



PATIENT

Norrington Marrin

PRESENTING CLINICAL SIGNS

History: Norrington: 5y MN Dalmatian with a few week history chronic intermittent v. CPL positive. Urolith surgery pending for tomorrow.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Dalmatian

The urinary bladder was normal in size and tone. The urinary bladder walls were sonographically unremarkable without evidence of overt inflammatory changes. A solitary cystic calculus, measuring 0.9 cm in diameter along with mild dependent mineralized sand was present in the urinary bladder lumen as well as the cystourethral junction and pre-prostatic urethra. The visualized post-prostatic urethra was normal to a depth of 3.0 cm.

SEX

Neutered Male

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 1.2 cm in diameter.

AGE

5 Years

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. Pinpoint to focal areas of non-obstructive minor medullary mineral were present. The left kidney measured 6.3 cm in length. The right kidney measured 6.1 cm in length.

WEIGHT

50 Lbs.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 cm width at the caudal pole and 0.52 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 0.53 cm width at the caudal pole.

IMAGING PERFORMED

BY

Loetitia Saint-Jacques, RVT
LVT

Spleen

The spleen was normal in size and contour with generalized finely textured homogeneous parenchyma. Several non-expansive well-demarcated hypoechoic. intraparenchymal nodules were present in the subjective cranial spleen, an example measured 0.87 cm in diameter.

Liver

HOSPITAL NAME

Dr. India Vannini

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.

REFERRING VET

Dr. India Vannini

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. 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. The gastric body wall measured 0.37 cm.

DATE

1/31/22



PATIENT

Norrington Marrin 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 duodenum wall measured 0.43 cm.

SPECIES

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

Pancreas

BREED

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

ULTRASONOGRAPHIC FINDINGS

SEX

Neutered Male

- Urinary bladder calculus with concurrent mild luminal to non-obstructive proximal urethral sand
- Bilateral minor to focal non-obstructive renal medullary mineral
- Nonspecific splenic nodules
- Overtly normal gastrointestinal tract
- Mildly heterogeneous pancreas

AGE

5 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

50 Lbs.

Catheter placement with retrohydropropulsion at the time of surgery recommended given the presence of non-obstructive proximal urethral sand. Urine culture and sensitivity may be considered, if not done, to rule out underlying infection.

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DABVP (Canine and
Feline)

Potential etiologies for the splenic nodules may include benign processes such as nodular hyperplasia, extramedullary hematopoiesis, hematoma, infection, infarction, or neoplasia. Ultrasound guided FNA of the nodule using 25-gauge needle and assuming normal coagulation parameters may be considered. Otherwise, sonographic monitoring of the splenic nodules for any changes in size or appearance with initial recheck in 3-4 weeks would be a more conservative approach.

IMAGING PERFORMED

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Loetitia Saint-Jacques, RVT
LVT

The overall appearance for the pancreas was not overtly suggestive of active pancreatitis yet parenchymal remodeling, potentially owing to previously inflammatory episode or low grade to chronic pancreatitis, which may present sonographically normal, cannot be excluded. Dietary intolerance/food hypersensitivity, occult parasitism or concurrent low-grade gastroenteropathy also possible. As needed, continued gastrointestinal support and/or therapy for potential to low-grade to chronic pancreatitis should prove beneficial.

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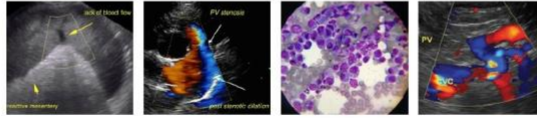
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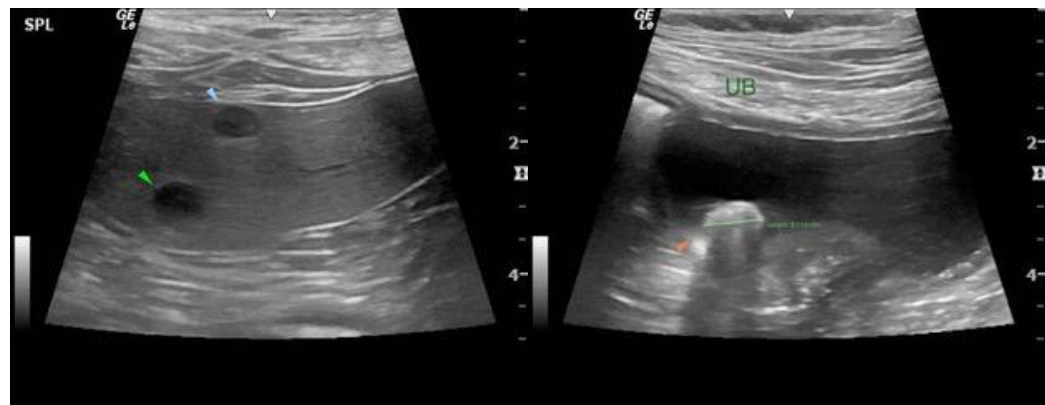
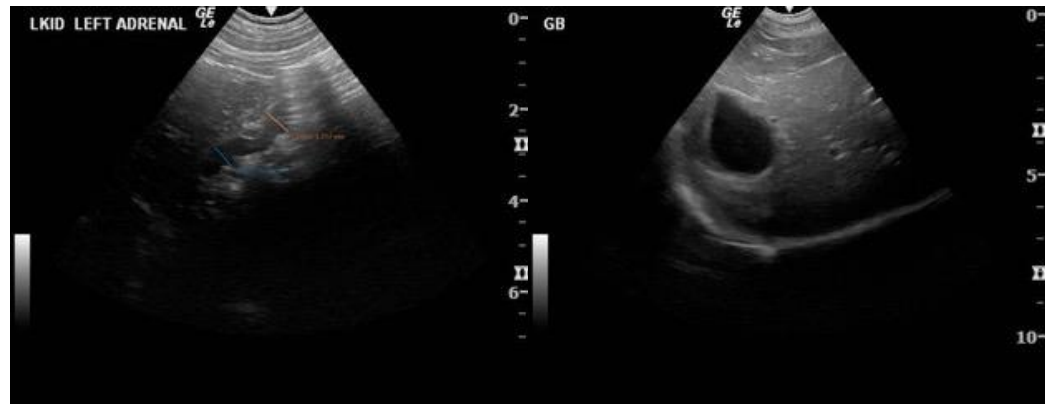
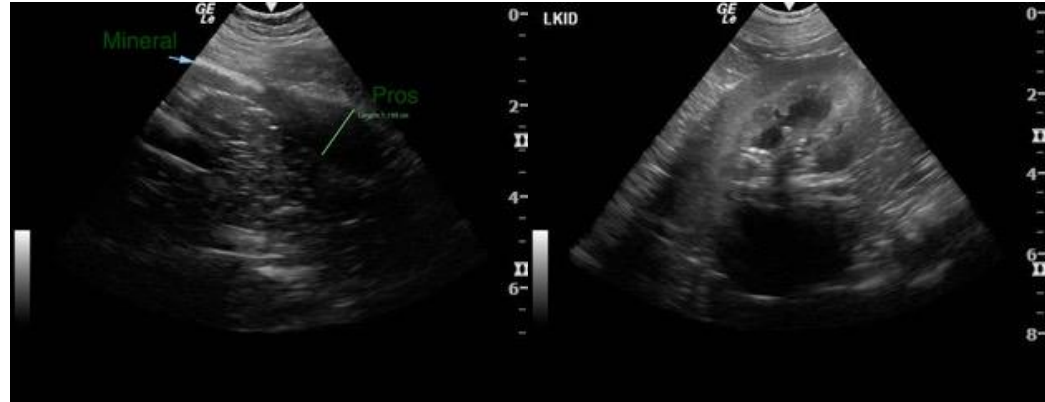
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SPECIES

Canine

BREED

Dalmation

SEX

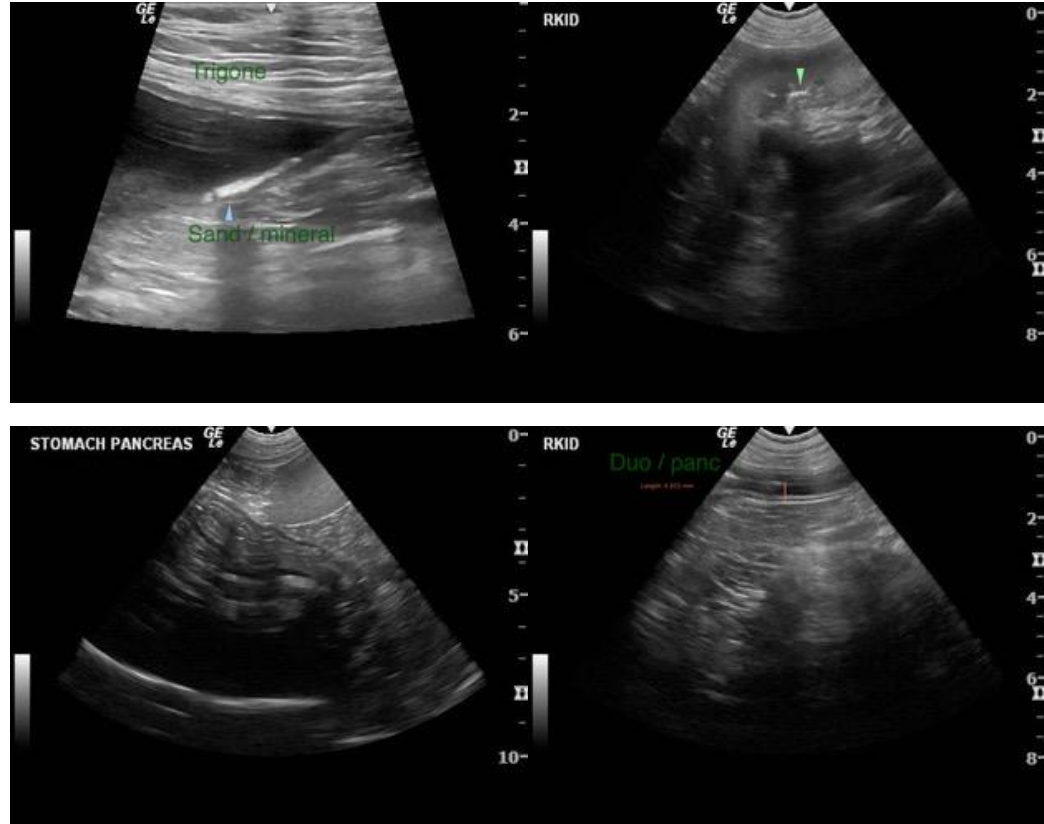
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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