



PATIENT	PRESENTING CLINICAL SIGNS
Jersey Cutajar	Presented for decreased appetite, drinking a bit more and abdominal discomfort. No meds. Abnormal PE/Chem/CBC/UA Results: Please see bloodwork and radiographs attached.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.
Golden Retriever	
SEX	The residual prostate was free of pathology.
MN	No evidence of medial Iliac or sublumbar lymphadenopathy.
AGE	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 7.4 cm in length. The right kidney measured 7.0 cm in length.
11 years	
WEIGHT	Adrenal Glands
37.9 kg	The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 2.3 cm length x 0.49 cm width in the caudal pole. The right adrenal gland was indistinctly visualized owing to patient size and conformation. No overt pathology was noted in the area of the right adrenal gland.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.
IMAGING PERFORMED BY	Liver/ Gallbladder
Crystal Hill	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
The Collegeway AH	The visualized gastric walls were sonographically normal. The lumen of the stomach contained mild ingesta exhibiting areas of progressive distal acoustic shadowing. No overt mechanical pyloric outflow obstruction was noted.
REFERRING VET	
Dr. Hanna	
INVOICE	
15806	
DATE	
1/12/23	



PATIENT

Jersey Cutajar

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild segmental ingesta and luminal gas. No obstructive pattern was noted.

Normal visible colon wall layers were present with apparent formed feces in lumen.

SPECIES

Canine

Pancreas

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

BREED

Golden Retriever

Free Abdomen

No omental masses, lymphadenopathy, or evidence of peritoneal free fluid were noted.

SEX

MN

ULTRASONOGRAPHIC FINDINGS

- Mild age-related kidneys
- Sonographically unremarkable liver - low-grade benign hepatopathy
- Sonographically unremarkable gastrointestinal tract with gastric and mild segmental intestinal ingesta

AGE

11 years

WEIGHT

37.9 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely geriatric abdomen without evidence of significant visceral pathology as an obvious cause of the patient's clinical signs and mild anemia. No evidence of intraabdominal neoplastic criteria.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

The gastric and minor segmental intestinal ingesta may indicate recent meal ingestion. Correlation with most recent meal is suggested. If documented NPO prior to the ultrasound, some degree of mild metabolic or nonobstructive gastric stasis could be considered. CBC pathology review is suggested. Three-view chest radiographs are recommended to rule out occult thoracic or esophageal pathology as a contributing factor. Spec cPL may be considered to assess for low-grade or chronic pancreatitis, which may present as sonographically normal.

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

The Collegeway AH

REFERRING VET

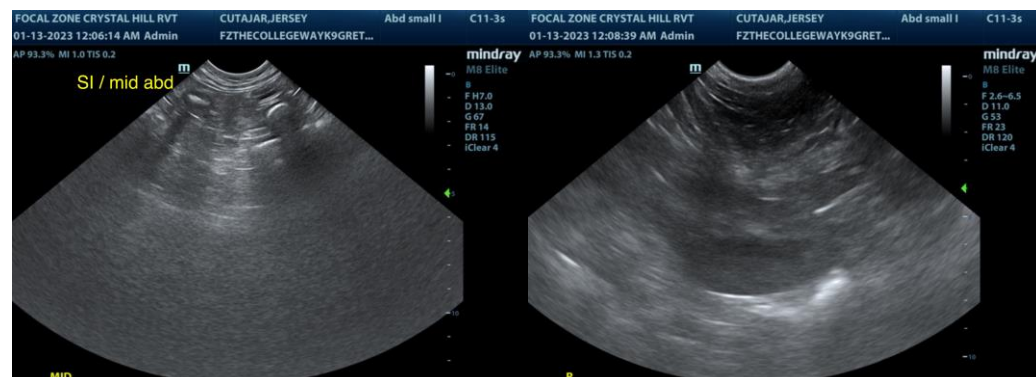
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PATIENT

Jersey Cutajar

SPECIES

Canine

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Golden Retriever

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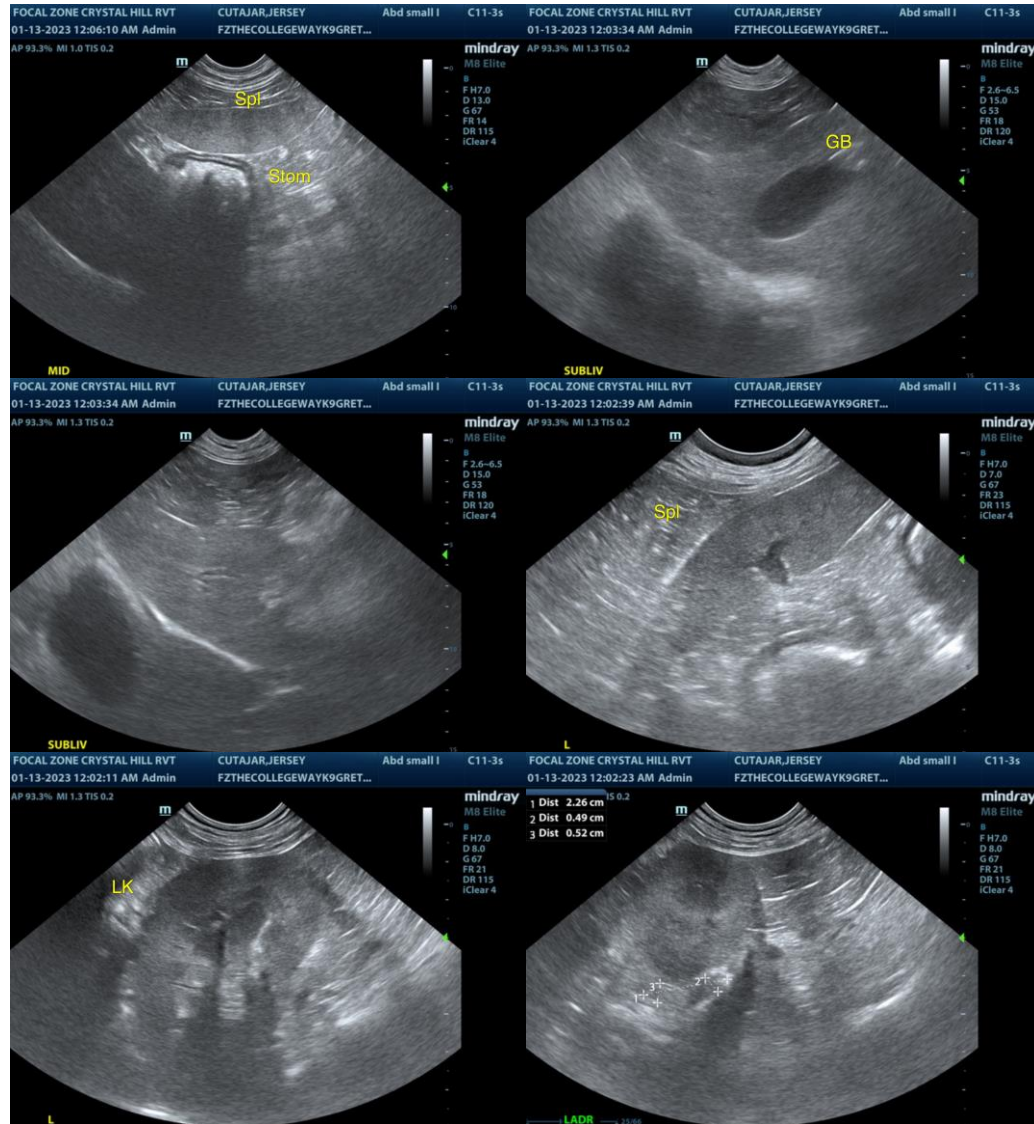
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com