SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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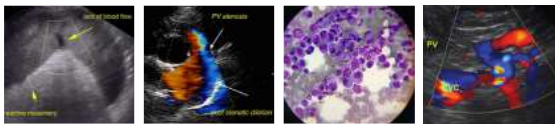


ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

PATIENT

Alixea Schoolcraft

SPECIES

Canine

BREED

Alaskan Malamute

SEX

FS

AGE

7 years

WEIGHT

78 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

South Willamet VC

REFERRING VET

Dr. Willaman

INVOICE

12392

DATE

10/11/21

PRESENTING CLINICAL SIGNS

Presented for PU/PD, intermittant diarrhea, 1-2 episodes vomiting.
Abnormal PE/Chem/CBC/UA Results: hyposthenuric urine, UCCR abnormal, abnormal dex supression

Unremarkable CBC/Chemistry Panel

LDDST Pre: 3.4, 4-hour: 3.2, 8-hour: 3.2

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.

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 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 pyelectasia or pyelonephritis. The left kidney measured 6.9 cm in length. The right kidney measured 7.0 cm in length.

Adrenal Glands

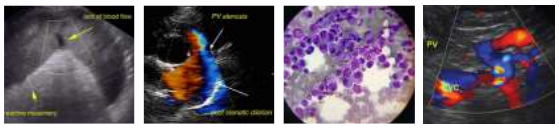
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.8 cm length x 0.61 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.3 cm length x 0.59 cm width at the caudal pole. No evidence of overt hyperplasia was noted. No adrenal tumors were present.

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/ Gallbladder

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



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normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild echogenic luminal debris. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, echogenic, nonshadowing ingesta most consistent with post prandial presentation without signs of ileus, obstruction or foreign material. The gastric body wall width measured 0.40 cm.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Segmental digesta / chyme was present. No evidence of a gastrointestinal obstructive pattern or foreign material was noted.

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

Pancreas

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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

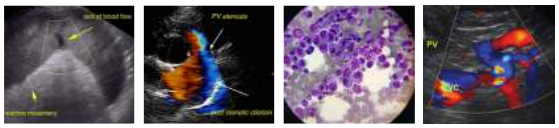
- Normal bilateral kidneys, no overt pyelonephritis
- Sonographically unremarkable bilateral adrenal glands without overt hyperplasia, no adrenal tumors
- Sonographically unremarkable liver - not sonographically consistent with steroid hepatopathy
- Possible mild gastroenteritis with mild gastric ingesta and segmental small bowel chyme

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, sonographically unremarkable abdomen without evidence of visceral pathology.

Although the LDDST was suggestive of hyperadrenocorticism, the bilateral adrenal glands, as well as the presentation of the liver was not overtly consistent with sonographic abnormalities typically seen with hyperadrenocorticism. Therefore, retesting is recommended prior to treatment. Further assessment, given the PU/PD, may include urine C/S and baseline UPC on a sterile urine sample, and Leptospirosis titer/PCR.

Hepatic functionality is assumed to be normal, given the normal overall liver presentation, as well as normal glucose, BUN, and albumin levels.



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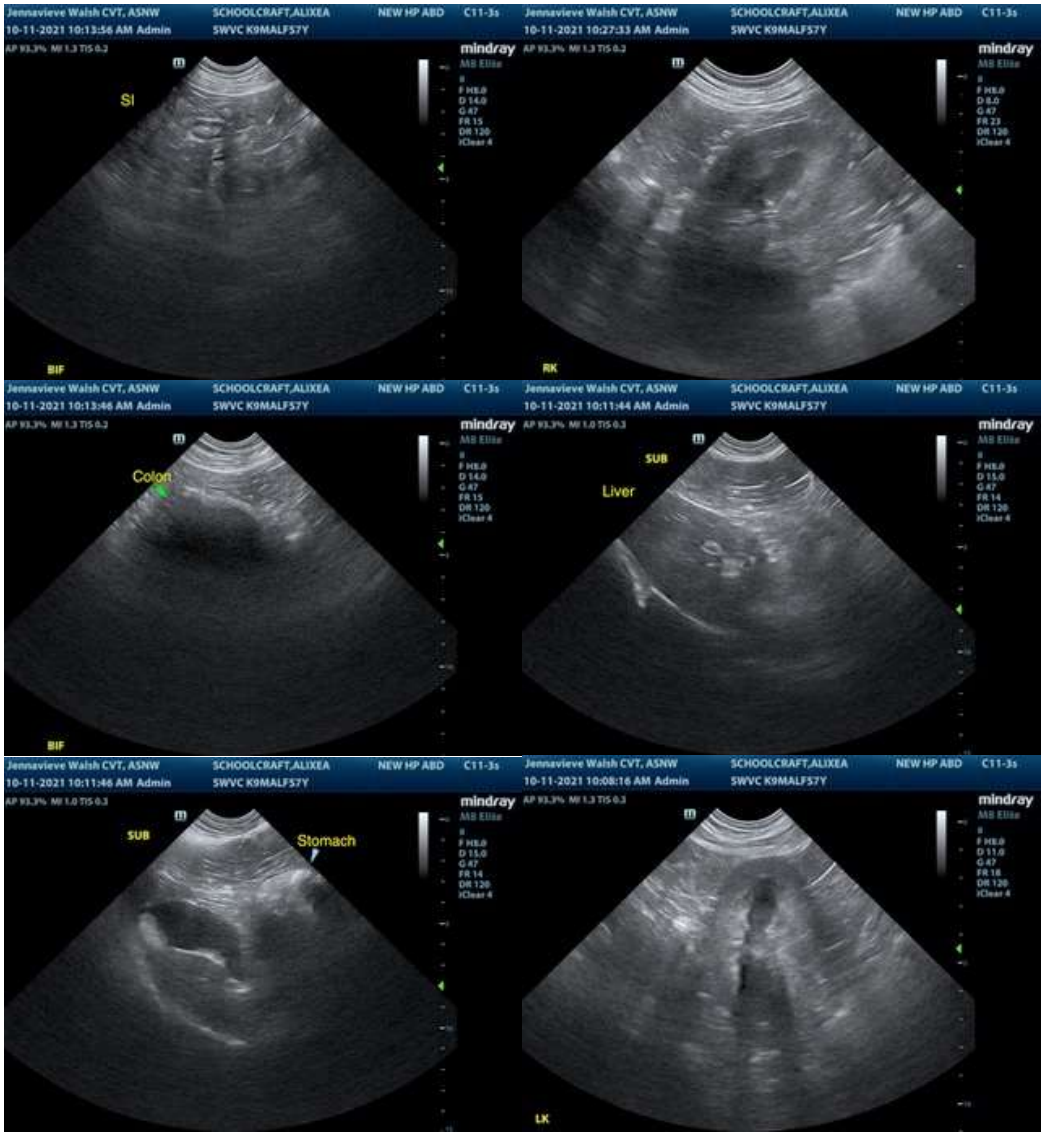
For an additional charge, internal medicine consult can be utilized through Sonopath.com. You can select the internal medicine drop down at http://spa.sonopath.com/.

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services



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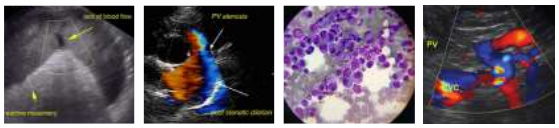

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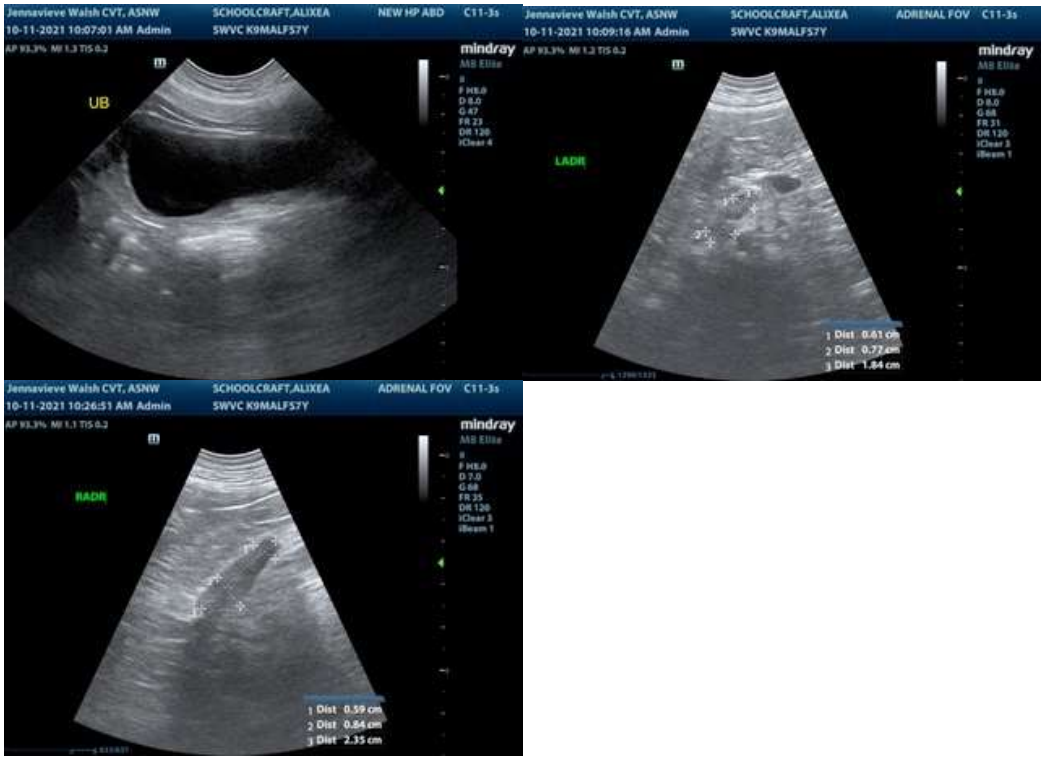

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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