



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Piper Rogers
History: Last exam 9/18/22: moderate tartar accumulation and gingivitis, otherwise everything within normal limits History of exocrine pancreatic insufficiency--clinical signs controlled on current regimen (bland diet, pancreatic powder, and B12 oral supplements)

SPECIES

SPECIES Canine
Abnormal PE/Chem/CBC/UA Results: ALT 179 (12-118) on labs 10/7/22; ALT 129 on 1/24/22 Otherwise both labs unremarkable Current Medications B12 tablets, pancreatic powder, Revolution for Dogs monthly

BREED

Terrier Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX Urinary System

SEX Spayed Female
The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.

AGE

7 Years

WEIGHT

27 Pounds

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 6.2 cm in length. The right kidney measured 4.5 cm in length, although potential underestimation of renal size is possible.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.1 cm in length x 0.58 cm width at the caudal pole.

IMAGING PERFORMED BY

Sara Hansen

The right adrenal gland was indistinctly visualized yet without overt pathology, subjectively measuring 0.52 cm at the caudal pole.

Spleen

HOSPITAL NAME

VCA Salem AH

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.

REFERRING VET

Dr. Reed

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. Normal hepatic volume was noted. No overt evidence of a portosystemic vascular anomaly.

INVOICE

17679

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

DATE

10/13/22

Gastrointestinal



PATIENT

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.

Piper Rogers

SPECIES

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.

Canine

Normal visible colon wall layers were present with formed to semi formed fecal matter in lumen.

BREED

Pancreas

Terrier Mix

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.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

- Low grade hepatopathy- benign
- Sonographically unremarkable pancreas
- Sonographically normal gastrointestinal tract

7 Years

WEIGHT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

27 Pounds

Although nonspecific, the hepatic presentation, in combination with mild ALT elevation, may suggest mild reactive or inflammatory hepatopathy without evidence of significant pancreatic structural pathology. Assuming normal clotting status, screening hepatic FNA cytology could be considered, primarily to assess for evidence of inflammatory cells. Hepatosupportive medications, including Denamarin may prove beneficial.

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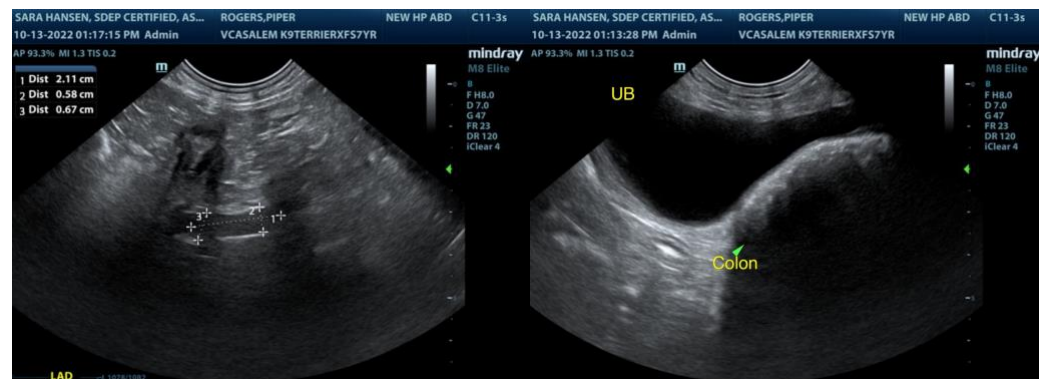
Dr. Reed

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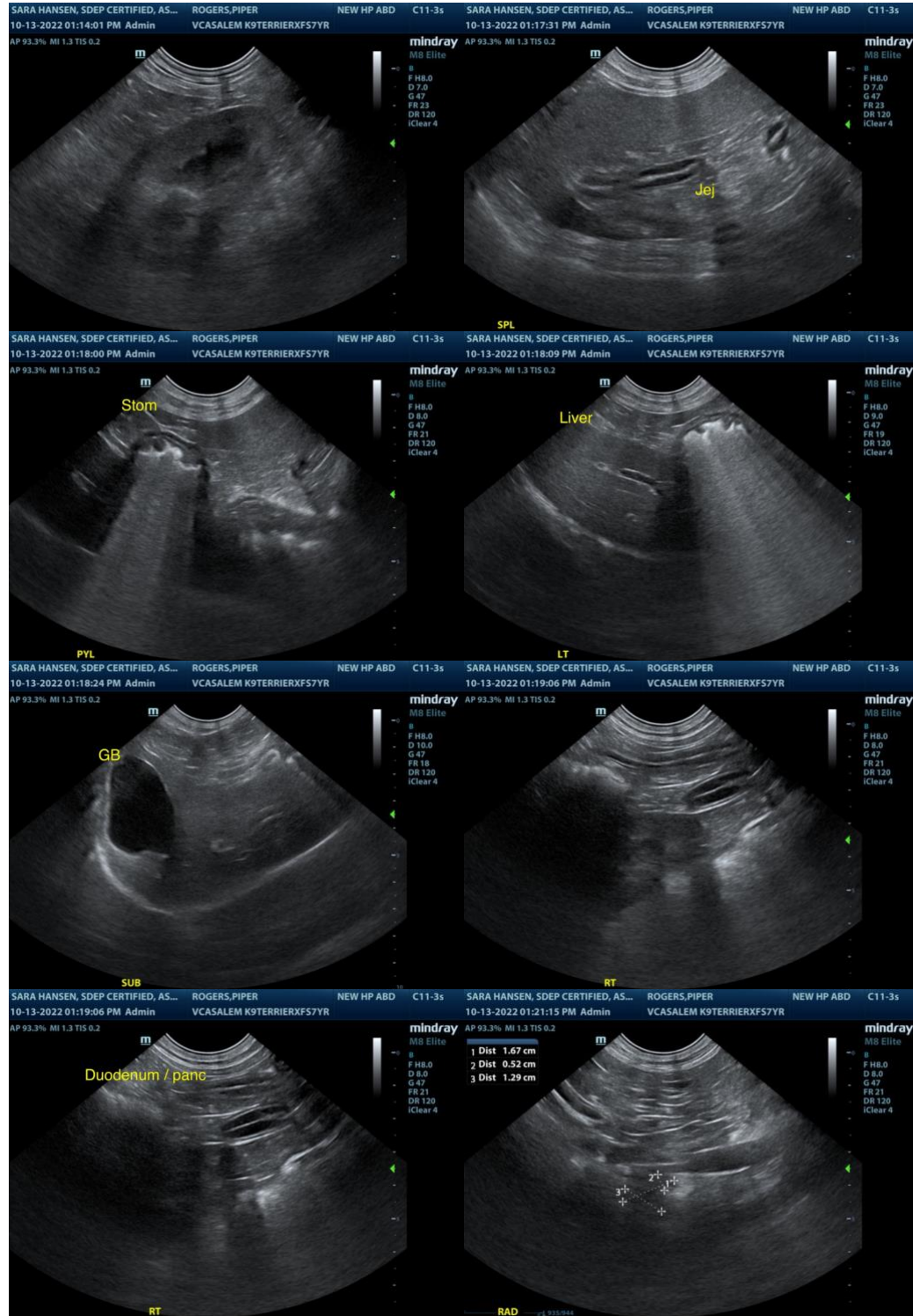
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not



PATIENT visible in the image/video clips provided.

Piper Rogers 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.

SPECIES

Canine

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
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