



PATIENT PRESENTING CLINICAL SIGNS

Precious Garvey Presented with eye discharge and on/off lethargy x 2-3 weeks. Eating and drinking OK per owner. CBC/Chem showed borderline neutrophilia and hyperglycemia. Radiographs showed suspected gastroenteritis, mild renal mineralization and mild hepatomegaly. Uterine tract not enlarged (ruling in/out pyometra). Urine sample showed glucosuria, bacteria and increased WBC count with some calcium oxalate crystals. Started on antibiotic. ? early stages of pyometra.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Pomeranian Mix

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal size and tone. Primarily anechoic urine was present in the lumen. Multiple small areas of dependent mineral present in the urinary bladder lumen. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural criteria were noted.

SEX

Female Intact

The uterus was sonographically unremarkable without evidence of luminal fluid accumulation or cystic hyperplastic mural changes. The right uterine horn width measured 0.66 cm and the left uterine horn width measured 0.7.

AGE

8 Years

The visualized left ovary exhibited potential for cystic changes with potential for follicle yet overall normal in size measuring 1.2 cm length. No overt pathology in the area of the right ovary.

WEIGHT

14.4 lbs

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. Mild loss of corticomedullary border demarcation was note in both kidneys. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex. Pinpoint to focal areas of nonobstructive medullary mineralization were present. Mild pyelectasia was present in the left kidney. No evidence of pyelectasia in the right kidney. The left kidney measured 3.7 cm in length. The right kidney measured 4.4 cm in length.

INTERPRETED BY

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

Adrenal Glands

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm width at the caudal pole and 0.42 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.43 cm width at the caudal pole and 0.43 cm width at the cranial pole.

HOSPITAL NAME

Airport Animal
Hospital

Spleen

REFERRING VET

Asha Gudluru, DVM

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.

Liver

INVOICE

49771

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively mildly increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

DATE

1-23-22

The gallbladder was non distended in size with moderate nondependent yet nonorganized gallbladder debris. The gallbladder walls were sonographically normal without inflammatory criteria. No evidence of



PATIENT

Precious Garvey

peripheral gallbladder inflammation. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

SPECIES

Canine

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 measured 0.4 cm width.

BREED

Pomeranian Mix

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 jejunum wall measured 0.23 cm width. The duodenum wall measured 0.40 cm width.

Normal visible colon wall layers were present with semi-formed feces present in the generalized colon.

SEX

Female Intact

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.

AGE

8 Years

Free Abdomen

Several medial iliac lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a medial iliac lymph node measured 0.39 cm width. These lymph nodes were not overly consistent with neoplastic criteria.

WEIGHT

14.4 lbs

No overt peritoneal effusion was present.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Mild hepatomegaly exhibiting mild generalized increased parenchyma echogenicity - vacuolar hepatopathy, chronic hepatitis /cholangiohepatitis, lipidosis, fibrosis, or other hepatopathy with round cell hepatic neoplasia considered less likely.
- Moderate gallbladder debris (nonmucocele).
- Bilateral nonobstructive renal medullary mineral, mild left kidney pyelectasia.
- Mild dependent urinary bladder mineral.
- Semi to nonformed feces in colon - potential inflammatory bowel episode.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This patient is suspected to be passing small amounts of mineral from the kidneys into the urinary bladder. Urine culture and sensitivity on a sterile urine sample recommended. Alternatively, recheck urinalysis while on antibiotic or urinary culture and sensitivity 7 days post completion of current antibiotic could be considered. No evidence of pyometra at this time.

HOSPITAL NAME

Airport Animal
Hospital

REFERRING VET

Asha Gudluru, DVM

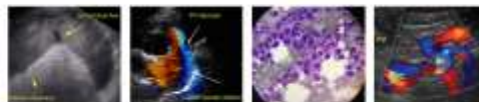
INVOICE

49771

Monitoring for possible emerging soft stool or diarrhea, which may suggest inflammatory bowel episode, recommended. However, given lack of reported inappetence or vomiting, this potential differential is of unclear clinical significance. Correlation with hepatic presentation with hepatic enzyme assessment recommended. Potentially, ultrasound guided FNA of the liver could be considered for further clarification with screening cytology.

DATE

1-23-22



PATIENT

Precious Garvey

SPECIES

Canine

BREED

Pomeranian Mix

SEX

Female Intact

AGE

8 Years

WEIGHT

14.4 lbs

INTERPRETED BY

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

**IMAGING
 PERFORMED BY**

Pamela Harrigan, RDCS

HOSPITAL NAME

Airport Animal
 Hospital

REFERRING VET

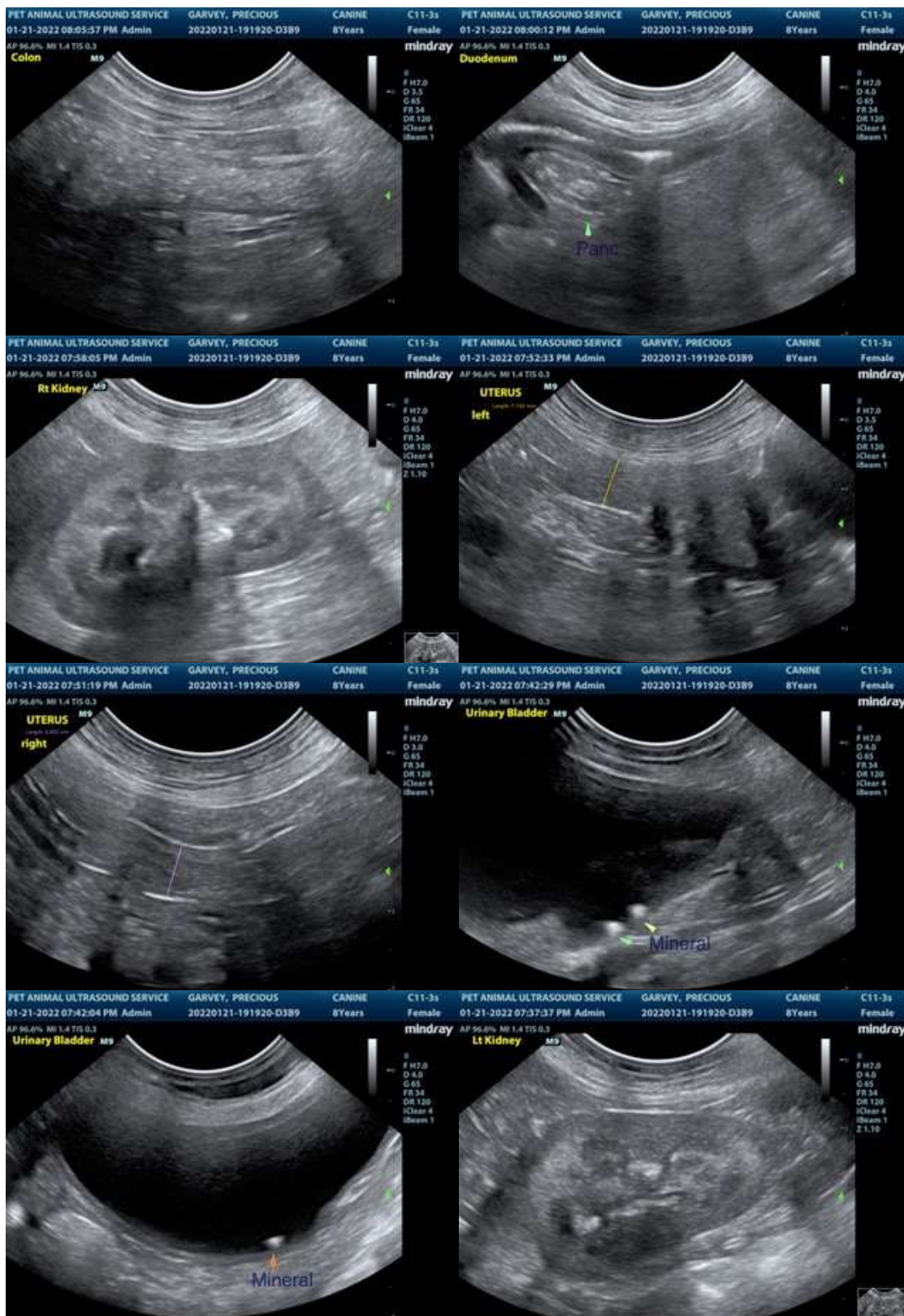
Asha Gudluru, DVM

INVOICE

49771

DATE

1-23-22





PATIENT

Precious Garvey

SPECIES

Canine

BREED

Pomeranian Mix

SEX

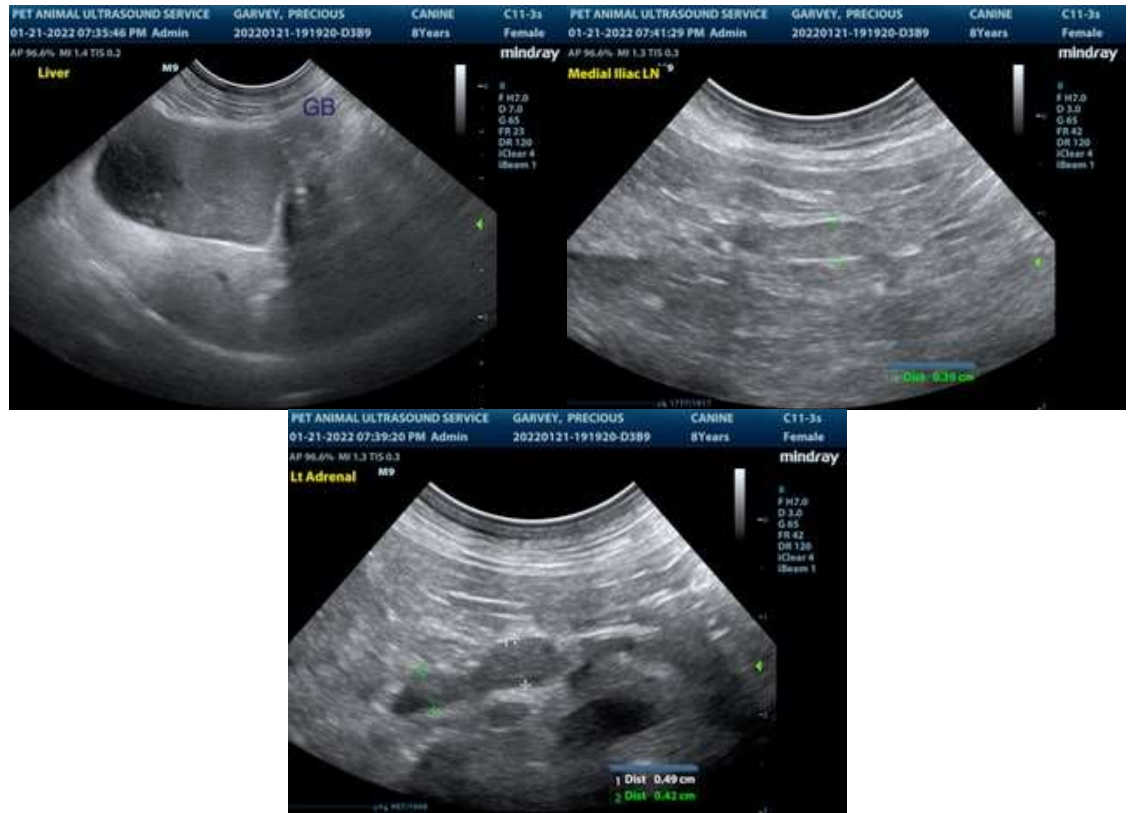
Female Intact

AGE

8 Years

WEIGHT

14.4 lbs



INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Airport Animal
 Hospital

REFERRING VET

Asha Gudluru, DVM

INVOICE

49771

DATE

1-23-22

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.

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