



PATIENT	PRESENTING CLINICAL SIGNS
Kahlua Pritchett	-Weight loss of unknown origin, ongoing for a few months. Bloodwork and rads WNL
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	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.
Chihuahua	
SEX	The area of the aortic trifurcation was free of pathology.
Spayed Female	
AGE	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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.3 cm in length. The right kidney measured 4.5 cm in length.
12 years	
WEIGHT	Adrenal Glands
12.3 lbs.	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.0 cm length x 0.48 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 0.47 cm width at the caudal pole.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.
IMAGING PERFORMED BY	Liver/ Gallbladder
Jessica Miller	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 normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
Banfield 0748	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 gastric body wall width measured 0.30 cm.
REFERRING VET	
Dr. Baker	
INVOICE	
12369	
DATE	
10/18/21	



PATIENT	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. The jejunum wall width measured 0.25 cm.
Kahlua Pritchett	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Canine	Pancreas
BREED	The left pancreatic limb was mildly prominent in size, maintained symmetrical capsule contour with subtle heterogeneous to hypoechoic parenchyma compared to adjacent, nonreactive peripancreatic omentum.
Chihuahua	
SEX	Free Abdomen
Spayed Female	No omental masses, lymphadenopathy, or peritoneal effusion were present.
AGE	ULTRASONOGRAPHIC FINDINGS
12 years	Primary Findings
WEIGHT	<ul style="list-style-type: none">Mildly prominent to hypoechoic left pancreasMild age-related kidneysSonographically unremarkable gastrointestinal tract
12.3 lbs.	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Overall, no overt evidence of significant visceral pathology was noted.
IMAGING PERFORMED BY	The mildly prominent to hypoechoic pancreas was nonspecific and may indicate patient variant or age-related pancreatic changes, while the possibility of low-grade chronic to chronic active inflammation may be possible.
Jessica Miller	Assessment for evidence of cranial abdominal / subxiphoid discomfort on palpation and correlation with a GI panel to include PLI/TLI/Cobalamin/Folate, given the patient's weight loss, is recommended. Three view chest radiographs, if not done, are recommended to rule out occult thoracic pathology as a potential cause of the weight loss. Assessment of caloric plane may be indicated.
HOSPITAL NAME	
Banfield 0748	
REFERRING VET	Aside from potential mild chronic to chronic active pancreatitis, an obvious cause of the patient's weight loss was not definitively evident.
Dr. Baker	
INVOICE	
12369	
DATE	
10/18/21	



PATIENT

Kahlua Pritchett

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 years

WEIGHT

12.3 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Banfield 0748

REFERRING VET

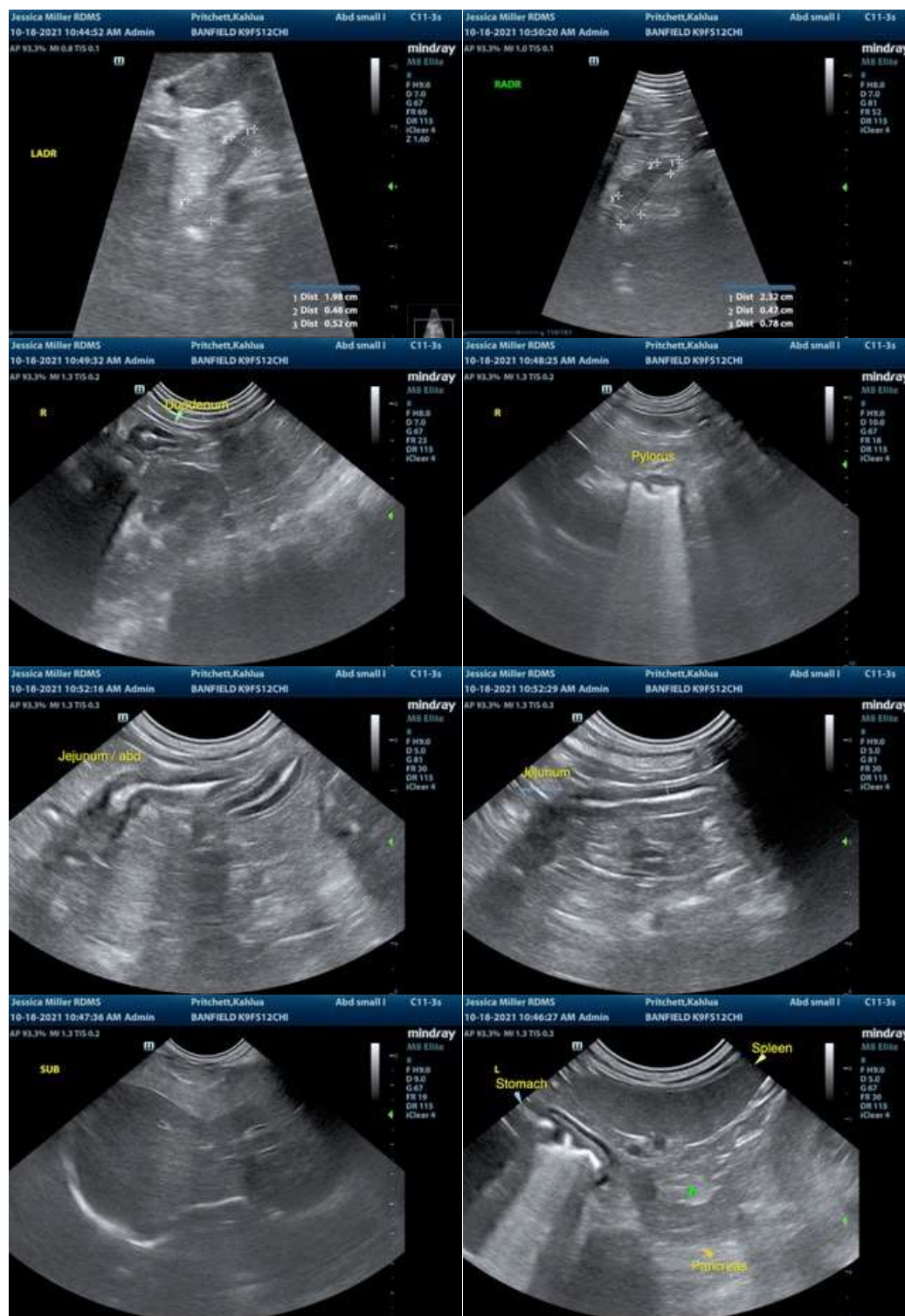
Dr. Baker

INVOICE

12369

DATE

10/18/21





PATIENT

Kahlua Pritchett

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

12 years

WEIGHT

12.3 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jessica Miller

HOSPITAL NAME

Banfield 0748

REFERRING VET

Dr. Baker

INVOICE

12369

DATE

10/18/21



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