

PATIENT

Hershey Park

SPECIES

Canine

BREED

Cairn Terrier

SEX

MN

AGE

15 Years

WEIGHT

11.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Kim

HOSPITAL NAME

Ridgefield Park Animal
Hospital

REFERRING VET

Dr. Kim

INVOICE

47629

DATE

10-2-21

PRESENTING CLINICAL SIGNS

Patient has had blood diarrhea for about two or three days and has not been eating or drinking water. Did in-house renal panel and cPL test; resulted in abnormal levels for both. Main concern is not mild pancreatitis, but to look for kidney damage and issues.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.78 cm in width.

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination was 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. Small cortical cysts were present in both kidneys. Mild pyelectasia is present in the left kidney. The left kidney measured 4.2 cm in length. The right kidney measured 4.2 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.4 cm length x 0.53 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 1.5 cm length x 0.4 cm width at the caudal pole.

Spleen

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.

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. Intermittent non-expansive subtly hypoechoic nodules present in the liver.

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

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 gastric body wall width measured 0.44 cm.



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The small intestine presented intact wall layering and primarily maintained 1:3 muscularis/mucosa ratio with minor duodenojejunal mucosal speckling. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material. The jejunum wall width measured 0.30 cm.

SPECIES

Canine

The colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. The colon was primarily empty with minor non-formed feces and luminal gas. The descending colon wall measured 0.28 cm in width.

Pancreas

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The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

SEX

No overt lymphadenopathy or peritoneal effusion was present.

MN

ULTRASONOGRAPHIC FINDINGS

AGE

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- Bilateral chronic renal changes with mild left kidney pyelectasia.
- Intermittent subtle hepatic nodules - subjectively benign, likely subtle areas of nodular to regenerative hyperplasia, hematopoiesis, or small lipogranulomas.
- Mildly heterogeneous pancreas - age related or reactive pancreatic changes, potential for low grade or chronic inflammation which may present essentially sonographically normal possible.
- Enterocolitis.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The pyelectasia within the left kidney may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein:creatinine ratio on sterile urine sample is recommended.

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The overall appearance of the kidneys was consistent with chronic changes. No overt evidence of acute or end stage nephropathy. However, continued monitoring of renal parameters, assuming normal hydration, recommended.

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Hospitalization with 24-48 hour IV fluid support and medical therapy for enterocolitis or HGE should prove beneficial. Potential for more chronic inflammatory enterocolonopathy may be considered if persistent or recurrent gastrointestinal signs.

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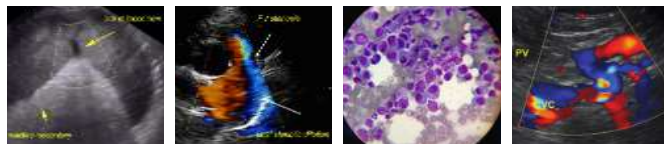
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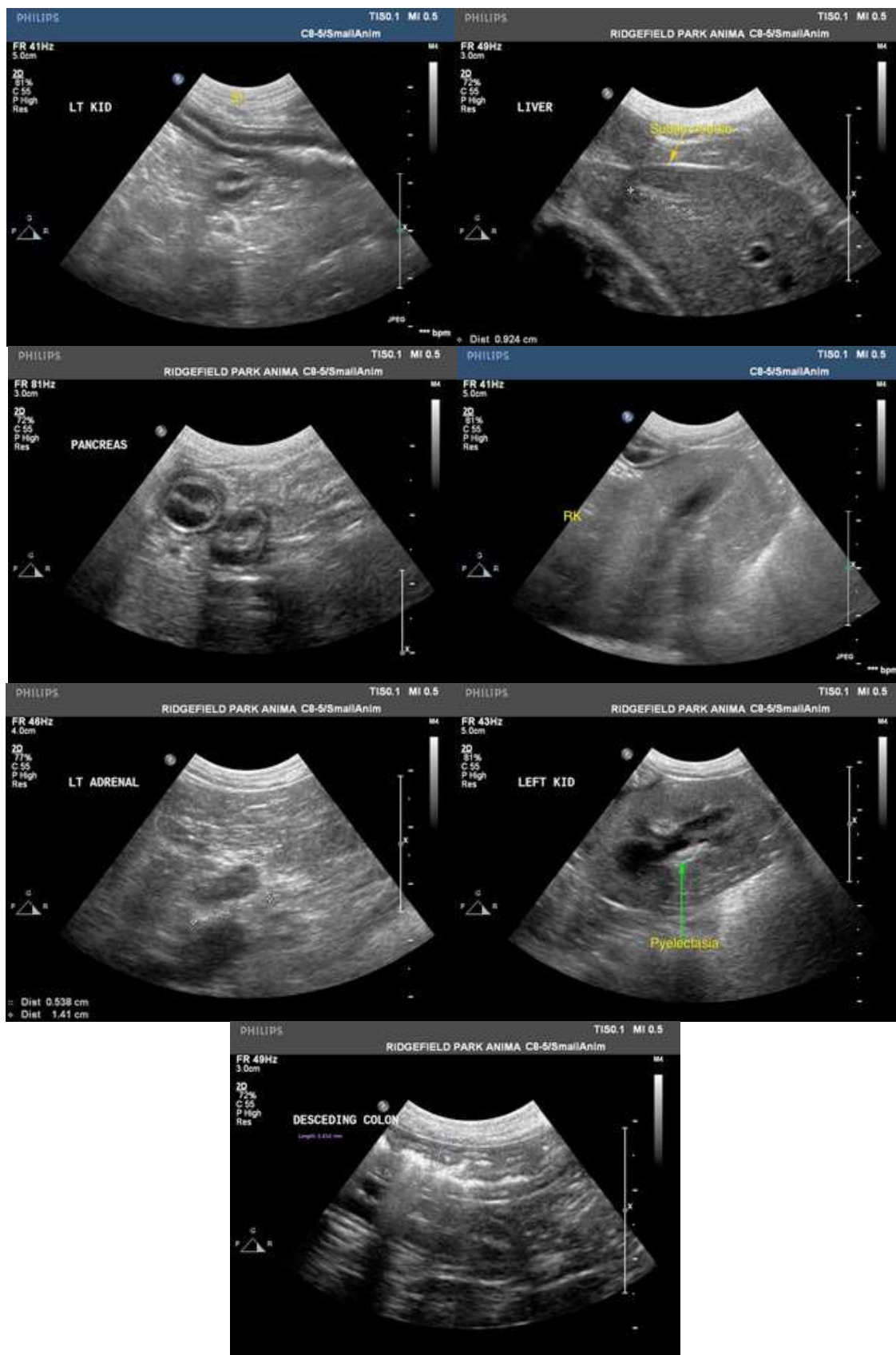
Dr. Kim

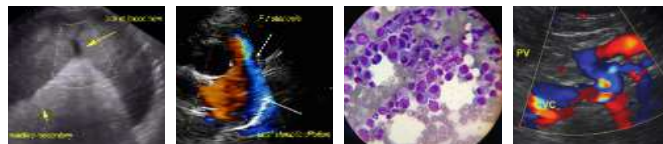
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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