



PATIENT

Jackie Silberman

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Neutered Male

AGE

Aprox. 18 years

WEIGHT

13.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Jack Russell Terrier

REFERRING VET

Dr. Barbara Brasted-
Maki

INVOICE

12390

DATE

10/11/21

PRESENTING CLINICAL SIGNS

Presented due to signs of vestibular disease 10-6-21. Owner also mentioned that he had had a grand mal seizure about a month prior. Exam showed left head tilt, WB ataxia, circling to left. CP was found to be slightly delayed LH; otherwise presentation was typical for "old dog vestibular syndrome". Exam was otherwise unremarkable given patient's advanced age. Current Medications Glucosamine, Trazodone for procedure.

Abnormal PE/Chem/CBC/UA Results: Senior screen: CBC: Hct (34.4), RBC (4.71), and Hgb (11.6) all slightly low Chem: ALT is 541, slightly lower than last Dec (696). ALP is elevated at 360, slightly higher than last Dec (263). GGT (25) is also elevated. Urine is dilute (SG 1.016) with inactive sediment. T4 is normal at 1.4

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 residual prostate was normal in appearance and size measuring 0.85 cm in diameter.

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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Both kidneys exhibited mild pyelectasia. No evidence of concurrent left or right ureter dilation was noted. The left kidney measured 4.3 cm in length. The right kidney measured 4.0 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.56 cm width in the cranial pole and 0.67 cm width in the caudal pole. The right adrenal gland measured 0.36 cm width in the cranial pole and 0.33 cm width in the caudal pole.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. A solitary, echogenic, non-expansive nodule was present, measuring 0.54 cm in diameter. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.



PATIENT

Jackie Silberman

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Neutered Male

AGE

Aprox. 18 years

WEIGHT

13.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Jack Russell Terrier

REFERRING VET

Dr. Barbara Brasted-
Maki

INVOICE

12390

DATE

10/11/21

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder 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 was empty with no signs of ileus, obstruction, or foreign material.

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.

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

- Bilateral mild chronic renal changes with mild pyelectasia
- Benign splenic nodule- consistent with probable myelolipoma
- Hepatopathy with mild parenchymal remodeling - subjectively benign
- Mild gallbladder debris (non-mucocele)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pyelectasia in both kidneys may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Further renal staging to include urine C/S and baseline UPC on a sterile urine sample is recommended.

Hepatic functionality is likely normal assuming normal albumin, glucose, cholesterol, and BUN levels. However, fasting and postprandial bile acids may be considered to assess hepatic functionality, given the neurological signs. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.



PATIENT

Jackie Silberman

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Neutered Male

AGE

Approx. 18 years

WEIGHT

13.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Jack Russell Terrier

REFERRING VET

Dr. Barbara Brasted-
Maki

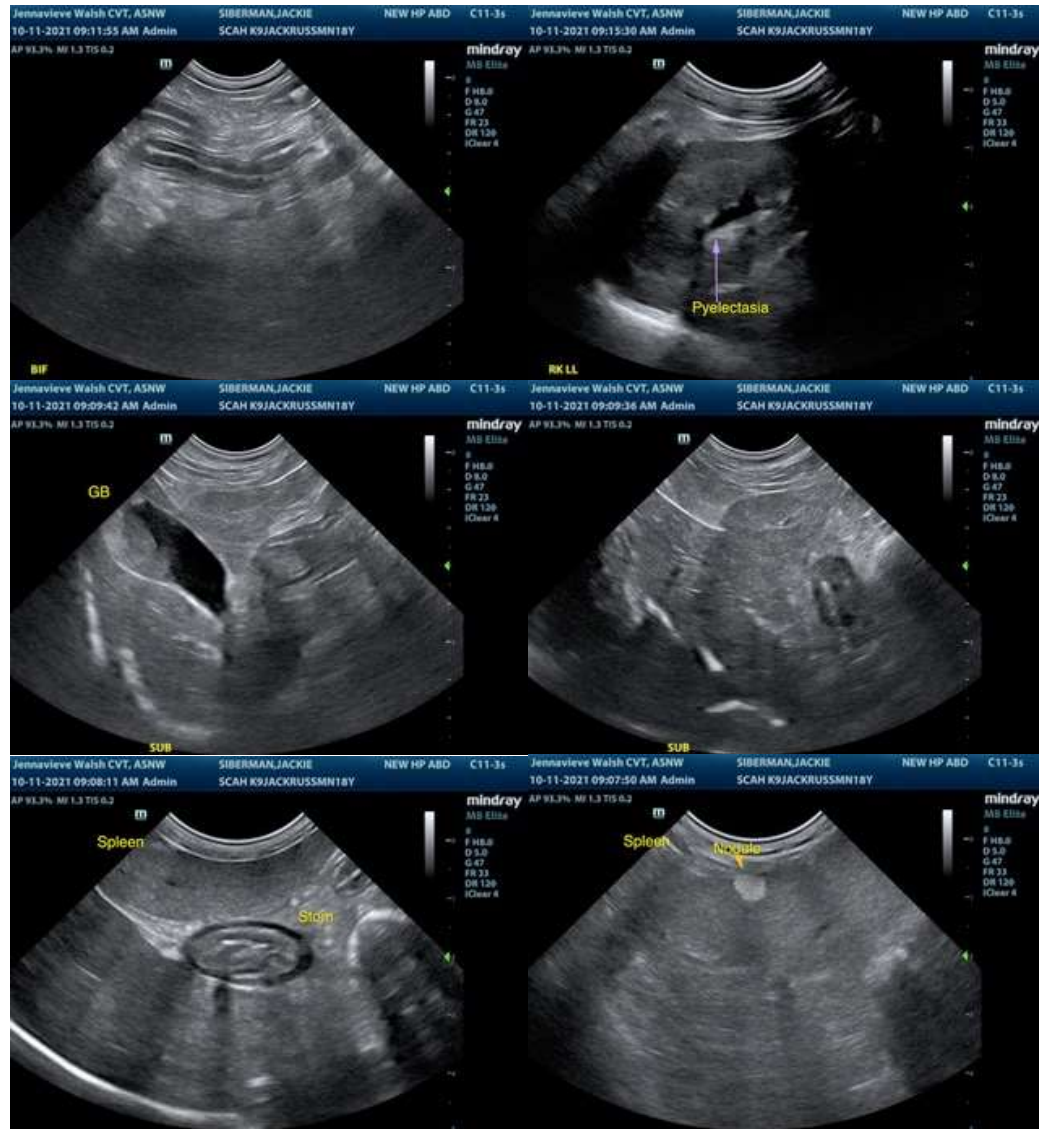
INVOICE

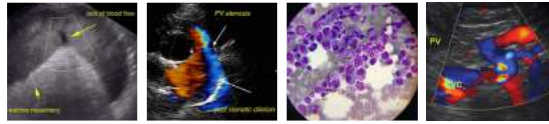
12390

DATE

10/11/21

Overall, largely geriatric abdomen without evidence of significant visceral pathology as an obvious cause of the neurological signs.





PATIENT

Jackie Silberman

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Neutered Male

AGE

Aprox. 18 years

WEIGHT

13.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Jack Russell Terrier

REFERRING VET

Dr. Barbara Brasted-
Maki

INVOICE

12390

DATE

10/11/21



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