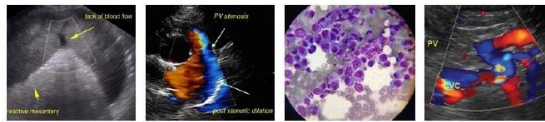




PATIENT	PRESENTING CLINICAL SIGNS
Archie Shurdha	9/21/2020 - Neuter done. Started on Trazodone for trial basis, discontinued after trail, BW normal. P started licking at front paws 3/5/21 - P developed moisture dermatitis from licking at paws - Seen multiple times for dermatitis and allergy like behaviour, tried food trails, apoquel, benadryl, etc. 6/15/22 - Sent to MOVEH for skin issues, did round of ABX and started on Prednisone for Meningitis Diagnosed 8/26/22 and 9/16/22 P seen for diarrhea with blood present. Treated empirically 10/6/22 Began with vomiting >8times, initially had FB objects in vomit (pieces of toy) then vomit was bile meds: Prednisone, cerenia, buprenorphine, aventiliver, cefazolin, metronidazole, famotidine
SPECIES	Canine
BREED	Doodle
SEX	Abnormal PE/Chem/CBC/UA Results: 5/25/22 BW >2000ALKP, 627 ALT, mild anemia, mild decreased AMYL, Crea. UA - UTI 10/6/22 BW : ALKP > 2000> 23-212U/L, ALT 354HIGH 10-125U/L, GGT 97- hepatopathy due to steroid, hepatitis, cholangiohepatitis, cholangitis, neoplasia open mild low cl due to vomiting WBC 19.16HIGH 5.05-16.76x10 ⁹ /L, NEU 16.23HIGH 2.95-11.64x10 ⁹ /L cpli normal SG 1.043 rads: 10/6/22: 1-no evidence of GI foreign bodies or obstruction. A definitive cause for the vomiting is not evident from this exam. Gastritis/gastroenteritis, previous dietary indiscretion, or pancreatitis are differentials. 1. Mild hepatomegaly. Differentials are vacuolar hepatopathy and Cushing's disease, hepatitis/cholangiohepatitis, lipidosis, less likely neoplasia. 2. Mild bronchial lung pattern, suggestive of bronchitis or scarring from previous airway disease.
MN	
AGE	3 yrs
WEIGHT	25 kg
INTERPRETED BY	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
R. McKenzie Daniel, DVM, DABVP	Urinary System
IMAGING PERFORMED BY	The bladder was distended in size yet exhibited subjective normal tone containing anechoic urine primarily with mild, non-dependent, particulate sediment, which may indicate cellular debris / protein, crystalline debris, or mucus. The urethra exhibited normal structure and tone to a depth of 3.0 cm.
Kelly Reschny	No overt pathology was noted in the area of the residual prostate, or evidence of obstruction to urinary outflow.
HOSPITAL NAME	The area of the aortic trifurcation was free of pathology.
Beattie Pet Hosp Stoney Creek	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 6.7 cm in length. The right kidney measured 7.3 cm in length.
REFERRING VET	Adrenal Glands
Dr. Salib	Both adrenal glands were overtly normal in size, position, and shape. The left adrenal gland measured 2.2 cm length x 0.63 cm width at the caudal pole. The right adrenal gland measured 2.0 cm length x 0.50 cm width at the caudal pole.
INVOICE	Spleen
15137	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.
DATE	
10/7/22	



PATIENT	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.
Archie Shurdha	
SPECIES	<i>Liver/ Gallbladder</i>
Canine	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. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.
BREED	
Doodle	
SEX	<i>Gastrointestinal</i>
MN	The stomach was non-distended in size with subjective intact yet mildly prominent wall layering. The stomach contained a mild amount of retained anechoic fluid. The gastric body wall width measured 0.78 cm.
AGE	
3 yrs	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.
WEIGHT	Normal visible colon wall layers were present with apparent formed feces in lumen.
25 kg	<i>Pancreas</i>
	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 were evident.
INTERPRETED BY	<i>Free Abdomen</i>
R. McKenzie Daniel, DVM, DABVP	No overt lymphadenopathy or peritoneal effusion was present.
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Kelly Reschny	<ul style="list-style-type: none"> • Benign hepatopathy • Gastritis pattern, sonographically unremarkable small bowel
HOSPITAL NAME	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Beattie Pet Hosp Stoney Creek	Screening ultrasound guided hepatic FNA cytology could be considered for further clarification. Metabolic, reactive, vacuolar hepatopathy, nonobstructive cholestasis given the primarily elevated ALP with potential for primary or concurrent mild inflammatory disease given the ALT elevation, are potentials. No evidence of hepatic neoplastic criteria was noted.
REFERRING VET	Hepatosupportive medications may prove beneficial. Empirical therapy for gastritis with as-needed GI support is recommended. No evidence of gastrointestinal mechanical / metabolic ileus or foreign material was noted.
Dr. Salib	
INVOICE	
15137	
DATE	
10/7/22	



PATIENT

Archie Shurdha

SPECIES

Canine

BREED

Doodle

SEX

MN

AGE

3 yrs

WEIGHT

25 kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Beattie Pet Hosp
Stoney Creek

REFERRING VET

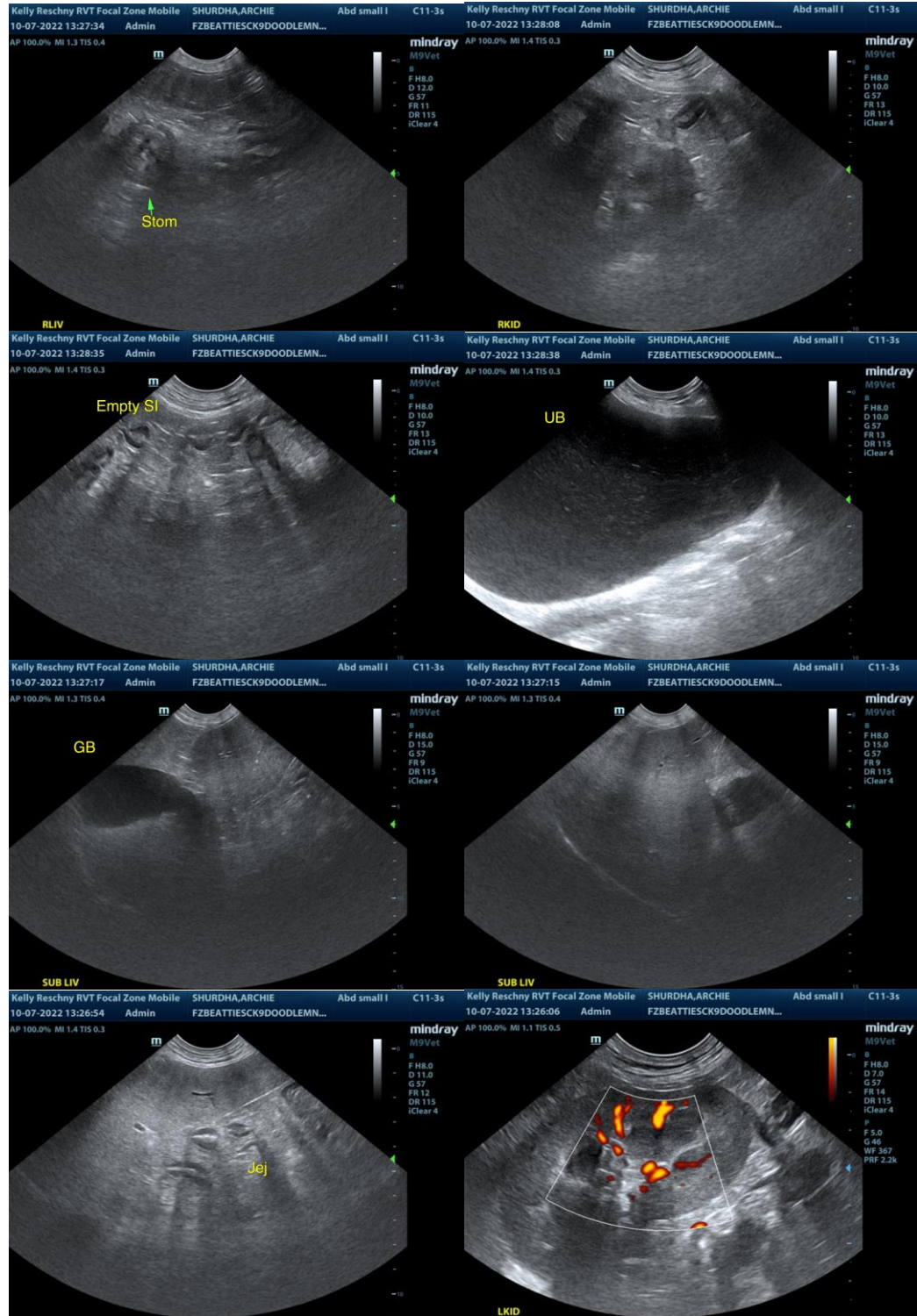
Dr. Salib

INVOICE

15137

DATE

10/7/22





PATIENT

Archie Shurdha

SPECIES

Canine

BREED

Doodle

SEX

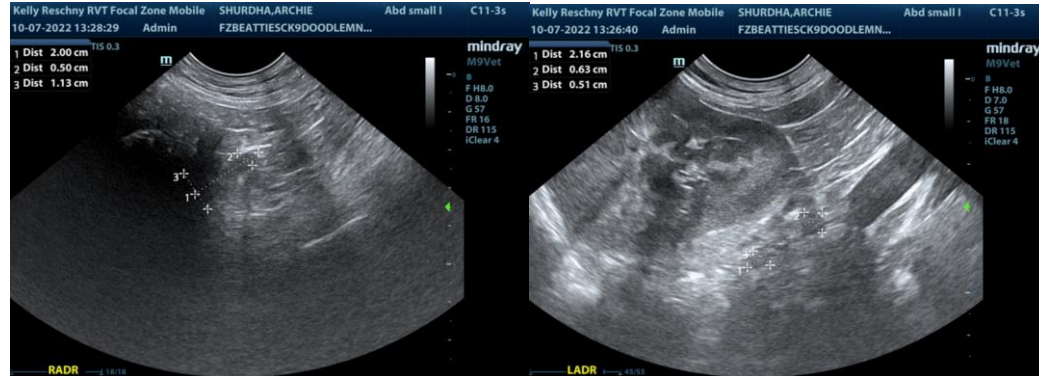
MN

AGE

3 yrs

WEIGHT

25 kg



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 can be of any further assistance please contact me.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Beattie Pet Hosp
Stoney Creek

REFERRING VET

Dr. Salib

INVOICE

15137

DATE

10/7/22