



PATIENT

Zoe Ferraro

PRESENTING CLINICAL SIGNS

Neurological symptoms. Lyme positive.
Abnormal PE/Chem/CBC/UA Results: ALKP 656, EOS 0.01

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Lab/St. Bern X

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.

SEX

Spayed Female

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 8.3 cm. The right kidney measured 8.9 cm. No evidence of left or right retroperitonitis.

AGE

11 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

Not Provided

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.2 cm length x 0.56 cm at the caudal pole. The right adrenal gland measured 3.1 cm length x 0.61 cm at the caudal pole.

Spleen

INTERPRETED BY

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

Jessica Miller

Liver

HOSPITAL NAME

Animal General

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. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Dr. Castimore

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.

INVOICE

26199

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.

DATE

10/11/21



PATIENT

Pancreas

Zoe Ferraro

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 was evident.

SPECIES

Canine

Free Abdomen

No intraabdominal masses, lymphadenopathy or peritoneal effusion.

BREED

Lab/St. Bern X

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

SEX

Spayed Female

- Mild vacuolar hepatopathy pattern
- Mild age related kidneys
- Minor gallbladder debris

ULTRASONOGRAPHIC FINDINGS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

11 Years

Largely geriatric abdomen without evidence of significant visceral pathology. An obvious cause of the patient's neurological symptoms was not definitively apparent within the abdominal cavity. Baseline UPC and monitoring for evidence of proteinuria is suggested. The presence of gastric ingesta is nonspecific and likely indicates post-prandial presentation. Correlation with most recent meal ingestion is recommended. If documented NPO prior to the ultrasound, the presence of gastric ingesta may indicate some degree of gastric hypomotility or metabolic stasis. The sonographic presentation of the ingesta was most consistent with food, without evidence of foreign material. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial. Doxycycline trial could be considered if clinically indicated.

WEIGHT

Not Provided

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DVM, DABVP
(Canine and Feline)



IMAGING PERFORMED BY

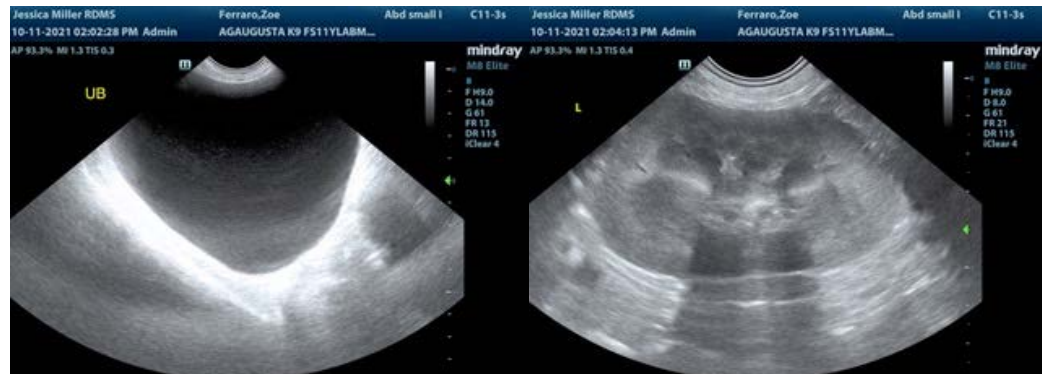
Jessica Miller

HOSPITAL NAME

Animal General

REFERRING VET

Dr. Castimore



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SPECIES

Canine

BREED

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SEX

Spayed Female

AGE

11 Years

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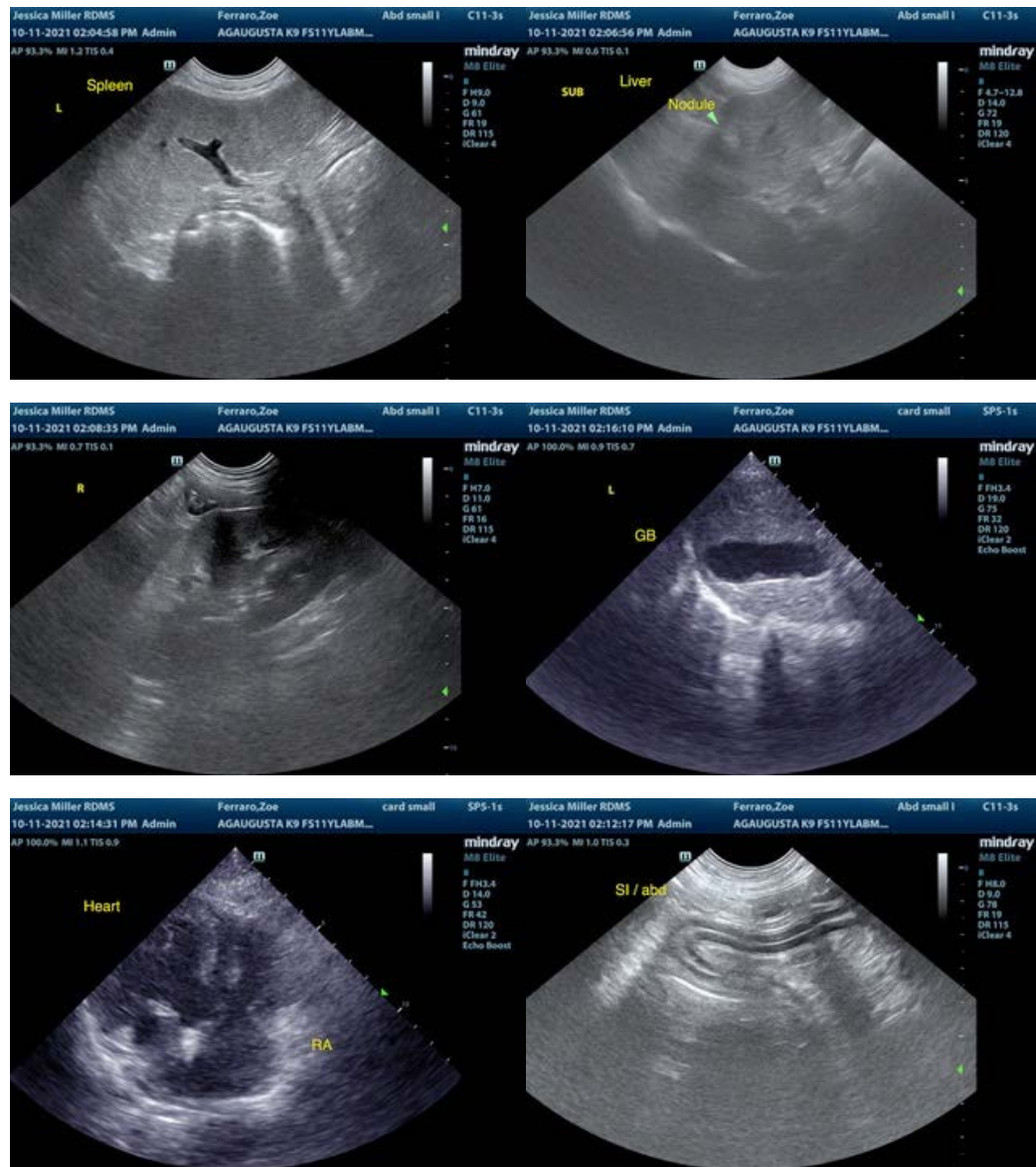
Dr. Castimore

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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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