



**PATIENT PRESENTING CLINICAL SIGNS**

Bayou Vandal  
History: Long Hx of GI inflammatory disease. Now more frequently. Anorexia. Lethargy. Increased GGT.

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine  
**Urinary System**

**BREED**  
Shih Tzu  
The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

**SEX**  
The residual prostate was free of pathology.

Neutered Male  
**AGE**  
10 Years  
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 5.4 cm in length. The right kidney measured 5.7 cm in length.

**Adrenal Glands**

**WEIGHT**  
11.7 kg  
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.55 cm width at the caudal pole and 0.46 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 0.56 cm width at the caudal pole and 0.47 cm width at the cranial pole.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dave Stasiuk, RDMS,  
RDMS

**HOSPITAL NAME**

Glamorgan AC

**REFERRING VET**

Dr. Kevin MacAuley

**Spleen**

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**

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.

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**Gastrointestinal**

**INVOICE**  
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The stomach presented intact wall layering with a normal wall layer ratio. Mild luminal gas was present with no evidence of retained ingesta, fluid or foreign material.

**DATE**  
1/5/23  
The small intestine presented intact wall layering with segmental to generalized propensity for mildly prominent intestinal mucosa layer, exhibiting discrete segmental nonspecific hyperechoic speckling. Prominent wall layering was noted in the ileum, extending into the ileocolic junction. No evidence of



**PATIENT**

Bayou Vandal

obstructive or neoplastic criteria at the level of the ileocolic junction. The ileum wall measured 0.26 cm. The duodenum wall measured 0.46 cm. The jejunum wall measured 0.33 cm.

The colon walls presented intact yet mild prominent wall layering with mild thickened to echogenic submucosa. The colon appeared to contain semi-formed fecal matter.

**SPECIES**

Canine

***Pancreas***

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

**BREED**

Shih Tzu

***Free Abdomen***

No evidence of overt or significant lymphadenopathy.

**SEX**

Neutered Male

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

10 Years

- Mild age-related kidneys
- Probable chronic inflammatory enteropathy/enterocolonopathy with subjective ileitis- suspect IBD
- Mild heterogenous pancreas- likely incidental, consistent with age/patient variant. Potential for low-grade/chronic pancreatitis is possible.
- Sonographically unremarkable liver/gallbladder

**WEIGHT**

11.7 kg

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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DVM, DABVP  
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A GI panel to include PLI/TLI/Cobalamin/Folate, given the subjective ileitis, as well as potential low grade or chronic pancreatitis, for further assessment is suggested. No overt evidence of gastroenterocolic neoplastic criteria or significant mural pathology. Overall, the gastroenterocolic presentation is most consistent with chronic inflammatory criteria. Empirical therapy for IBD, which may include a hydrolyzed diet trial, high colony count probiotic, +/- cobalamin supplementation pending assessment of cobalamin levels, if evidence of weight loss or diarrhea, with as needed gastrointestinal support, would be reasonable. Broad spectrum deworming is suggested even if fecal testing is negative. Upper and lower endoscopic biopsies are likely required for a definitive diagnosis.

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**SPECIES**

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**BREED**

Shih Tzu

**SEX**

Neutered Male

**AGE**

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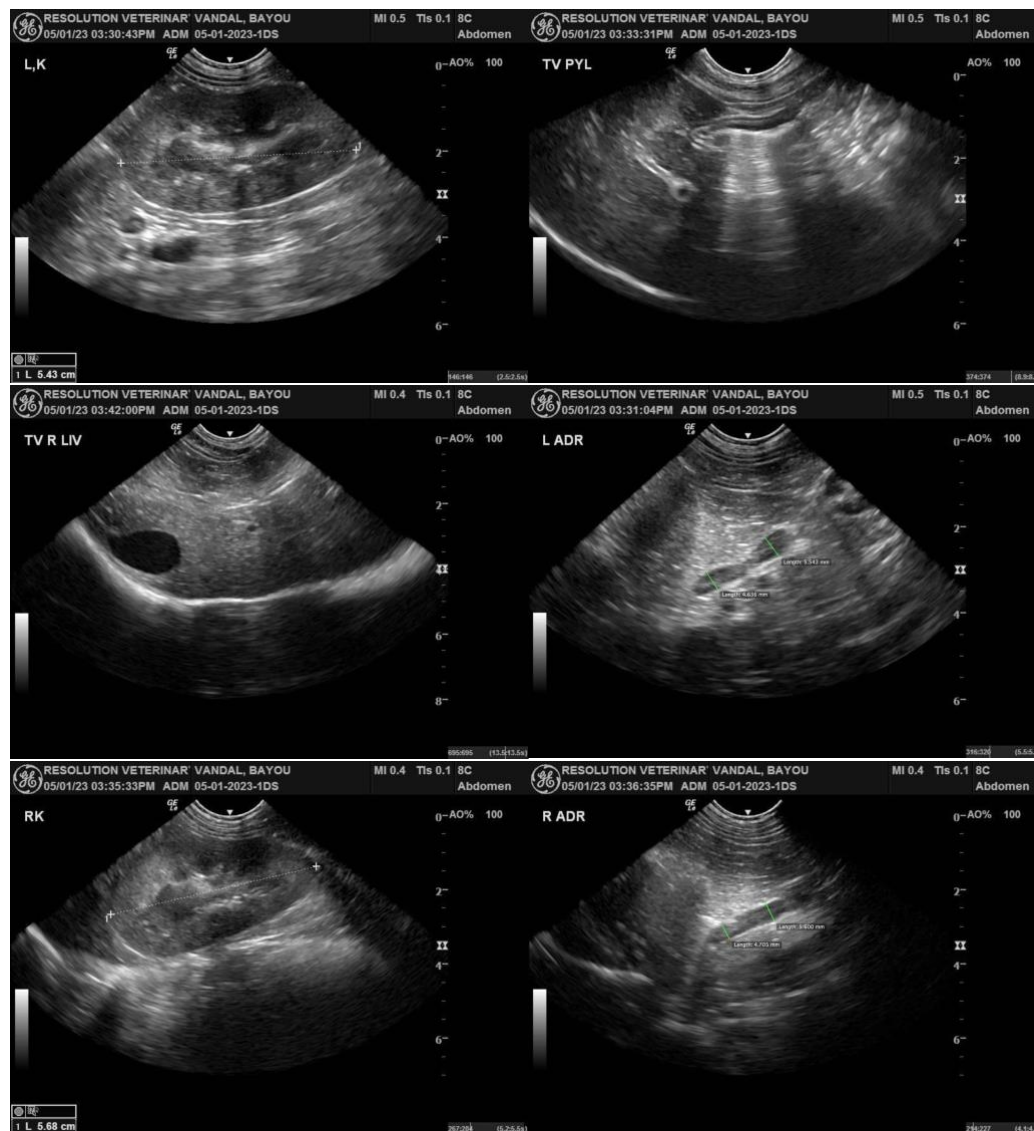
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**SPECIES**

Canine

**BREED**

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**SEX**

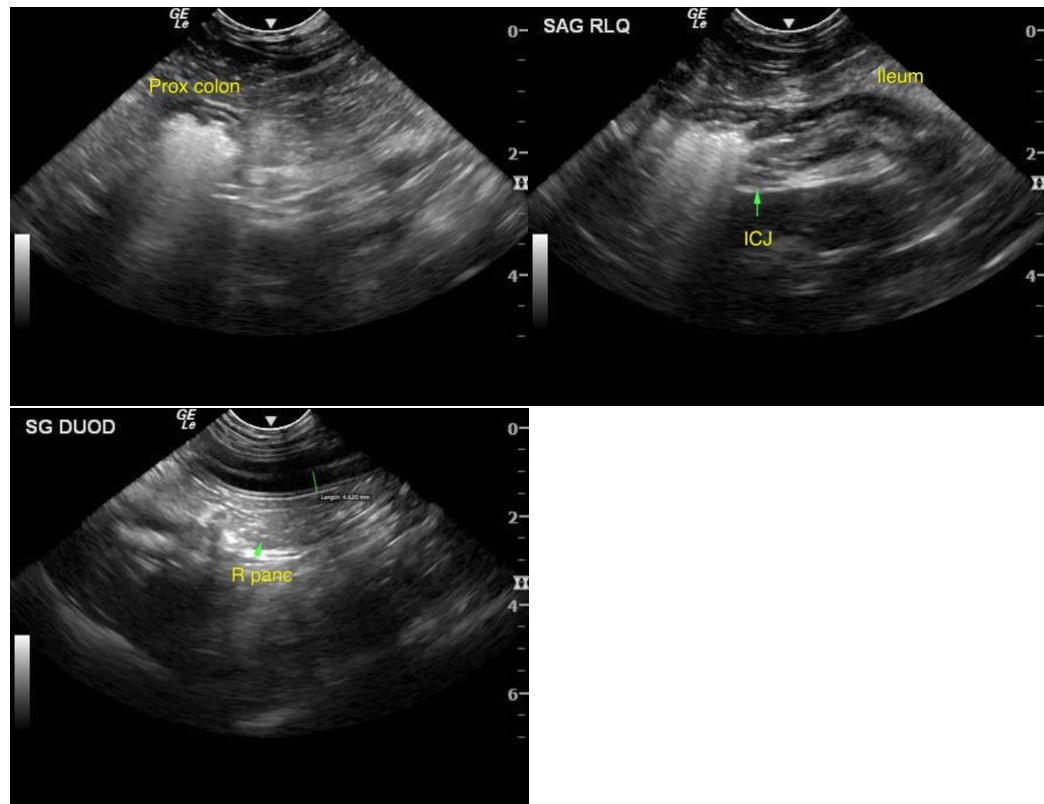
Neutered Male

**AGE**

10 Years

**WEIGHT**

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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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