



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Banks Katzenberger	was parvo positive, isospora positive diarrhea and lethargy
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	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.
Golden Retriever	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 5.3 cm. The right kidney measured 5.4 cm.
<b>SEX</b>	<b>Adrenal Glands</b>
Male	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.7 cm length x 0.39 cm at the caudal pole. No overt pathology in the area of the right adrenal gland.
<b>AGE</b>	<b>Spleen</b>
10 Weeks	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.
<b>WEIGHT</b>	<b>Liver</b>
9.2 Pounds	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.
<b>INTERPRETED BY</b>	<b>Gastrointestinal</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The stomach presented intact yet subjective prominent wall layering owing to prominent mucosa. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.
<b>IMAGING PERFORMED BY</b>	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Segmental gas and subtle non-obstructive ileus were present.
Jenn	The colon walls presented intact yet mildly prominent wall layering with generalized mild thickened to echogenic submucosa. Segmental non-formed feces and colonic gas was present. No overt evidence of gastrointestinal mechanical obstruction or foreign material or structural pathology such as intussusception.
<b>HOSPITAL NAME</b>	<b>Pancreas</b>
Rockaway AH	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.
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
26684	
<b>DATE</b>	
10/27/21	



**PATIENT**

**Free Abdomen**

Banks Katzenberger

Focal, mildly prominent to enlarged mid abdominal mesenteric nodes were present. Example measured 3.2 cm x 0.9 cm. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

**SPECIES**

Canine

Small pockets of scant, likely incidental free fluid were noted.

**BREED**

Golden Retriever

Subtle reactive peri intestinal and pericolic mesentery was present.

**ULTRASONOGRAPHIC FINDINGS**

- Gastroenterocolitis
- Intermittent benign mesenteric lymph nodes - reactive hyperplasia or immunologic immaturity likely.

**SEX**

Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

10 Weeks

Broad-spectrum deworming (i.e., Panacur 50 mg/kg PO SID for 5 consecutive days with potential repeat protocol in 3 weeks +/- Albon given the positive isospora) recommended as well as as-needed continued gastrointestinal support. No overt evidence of significant gastrointestinal structural pathology present. If continued gastrointestinal signs (specifically diarrhea) without evidence of parasitism, recheck sonogram could be considered to assess for progressive gastroenterocolic inflammatory pattern or other non-obvious structural pathology.

**WEIGHT**

9.2 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

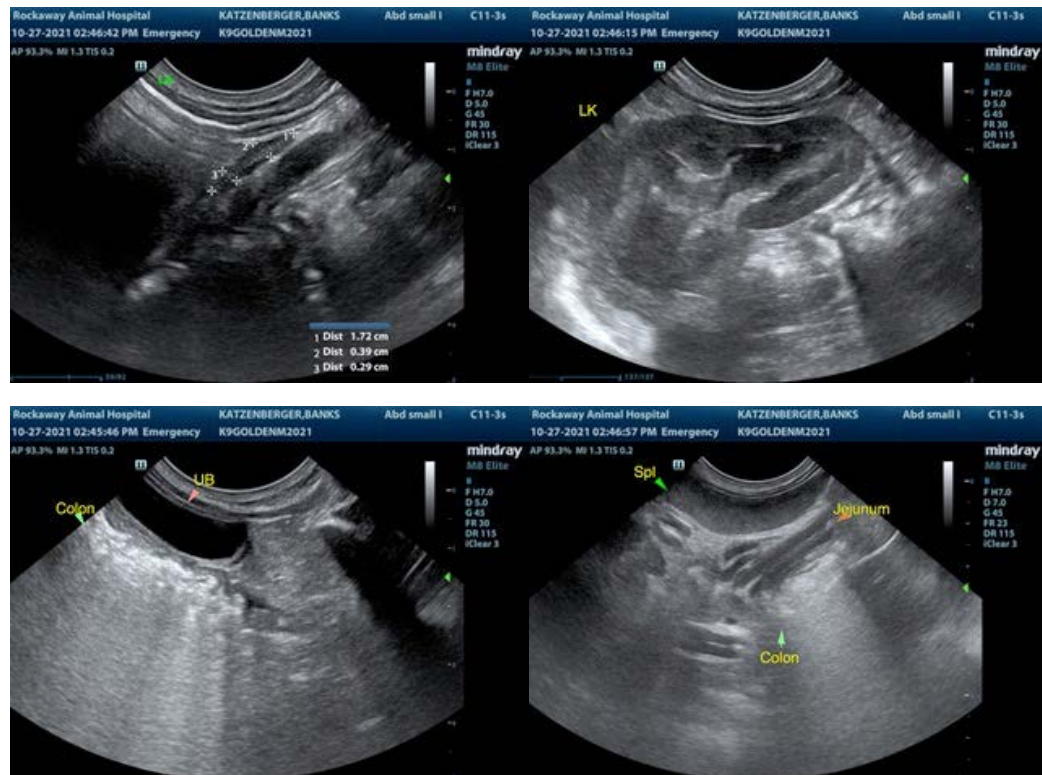
Dr. Maniar

**INVOICE**

26684

**DATE**

10/27/21





**PATIENT**

Banks Katzenberger

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Male

**AGE**

10 Weeks

**WEIGHT**

9.2 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

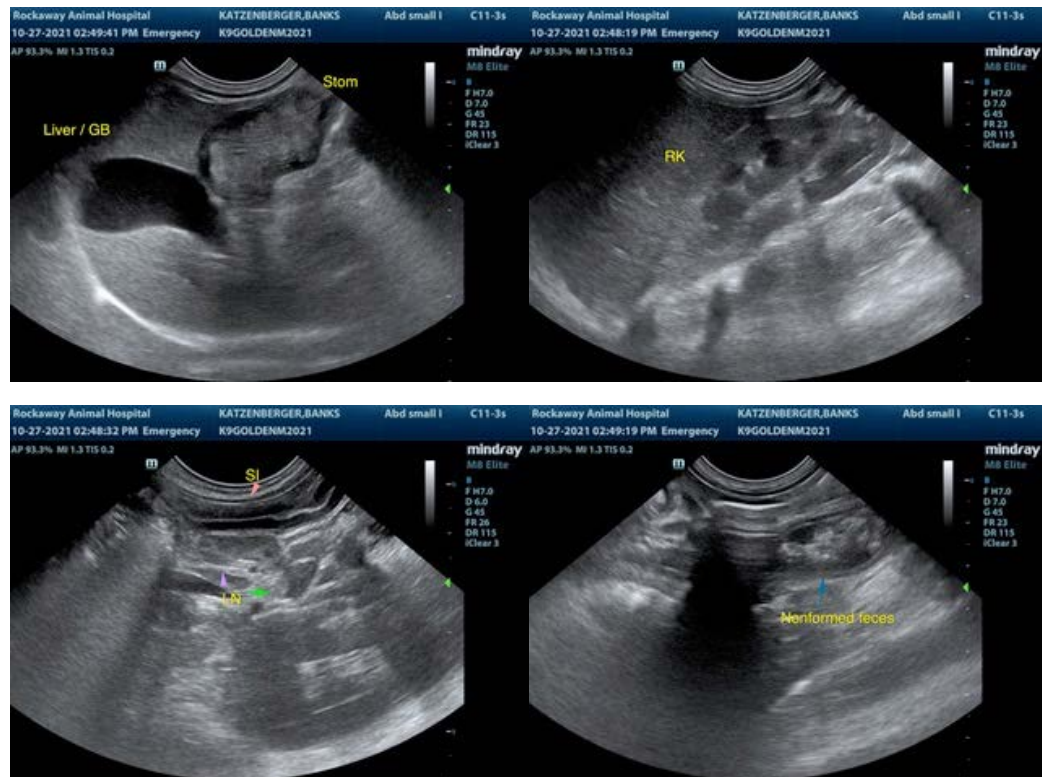
Dr. Maniar

**INVOICE**

26684

**DATE**

10/27/21



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