

PATIENT PRESENTING CLINICAL SIGNS

Sabre Hollar Presented for pain management and treated with maloxicam and gabapentin x 1 week. Clinically did well but had abnormal bloodwork. Albumin: 2.3, globulin 4.3, fecal occult blood negative. Sedated with butorphanol.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Labrador Retriever

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.

SEX

Spayed Female

The area of the aortic trifurcation was free of pathology.

AGE

11 Years

Normal size and margination was 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The right kidney measured 7.1 cm. The left kidney measured 7.4 cm.

Adrenal Glands

WEIGHT

55 Pounds

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm at the cranial pole and 0.57 cm at the caudal pole. The right adrenal gland measured 0.43 cm at the cranial pole and 0.44 cm at the caudal pole.

Spleen

INTERPRETED BY

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

Pamela Harrigan, RDCS

Liver

HOSPITAL NAME

Wood River AH

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 mild, echogenic, nonmineralized biliary sludge. Focal area of mineral to small, non-obstructive choleliths in the area of the gallbladder neck, measuring 1.0 cm diameter. The common bile duct was normal.

Gastrointestinal

REFERRING VET

Dr. Leah Fisher

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. Gastric body wall measured 0.45 cm. No overt evidence of ulceration.

INVOICE

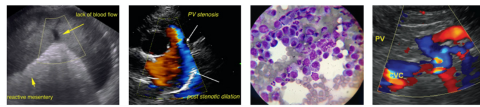
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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Duodenum wall measured 0.45 cm. Jejunum wall measured 0.40 cm.

DATE

1/28/22

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



PATIENT *Pancreas*

Sabre Hollar 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.

SPECIES *Free Abdomen*

Canine No overt lymphadenopathy or peritoneal effusion was present.

BREED **ULTRASONOGRAPHIC FINDINGS**

Labrador Retriever

- Minor age related kidneys
- Sonographically unremarkable gastrointestinal tract
- Sonographically normal liver
- Mild gallbladder debris with focal area of emerging non-obstructive mineral to small choleliths - incidental.

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

11 Years

Overall, largely mild geriatric abdomen without evidence of significant visceral pathology. Specifically, no evidence of hepatic, gastrointestinal, or overt renal pathology as potential cause of the hypoalbuminemia. Hepatic dysfunction is not suspected given the normal hepatic presentation and assuming no evidence of hepatic enzyme elevation. Urinalysis with UPC (if evidence of proteinuria) would be warranted. Monitoring for gastrointestinal signs (diarrhea, etc.) or evidence of weight loss, which may suggest structurally insignificant gastrointestinal disease recommended.

WEIGHT

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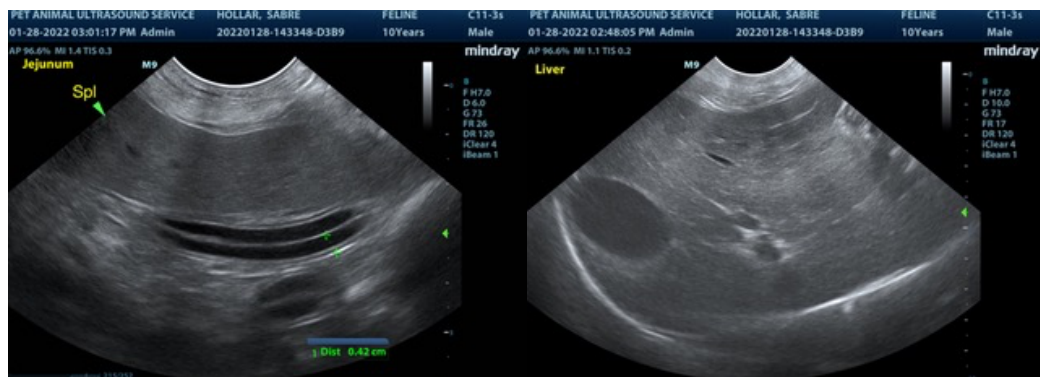
Dr. Leah Fisher

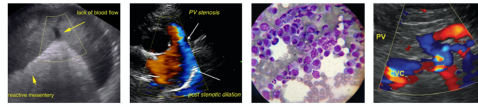
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PATIENT

Sabre Hollar

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

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WEIGHT

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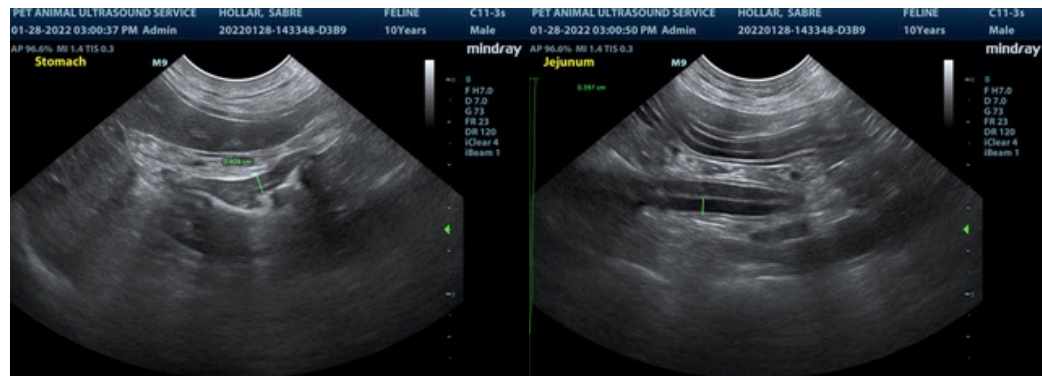
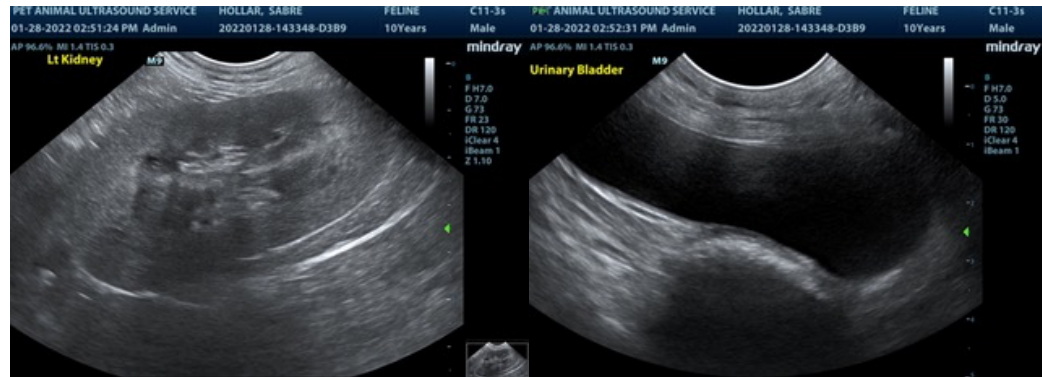
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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