



PATIENT	PRESENTING CLINICAL SIGNS
Daisy Mae Gamber	No known exposure to toxin. O reports possible seizure this am. Presented in shock with scant hemoabdomen
SPECIES	Abnormal PE/Chem/CBC/UA Results: GLU: 270, ALT; 645, Tbili: 1.1, Na: 151, CL: 115, K: 2.5, Na/K ratio: 60. RBC: 8.15, HCT: 58.6
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Lab Mix	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
FS	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 5.5 cm in length. The right kidney measured 6.2 cm in length.
AGE	The area of the aortic trifurcation was free of pathology.
2yr	The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy.
WEIGHT	Adrenal Glands
59lb	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.73 cm width at the caudal pole and 1.9 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.58 cm width at the caudal pole and 2.3 cm length.
INTERPRETED BY	Spleen
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	Liver/Gallbladder
Dr. Rodriguez	The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.
HOSPITAL NAME	INVOICE
Foxfield Veterinary Services	The gallbladder was non-distended in size. Mild anechoic content was present. The gallbladder wall was thickened in appearance consisting of an echogenic double rim corresponding to the inner and outer portions of the wall. The gallbladder wall measured up to 1.2 cm in width. This is consistent with gallbladder wall edema. Possible causes may include acute inflammation, edema and anaphylaxis. The cystic and common bile ducts were normal.
REFERRING VET	DATE
Dr. Rodriguez	01/07/2023



PATIENT

Gastrointestinal

Daisy Mae Gamber

The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with primarily anechoic fluid was present.

SPECIES

Canine

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental non-obstructive jejunal ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

BREED

Lab Mix

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

SEX

FS

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. Suspect pancreatic edema, potential for low-grade inflammation possible yet thought less likely.

Free Abdomen

AGE

2yr

Mild volume peritoneal free fluid was present. Mild cranial abdominal perihepatic to peripancreatic hyperechoic omentum was noted. Intermittent minor benign isoechoic mesenteric lymph nodes were present.

WEIGHT

59lb

Rapid view of the heart revealed evidence of decreased LV volume and suspect LV pseudohypertrophy likely secondary to decreased generalized vascular volume. No evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

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

- Acute hepatopathy with marked gallbladder wall edema
- Acute gastroenteritis pattern with non-obstructive ileus
- Heterogeneous pancreas-suspect mild pancreatic edema, potential for low-grade inflammation
- Mild volume peritoneal effusion and generalized cranial abdominal mild hyperechoic mesentery

IMAGING PERFORMED BY

Dr. Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Primary considerations for the hepatopathy and gallbladder wall edema may include acute hepatitis (viral, bacterial, leptospirosis, toxin) with concern for possible anaphylactic reaction given concurrent presence of mild peritoneal free fluid and in line with hemoconcentration and elevated ALT. Occult hepatic or hepatic /gastrointestinal infiltrative neoplasia may be considered a less likely differential diagnosis.

REFERRING VET

Dr. Rodriguez

Assuming normal clotting status and using a 25g needle, a liver FNA for screening cytology is warranted for further assessment. A leptospirosis titer/PCR is warranted. Hospitalization with IVF, plasma expanders, fresh frozen plasma if evidence of coagulopathy, empirical antibiotics and empirical therapy for anaphylaxis with close monitoring and assessment of clinical response is recommended.

INVOICE

12609ag

A guarded prognosis is indicated.

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01/07/2023



PATIENT

Daisy Mae Gamber

SPECIES

Canine

BREED

Lab Mix

SEX

FS

AGE

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HOSPITAL NAME

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REFERRING VET

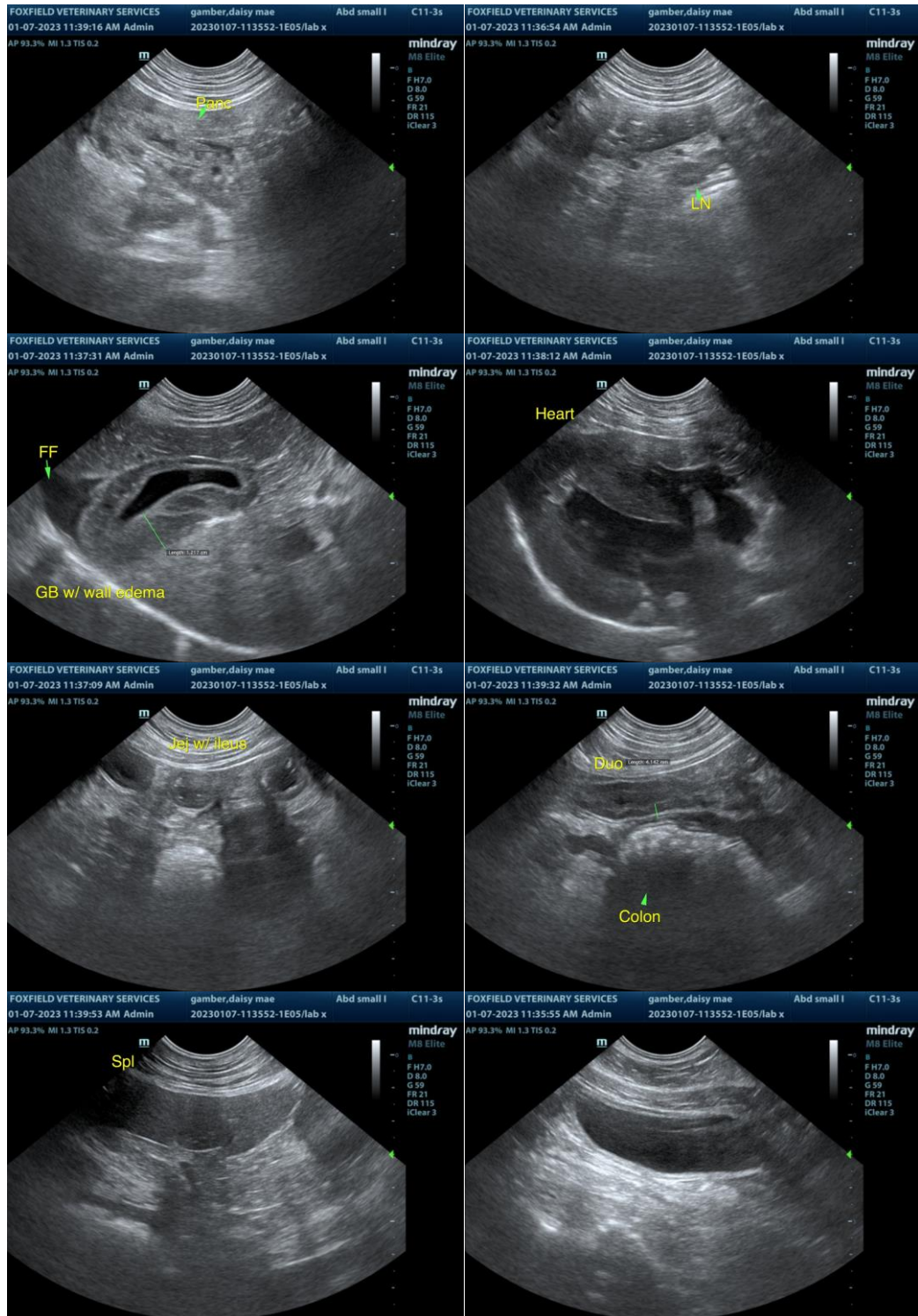
Dr. Rodriguez

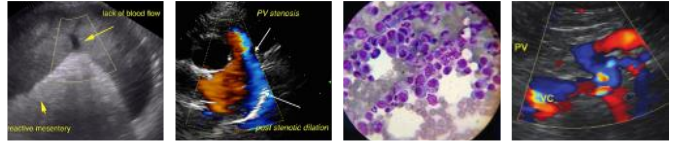
INVOICE

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SPECIES

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Lab Mix

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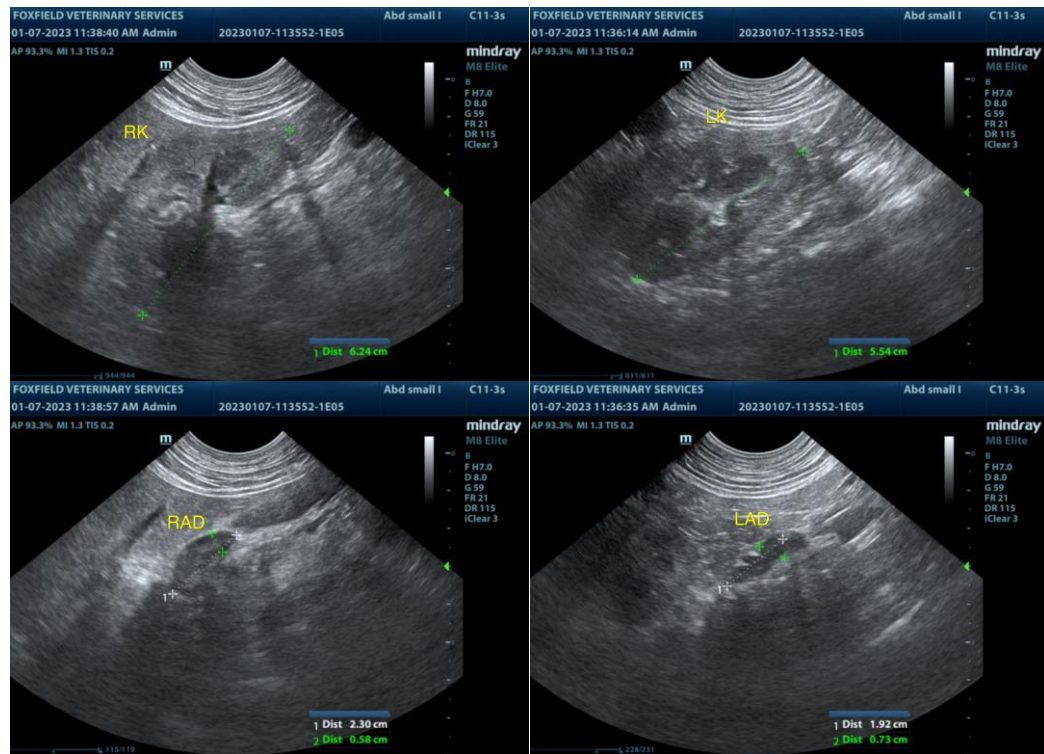
FS

AGE

2yr

WEIGHT

59lb



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.

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