

PATIENT

PRESENTING CLINICAL SIGNS

Ronnie Lusardi

low wbc and platelets in the past. WBC's normal now, platelets still low, 19K. Liver looks enlarged. ALT 747. 4 dx neg. t bil 0.2. u/a sp grav

SPECIES

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

Irish Setter

SEX

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 8.0 cm in length. The right kidney measured 7.5 cm in length.

MN

AGE

The area of the aortic trifurcation was free of pathology.

7

The area of the residual prostate appeared normal and free of pathology

WEIGHT

Adrenal Glands

70

The left adrenal gland was subnormal. The left adrenal gland measured 0.47 cm width at the caudal pole and 0.45 cm width at the cranial pole.

INTERPRETED BY

The right adrenal gland was not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands measuring 0.72 cm in width at the caudal pole.

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

Spleen

IMAGING PERFORMED BY

The spleen exhibited overall normal size with areas of mild medial capsule asymmetry. Subtle parenchyma heterogeneity was present with a solitary nondisruptive discrete hypoechoic nodule in the cranial spleen measuring 0.66 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. No splenic masses.

Dr. Hunt

Liver

HOSPITAL NAME

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.

Bayshore Veterinary
Hospital

REFERRING VET

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

Dr. Hunt

Gastrointestinal

INVOICE

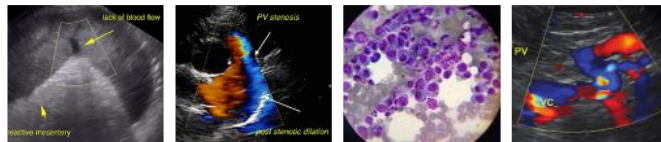
The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild gastric ingesta exhibiting subtle progressive distal acoustic shadowing with no signs of ileus, obstruction or foreign material.

11881ag

DATE

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.

10/15/2022



PATIENT

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

Ronnie Lusardi

Pancreas

SPECIES

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.

Canine

Free Abdomen

BREED

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

Irish Setter

ULTRASONOGRAPHIC FINDINGS

SEX

- Benign hepatopathy
- Sonographically unremarkable gallbladder
- Solitary discrete splenic nodule-subjectively benign, likely focal lymphoid hyperplasia, hematopoiesis, neoplastic criteria less likely

MN

AGE

Secondary

7

- Mild gastric ingesta-likely post prandial presentation

WEIGHT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

70

Considerations for the liver may include metabolic/reactive/vacuolar hepatopathy, inflammatory/immune mediated disease, toxic hepatopathy i.e. copper or other hepatopathy without evidence of neoplastic hepatic criteria. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered primarily to assess for presence of inflammatory cells however cytology may be suppressed given current prednisone therapy. A leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Hunt

An obvious intra-abdominal cause of the thrombocytopenia was not evident. Hepatosupportive medications such as Denamarin or Vitamin E +/- Ursodiol due to its antioxidant and immunomodulatory effects within the liver would be warranted, although these medications may not result in decreased hepatic enzyme levels.

HOSPITAL NAME

Bayshore Veterinary
Hospital

REFERRING VET

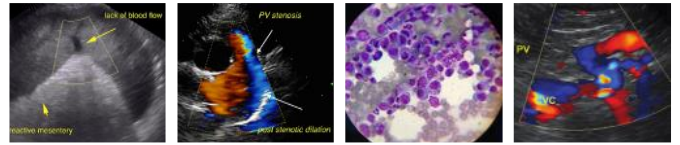
Dr. Hunt

INVOICE

11881ag

DATE

10/15/2022



PATIENT

Ronnie Lusardi

SPECIES

Canine

BREED

Irish Setter

SEX

MN

AGE

7

WEIGHT

70

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Hunt

HOSPITAL NAME

Bayshore Veterinary
Hospital

REFERRING VET

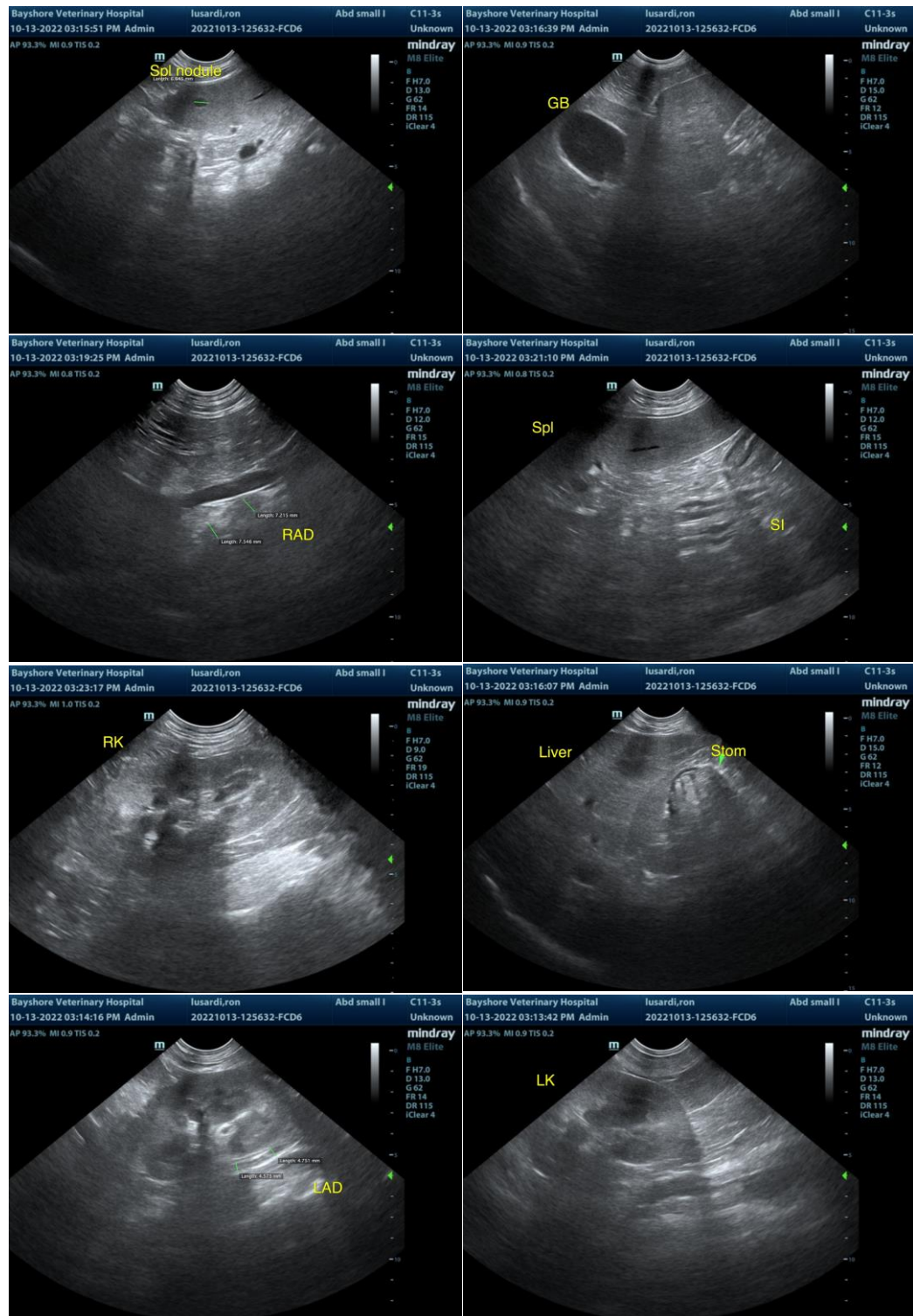
Dr. Hunt

INVOICE

11881ag

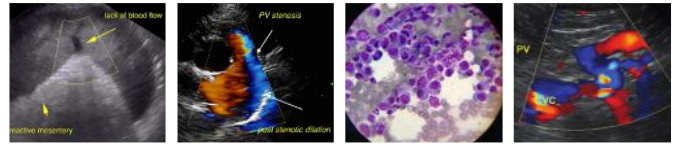
DATE

10/15/2022



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



PATIENT

Ronnie Lusardi

can be of any further assistance please contact me.

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

info@SonoPath.com

SPECIES

Canine

BREED

Irish Setter

SEX

MN

AGE

7

WEIGHT

70

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Hunt

HOSPITAL NAME

Bayshore Veterinary
Hospital

REFERRING VET

Dr. Hunt

INVOICE

11881ag

DATE

10/15/2022