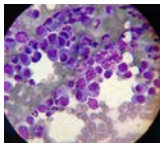
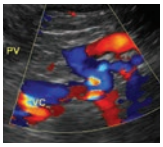
The pancreas is somewhat hypoechoic and prominent but does not appear overtly inflamed. These are findings are likely consistent with previous episodes of pancreatitis or pancreatic remodeling.







SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

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

PATIENT

Bella Manor

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

13 Years

WEIGHT

24.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Desen Ertunc

HOSPITAL NAME

Healing Spirit

REFERRING VET

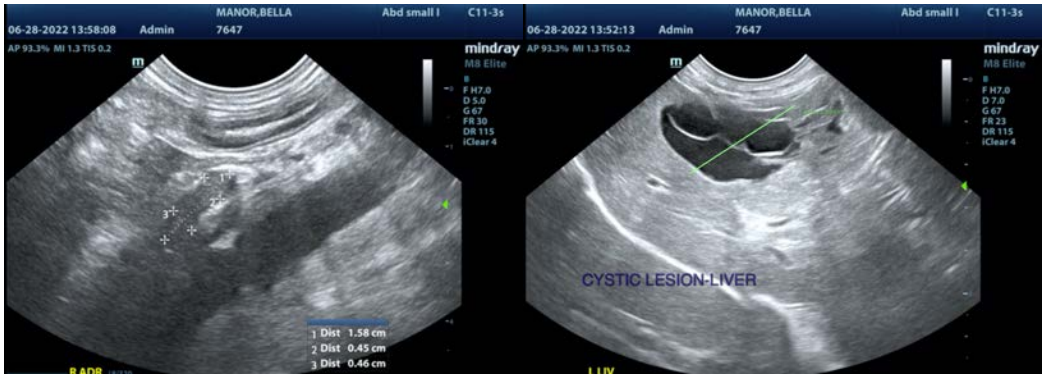
Dr. Desen Ertunc

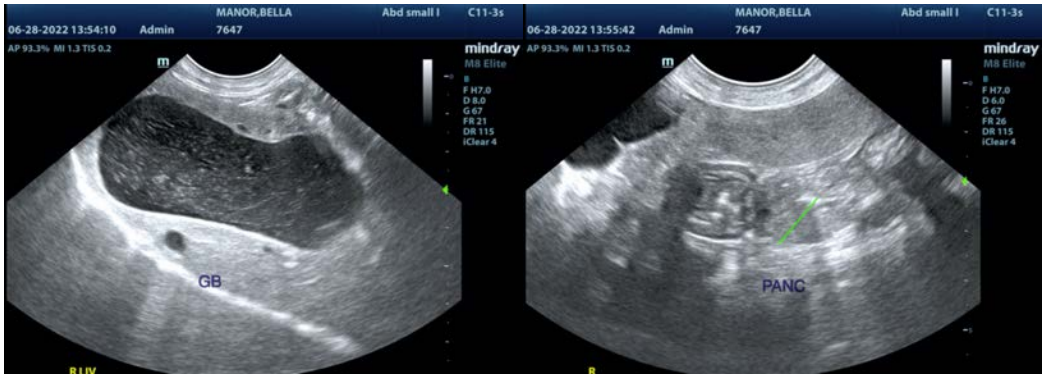
INVOICE

39067

DATE

6/28/22





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.

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

kathleen.sennello@sonopath.com