

**PATIENT**

Dixie Marner

SPECIES

Canine

BREED

Lab Mix

SEX

SF

AGE

14 years

WEIGHT

65 lbs.

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

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Dr. Katie Merkes

INVOICE

13207

DATE

1/28/22

PRESENTING CLINICAL SIGNS

Prophylactic geriatric ultrasound. Has had normal labs, but history of recurrent UTIs and some urinary incontinence.

Abnormal PE/Chem/CBC/UA Results: Normal lab findings.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder was normal. The cystourethral junction and visible proximal urethra exhibited normal structure yet subjective decreased 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.

No overt pathology was noted in the area of the uterine remnant.

The area of the aortic trifurcation was free of pathology.

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 6.1 cm in length. The right kidney measured 6.6 cm in length.

Adrenal Glands

A subtle, non-expansive, mildly nonhomogeneous, nonmineralized nodule was present in the cranial left adrenal gland. The nodule did not exhibit signs of mineralization or vascular invasion. The nodule measured 1.0 cm x 0.89 cm. The overall left adrenal gland measured 3.3 cm length x 0.68 cm width at the caudal pole.

The right adrenal gland normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The right adrenal gland measured 2.8 cm length x 0.64 cm width in the caudal pole.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

Liver/ Gallbladder

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 contained mild nonorganized, nonmineralized gallbladder debris. 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.

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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.

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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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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ULTRASONOGRAPHIC FINDINGS***Primary Findings***

- Subtle left adrenal nodule - suspect adenoma
- Decreased proximal urethral tone - suggestive of incontinence, no overt evidence of structural lower urinary tract pathology
- Age-related mild kidneys
- Mild pancreatic remodeling - consistent with age-related changes, incidental
- Mild gallbladder debris

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely geriatric abdomen without evidence of significant visceral pathology.

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Ideally, sonographic monitoring of the left adrenal nodule for evidence of progression is recommended. Screening blood pressure to assess for evidence of hypertension is recommended. If normal blood pressure, Proin trial could be considered if clinically indicated.

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The gallbladder debris may be secondary to fasting or indicate nonclinical cholestasis.

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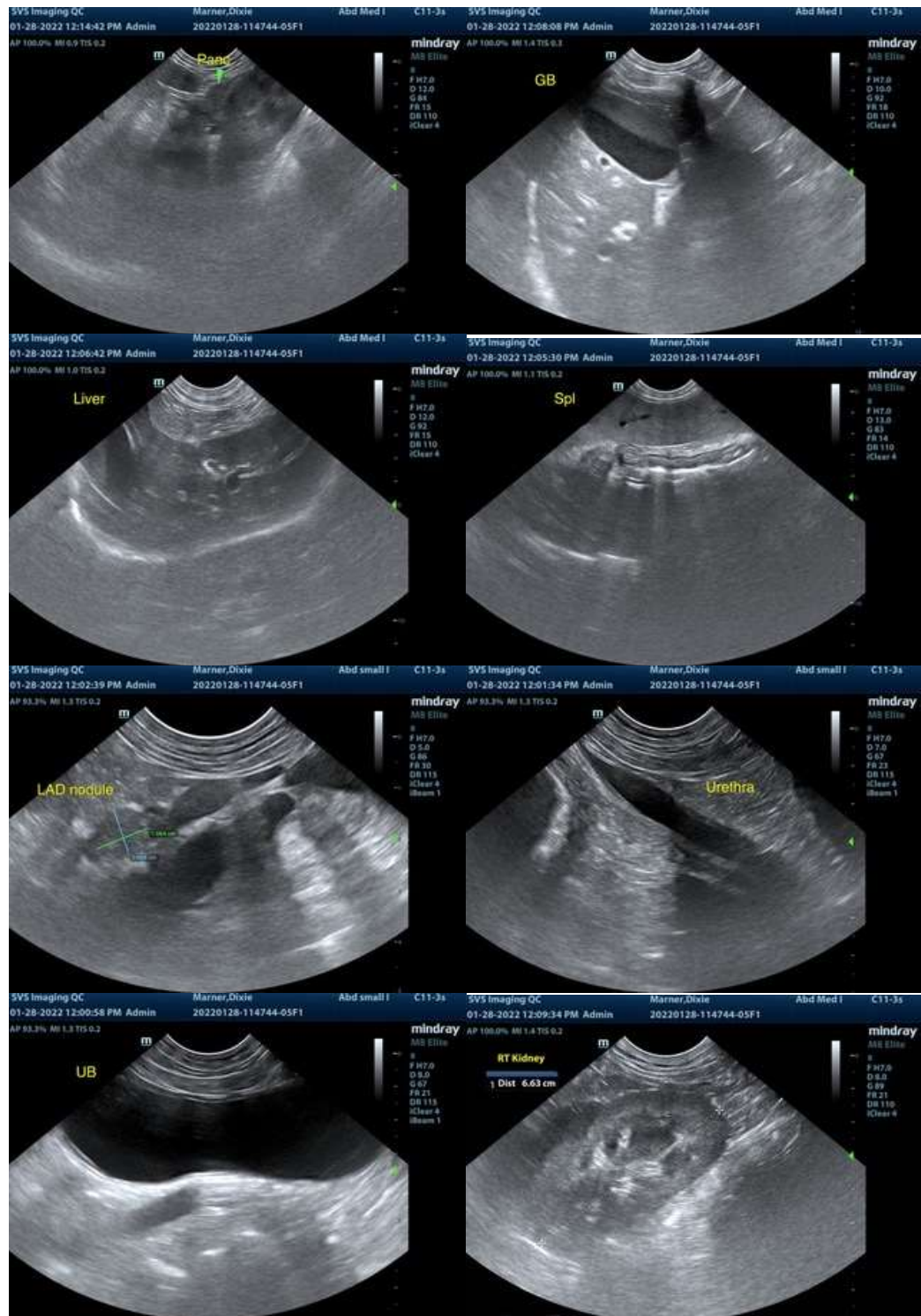
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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