

**PATIENT**

Hercules Wells

SPECIES

Canine

BREED

Mini Pincer

SEX

MN

AGE

13 years 8 months

WEIGHT

8.5 lbs.

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP (Canine
and Feline)**IMAGING
PERFORMED BY**

Rachel Runnells, RVT

HOSPITAL NAME

SVS Imaging KC

REFERRING VET

Dr. Johathon Renfro

INVOICE

13123

DATE

1/19/22

PRESENTING CLINICAL SIGNS

Inappetence, losing weight. Possibly painful abdomen - growls when being picked up, and doesn't want belly rubbed like normal. Diabetic for over 2 years.

Abnormal PE/Chem/CBC/UA Results: NSF- cbc, chem, Dex suppression and abdominal x-rays
10.15 urine specific gravity

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Small dependent cystic calculus along with mild nondependent particulate sediment were present. The calculus measured 0.62 cm. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of residual prostate was free of overt pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. Subtle generalized increased corticomedullary echogenicity was present with pinpoint areas of dystrophic medullary mineral were present in both kidneys with small cortical cysts present in the left kidney. Moderate loss of corticomedullary symmetry and definition expected for the age of the patient was present. No evidence of pelvic dilation was present. The left kidney measured 4.3 cm in length. The right kidney measured 4.4 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.77cm width in the cranial pole and 0.59 cm width in the caudal pole. The right adrenal gland measured 0.86 cm width in the cranial pole and 0.52 cm width in the caudal pole. Focal pinpoint area of nonspecific dystrophic mineral was present in the right adrenal gland.

Spleen

The spleen exhibited normal size and contour with generalized parenchymal heterogeneity exhibiting multifocal pinpoint hyperechoic parenchyma foci. These hyperechoic foci may indicate pinpoint areas of fibrosis, microinfarction, or mineralization, yet benign.

Liver/ Gallbladder

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. Moderate, nondependent yet nonorganized, nonmineralized gallbladder debris was present. The cystic and common bile ducts were normal.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.33 cm.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The duodenum wall width measured 0.41 cm. The jejunum wall width measured 0.32 cm.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

No omental masses, lymphadenopathy or peritoneal effusion were present.

ULTRASONOGRAPHIC FINDINGS***Primary Findings***

- Urinary bladder calculus with mild nondependent particulate sediment
- Bilateral moderate chronic renal changes with pinpoint medullary mineral and left kidney cortical cysts
- Pinpoint splenic parenchyma hyperechoic foci - benign
- Mild hepatomegaly - subjectively benign
- Moderate gallbladder debris - non-mucocele
- Heterogeneous pancreas - age-related or patient variant, remodeling owing to previous inflammation or low-grade to chronic pancreatitis possible
- Overtly normal gastrointestinal tract
- Pinpoint dystrophic right adrenal mineral - nonspecific

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine culture and sensitivity on a sterile urine sample is recommended.

Assessment for specific abdominal discomfort or pain in the cranial or subxiphoid abdomen potentially associated with chronic to low-grade pancreatitis or the gallbladder is suggested.

Hepatosupportive medications Including Denamarin and Ursodiol would be appropriate. Correlation with a spec cPL or, given the weight loss, a GI panel to include PLI/TLI/Cobalamin/Folate to assess for nonstructural Intestinal disease Is recommended. Continued gastrointestinal supportive care with



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recheck sonogram to assess for progressive pancreatic, gallbladder or intestinal inflammatory changes based on clinical signs and labs are suggested. Likewise, monitoring for progressive mineralization in the right adrenal gland would be ideal.

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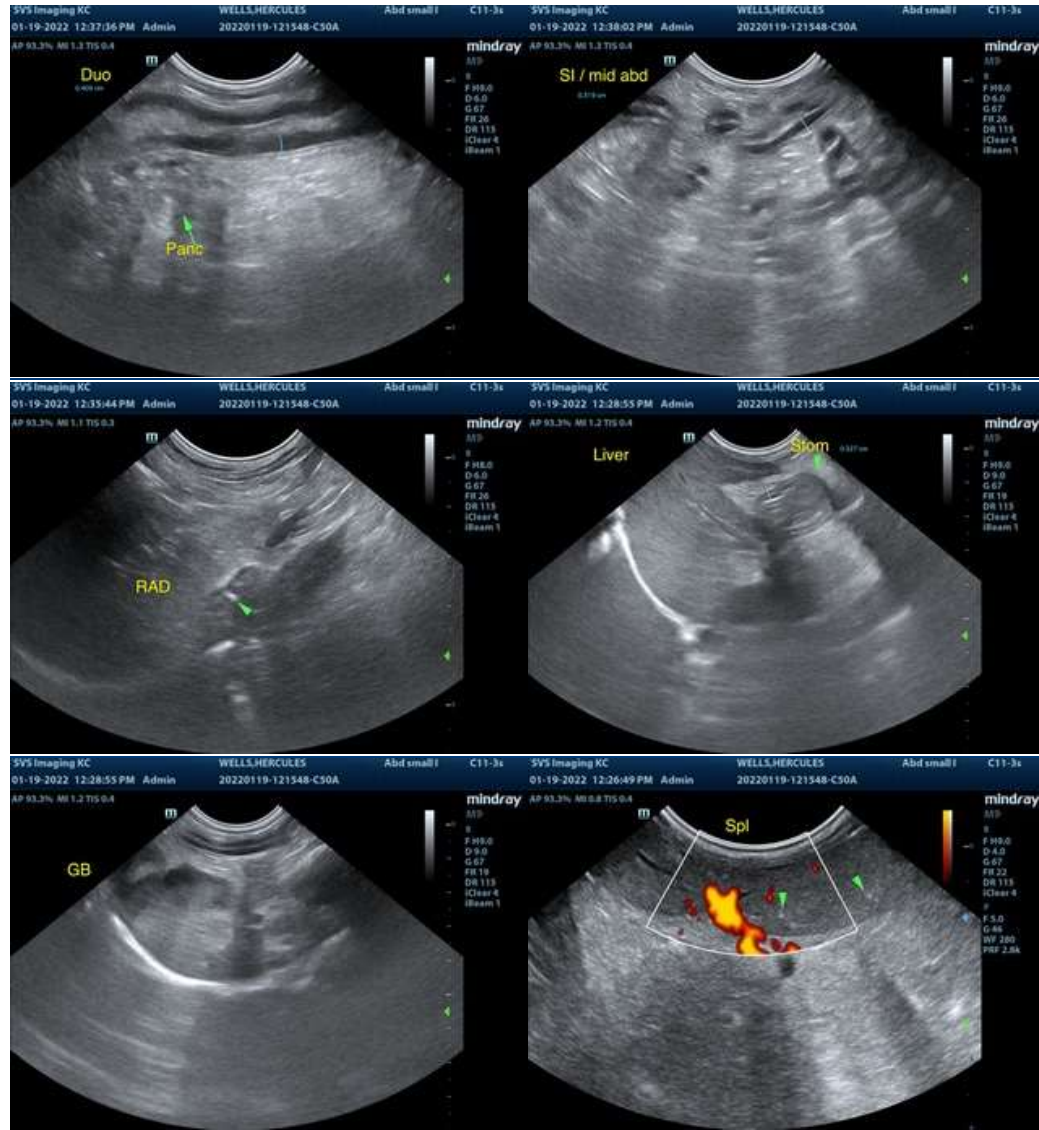
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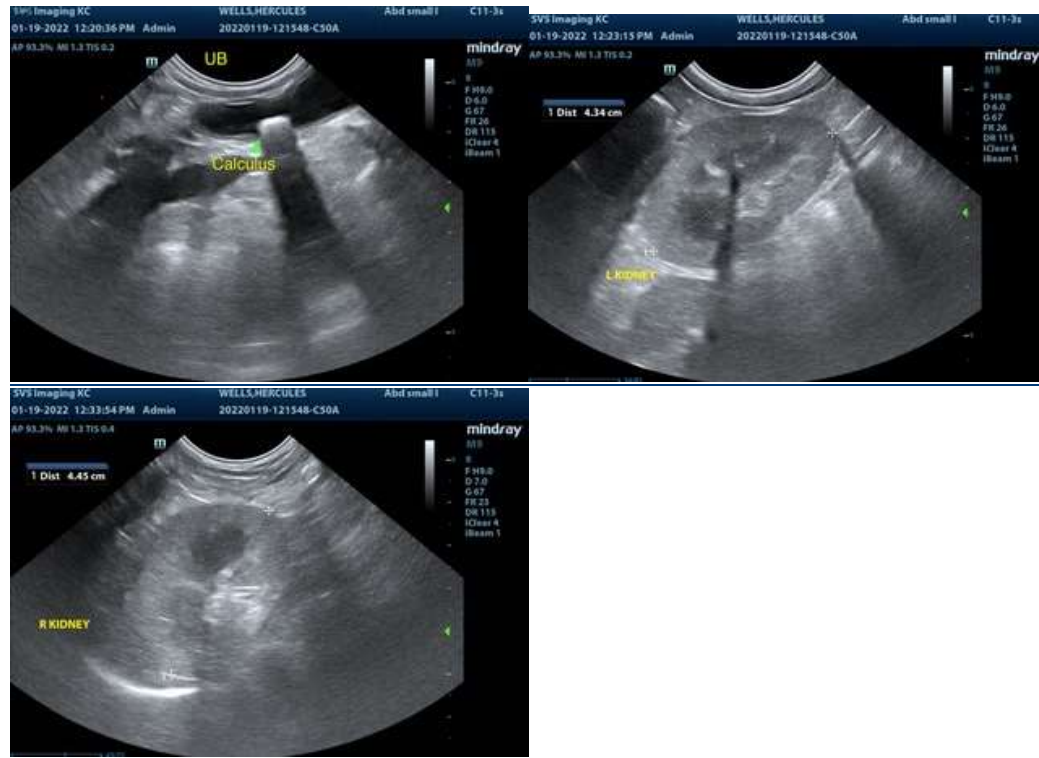
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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