



PATIENT

Lady McCallicher

PRESENTING CLINICAL SIGNS

History: Decreased appetite, soft stool for several weeks

Medication: Metronidazole, Pepcid, Cerenia

SPECIES

Canine

Unremarkable CBC

Chemistry Panel- ALT 145, ALP <10, GGT 18, TBili 1.0, Amylase >2500, Lipase >6000

BREED

Shih Tzu

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

FS

Urinary System

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.

AGE

14 years

The area of the aortic trifurcation was free of pathology.

WEIGHT

13.8 Pounds

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 3.8 cm in length. The right kidney measured 3.4 cm in length.

INTERPRETED BY

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

Adrenal Glands

Mild parenchyma heterogeneity and mild capsule asymmetry was present in the bilateral adrenal glands. Both adrenal glands exhibited potential for discrete, non-expansive parenchymal nodules. The left adrenal gland measured 1.8 cm length x 0.57 cm width in the caudal pole. The right adrenal gland measured 1.6 cm length x 0.58 cm width in the caudal pole.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Subtle, non-expansive echogenic nodules were present in the medial 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

HOSPITAL NAME

Maple Hills VH

REFERRING VET

Dr. Eckman

Liver/ Gallbladder

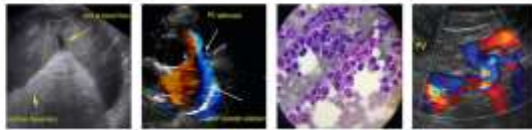
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The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. A moderately sized, thinly walled parenchymal cyst was noted in the mid liver, measuring 3.5 cm in diameter. The cyst contained anechoic fluid. The hepatic and portal vasculature was normal in appearance without signs of congestion.

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The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.

Gastrointestinal

SPECIES

Canine

The stomach presented intact yet subjective mild prominent wall layering. The lumen of the stomach was empty with mild lumina gas. No signs of ileus, obstruction, or foreign material were noted. The gastric body wall width measured 0.6 cm in width.

BREED

Shih Tzu

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 0.32 cm.

SEX

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Normal visible colon wall layers were present with subjective formed feces at the time of the ultrasound.

Pancreas

AGE

14 years

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

WEIGHT

13.8 Pounds

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Liver cyst with hepatic parenchymal remodeling - subjectively benign
- Mild gallbladder debris (non-mucocele)
- Mild prominent yet intact gastric walls, suspect mild inflammatory gastroenteropathy
- Bilateral mildly prominent adrenal glands, potential for early adenomatous change
- Heterogeneous pancreas

Secondary Findings

- Mild age-related splenic and renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely geriatric abdomen without evidence of significant visceral pathology. Sonographic monitoring of the bilateral adrenal glands for evidence of progressive nodular changes would be ideal with initial recheck in 4-6 weeks. Assessment of systemic blood pressure is suggested.

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No overt evidence of active pancreatitis was noted, yet potential for low-grade to chronic pancreas, which may present as essentially sonographically normal, is possible and may be considered if evidence of cranial abdominal or subxiphoid discomfort in palpation.



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Empirically, as-needed gastrointestinal support and conservative therapy for potential low-grade or chronic pancreatitis would be appropriate.

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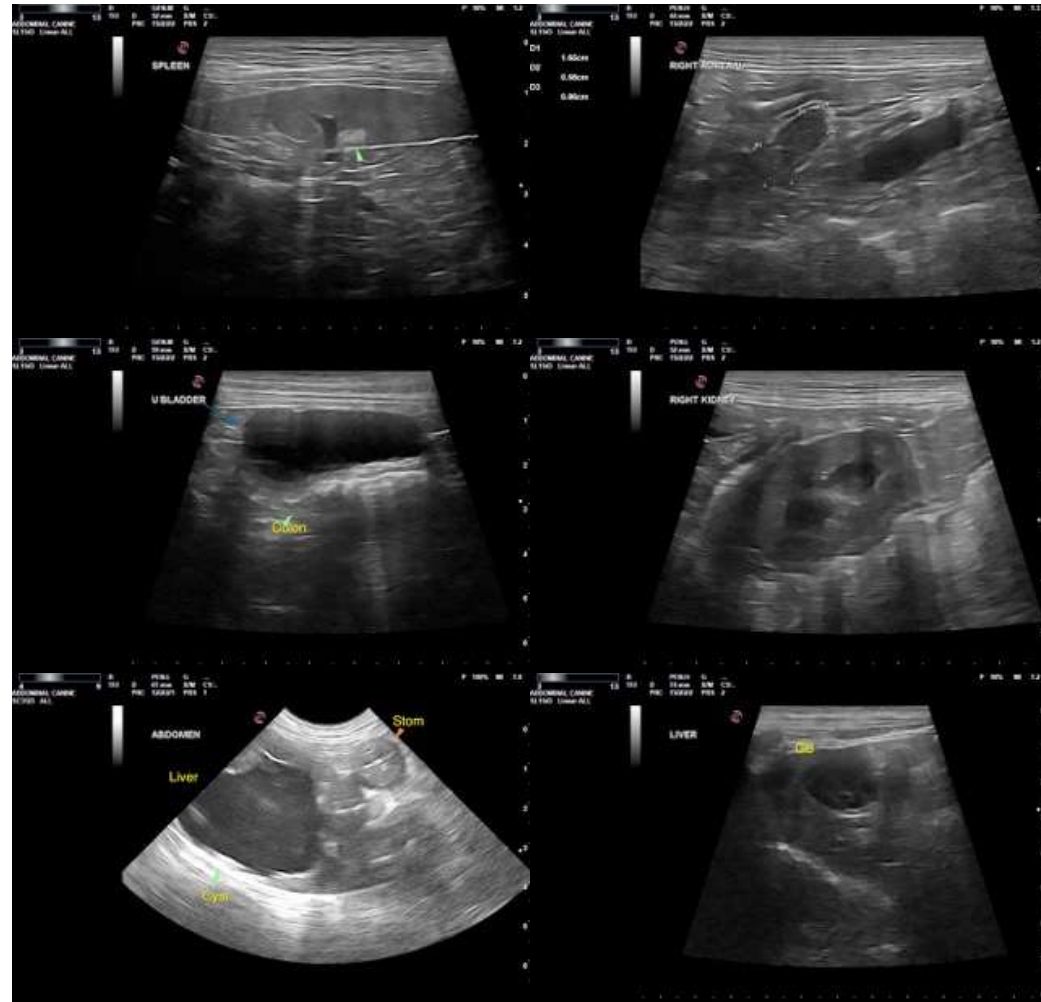
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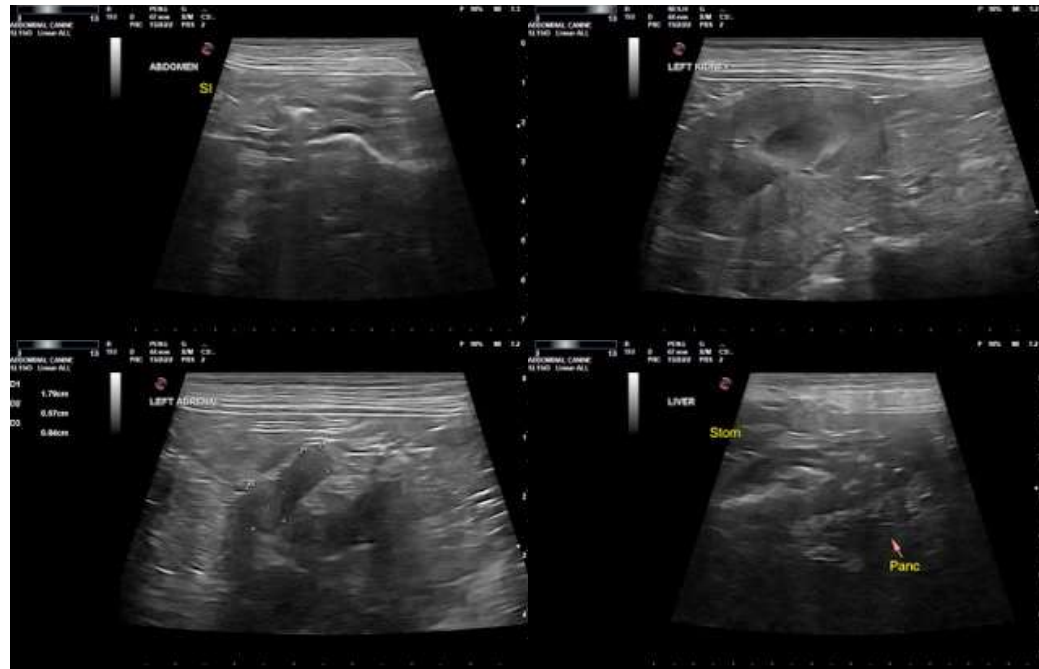
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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