



PATIENT	PRESENTING CLINICAL SIGNS
Olive Gilmore	History: Hx of proteinuria and CKD, seen by me for the first time today. Mild weight loss, not eaten for a few days. O thought P would pass away, but bounced back before the appt. - I started P on 1mg/kg SID Telmisartan today plus supportive fluid therapy and maropitant.
SPECIES	
Canine	Abnormal PE/Chem/CBC/UA Results: Exam unremarkable except grade I/VI pansystolic murmur. BP 230mmHg (CONFRIMED BY REPEATED READS). Crea 5.0, BUT 79. Ddx: -CKD with hypertension - Pheochromocytoma, other.
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Corgi	Urinary System
SEX	The urinary bladder was normal in size and tone with anechoic urine. Sessile based to polypoid mass lesions were noted in the apical urinary bladder, an example measured 1.4 cm x 0.7 cm. The mass lesions exhibited similar echogenicity compared to adjacent wall without evidence of mural mineralization. The urethra was normal to a depth of 3.0 cm. Aortic trifurcation was normal.
Spayed Female	
AGE	Both kidneys exhibited adequate size with asymmetrical contour. The renal cortex presented nonuniform cortex hypertrophy, exhibiting mild increased cortex echogenicity and mild loss of corticomedullary border demarcation with subjective mild reduced medullary volume. Bilateral mild to moderate pyelectasia was noted with intermittent small cortical cysts and pinpoint dystrophic medullary mineral. The left kidney measured 6.3 cm in length. The right kidney measured 6.3 cm in length.
13 Years	
WEIGHT	Adrenal Glands
26 Pounds	Both adrenal glands were normal in size and contour. The right adrenal gland measured 0.60 cm at the cranial pole and 0.65 cm at the caudal pole. The left adrenal gland measured 0.48 cm at the cranial pole and 0.48 cm at the caudal pole. A discrete uniform, mildly hyperechoic nondisruptive nodule was noted in the cranial left adrenal, measuring 0.7 cm x 0.42 cm.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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
Sorbo	The liver exhibited subjective mild enlargement. 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.
HOSPITAL NAME	
Millbrook AC	
REFERRING VET	
Sorbo	
INVOICE	The gallbladder was non-distended in size anechoic content and mild to moderate primarily dependent nonorganized echogenic debris. The cystic and common bile ducts were normal.
20639	Gastrointestinal
DATE	The stomach presented intact wall layering with a normal wall layer ratio. Mild luminal gas and nonshadowing ingesta/chyme were present.
1/19/23	



PATIENT

Olive Gilmore

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.

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

SPECIES

Pancreas

Canine

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

BREED

Free Abdomen

Corgi

No overt lymphadenopathy or peritoneal effusion was present.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

- Sessile based to polypoid lesions in the apical urinary bladder- focal polyps or polypoid cystitis. Potential for emerging neoplastic criteria, i.e., transitional cell carcinoma possible.
- Bilateral chronic nephritis with mild to moderate pyelectasia, cortical cyst and minor dystrophic medullary mineral
- Subjective mild benign hepatomegaly
- Gallbladder debris (non-mucocele)
- Overtly normal gastrointestinal tract, minor pancreatic remodeling
- Bilateral normal adrenal gland size with discrete cranial left adrenal nodule- suspect adenoma

AGE

13 Years

WEIGHT

26 Pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening BRAF assay is recommended for further assessment. Biopsy of the sessile based to polypoid urinary bladder lesions are likely required for a definitive diagnosis. Sonographic reassessment in 4 weeks for evidence of progression, pending BRAF assay would be reasonable. No evidence of adrenal neoplastic criteria. Technically, the possibility of very early left pheochromocytoma cannot be excluded. Sonographic monitoring of the discrete left adrenal nodule for evidence of progression is recommended. Hepatosupportive medications, including Denamarin and Ursodiol are suggested if evidence of cholestasis is noted. A GI panel to include PLI/TLI/Cobalamin/Folate and three view chest radiographs may be considered to rule out occult disease as a contributing factor to the patients weight loss.

IMAGING PERFORMED BY

Sorbo

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Olive Gilmore

SPECIES

Canine

BREED

Corgi

SEX

Spayed Female

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13 Years

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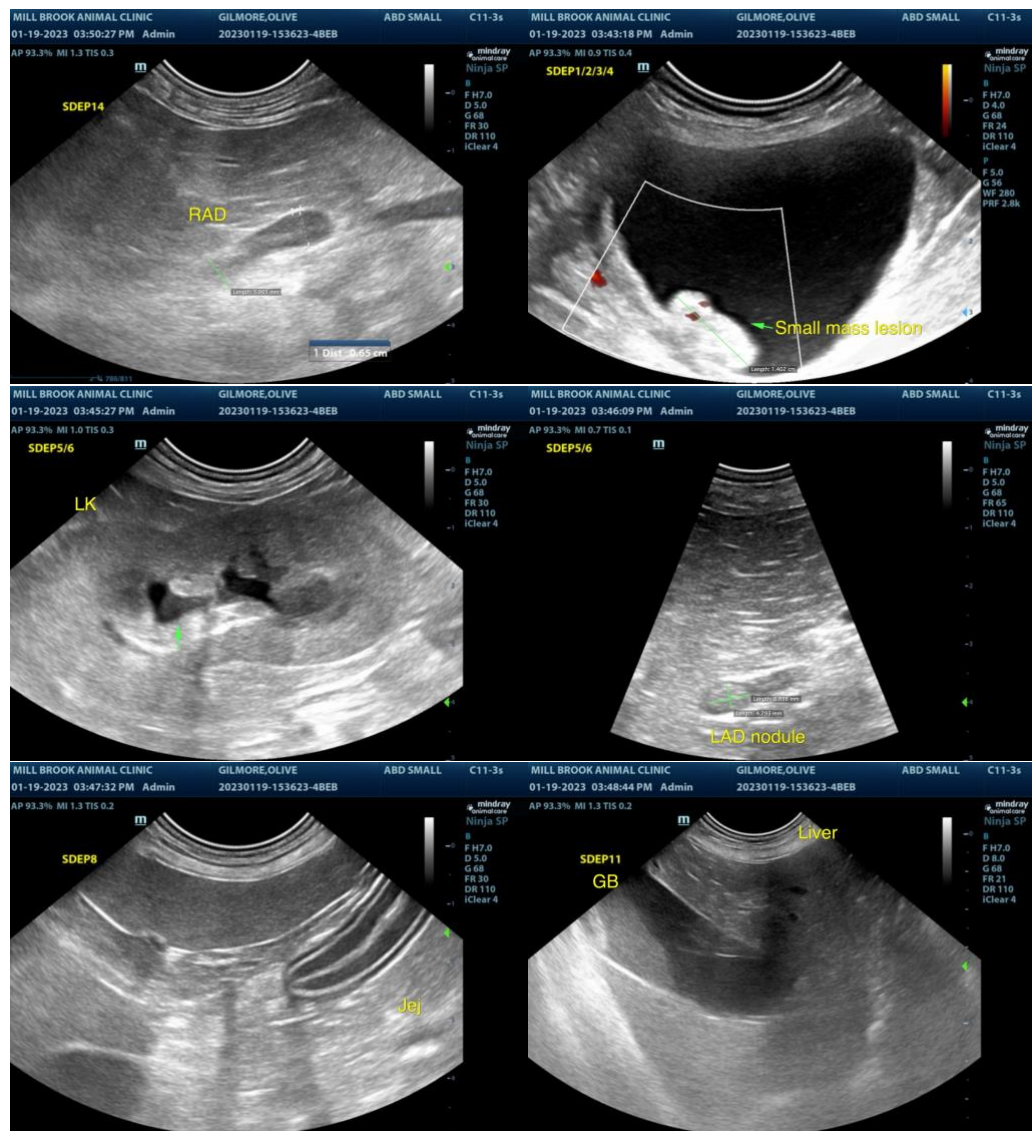
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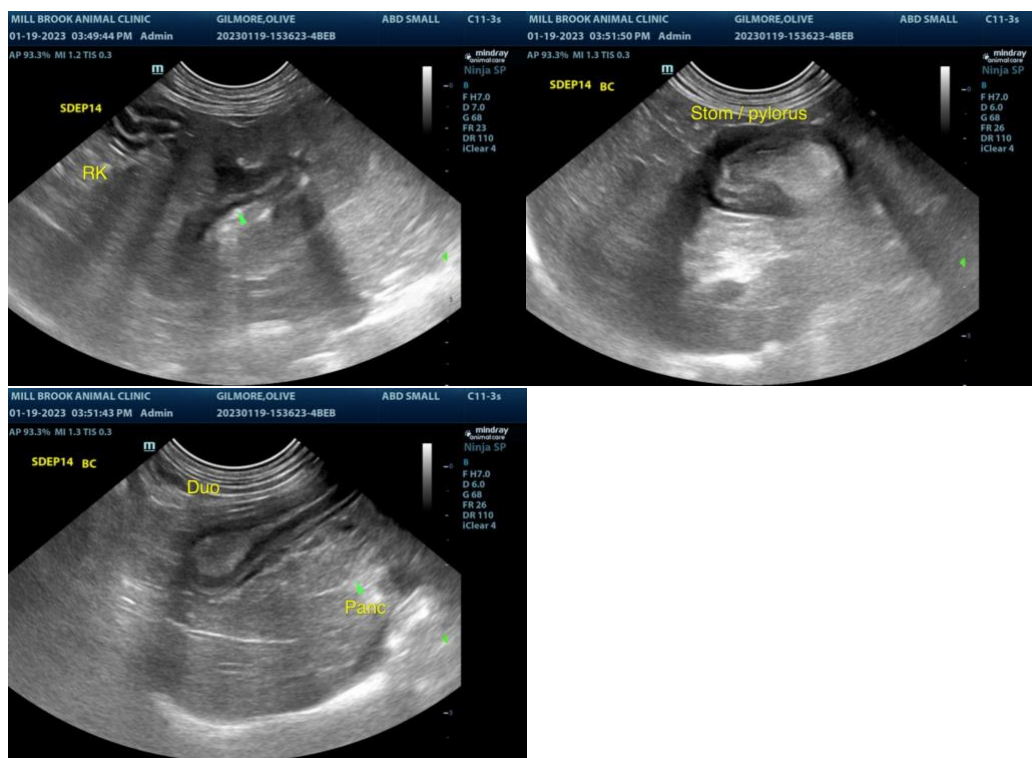
Sorbo

INVOICE

20639

DATE

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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)
info@SonoPath.com