



PATIENT

Peanut Davis

SPECIES

Canine

BREED

Dachshund

SEX

Spayed Female

AGE

7 Years

WEIGHT

14.8 Lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward AH

REFERRING VET

Dr. Megan Cassels-
Conway

INVOICE

13616

DATE

1/24/22

PRESENTING CLINICAL SIGNS

History: Presented to ER yesterday for petechia on ventral abdomen and hemorrhagic stool. Severe thrombocytopenia noted. Started on prednisone, doxycycline and famotidine. On PE today, BAR mm pk/m, crt<2s. Moderate petechia ventral abdomen, mild petechia pinna AU, two 3mm areas of petechia on gingiva. Cardiopulmonary ausc wnl. Abd wnl. Normal appetite and energy level. Butorphanol 0.2mg/kg IV given for ultrasound.

Abnormal PE/Chem/CBC/UA Results: 1/24/2022 CBC pending Thoracic and abdominal rads WNL 1/23/2022 CBC Plt 0 Chem WNL Lyme/Ana/Ehr/HW NEG PT/PTT still pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 were noted. Aortic trifurcation was normal without evidence of medial iliac or sublumbar lymphadenopathy.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 4.4 cm in length. The right kidney measured 4.65 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.1 cm in length x 0.36 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.2 cm in length x 0.30 cm width at the caudal pole.

Spleen

The spleen was normal in size with primarily maintained symmetrical lateral and medial capsule contour. Regional areas of mild asymmetrical medial capsule contour exhibiting mildly hyperechoic to thickened medial capsule along with potential adjacent areas of coalescing hyperechoic medial parenchymal nodules were present. Normal splenic vascularity was noted. No splenic masses, nodules or overt neoplastic criteria.

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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.

Gastrointestinal



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate, exhibiting progressive distal acoustic shadowing ingesta. No overt evidence of foreign material within the stomach.

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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.

BREED

Pancreas

Dachshund

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 was evident.

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Free Abdomen

No omental masses, lymphadenopathy or effusion was present.

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Other

No overt pathology in the area of the uterine remnant.

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

- Probable mild incidental medial splenic capsule fibrosis with potential for coalescing benign myelolipomas
- Gastric ingesta- suspect postprandial presentation

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no evidence of significant visceral pathology, specifically no evidence of intraabdominal neoplasia or effusion as the potential cause of the severe thrombocytopenia. Some degree of metabolic gastric stasis or delayed gastric emptying could be considered if documented NPO prior to the ultrasound or if inappetent. Additionally, diagnostics which may include infectious disease titers/serology could be considered if clinically indicated.

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Empirically, continued medical therapy for infectious/immune mediated thrombocytopenia with continued gastric protectant protocol which may include sucralfate given the hemorrhagic stool is recommended. Correlation with pending CBC as well as serial monitoring of platelet numbers.

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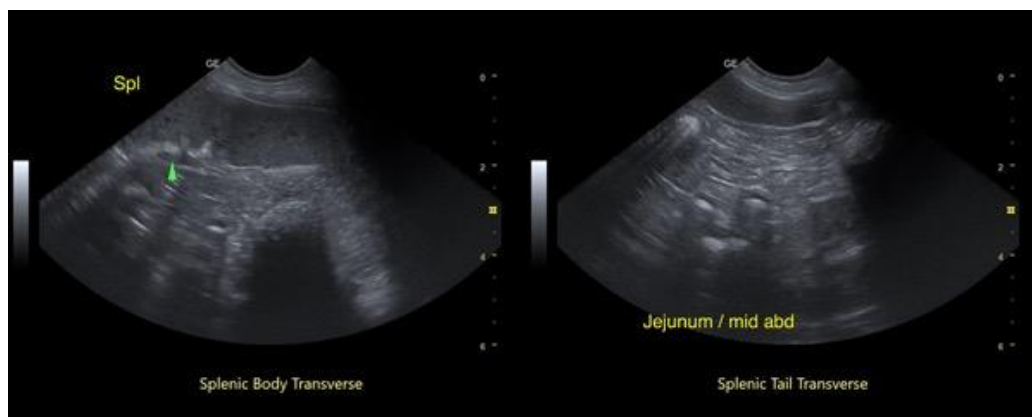
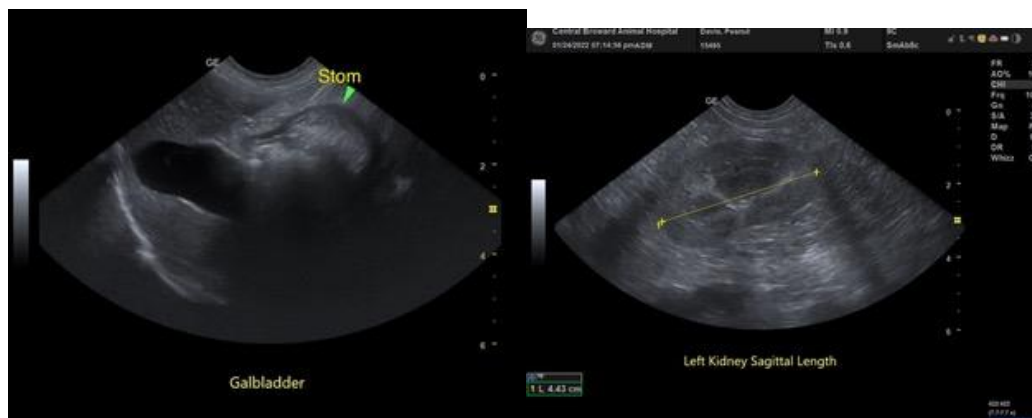
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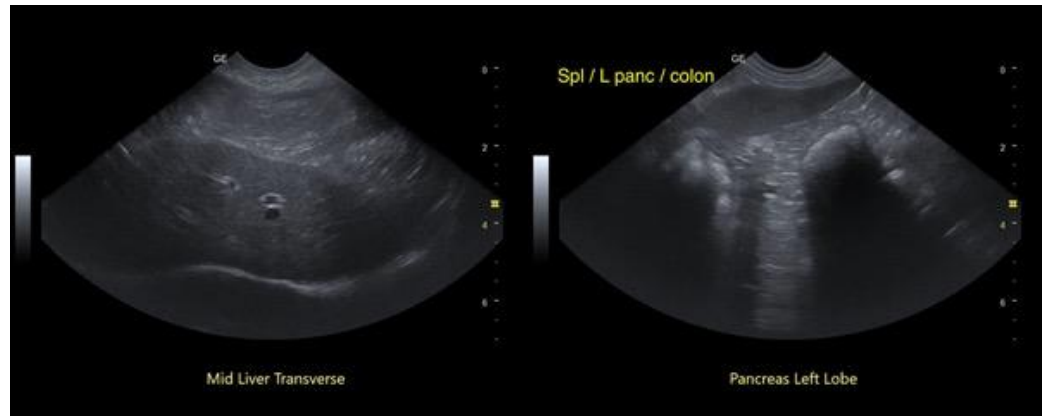
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com