



PATIENT PRESENTING CLINICAL SIGNS

Cappuccino Rescue Texas rescue, history of seizures, organomegaly.
 Medication: Phenobarbital 16.2 1am, 1/2pm

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED 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 was noted.

Yorkie Mix

SEX The area of the residual prostate was free of pathology.

MN The area of the aortic trifurcation was free of pathology.

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. Areas of nonobstructive medullary mineral to mild renolithiasis were noted. The left kidney measured 4.1 cm in length. The right kidney measured 4.5 cm in length.

2012

WEIGHT The left kidney measured 4.1 cm in length. The right kidney measured 4.5 cm in length.

10.9

Adrenal Glands

INTERPRETED BY The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.7 cm length x 0.58 cm width at the caudal pole. The right adrenal gland measured 1.5 cm length x 0.53 cm width at the caudal pole.

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

Spleen

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

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.

HOSPITAL NAME

Pottstown Animal
 Wellness Services

REFERRING VET

Dr. DiBuono

Liver/ Gallbladder

The liver exhibited mild to moderate enlargement. Lobar biliary tree mineralization was present in the subjective right lateral to caudate liver lobe. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Multiple, discrete, nonmineralized hyperechoic intraparenchymal nodules were noted, likely consistent with areas of nodular hyperplasia or lipogranulomas. The hepatic and portal vasculature were normal in appearance without signs of congestion.

INVOICE

15151

DATE

10/7/22



PATIENT Cappuccino Rescue
SPECIES Canine
BREED Yorkie Mix
SEX MN
AGE 2012
WEIGHT 10.9

Gastrointestinal
 The gallbladder was mildly distended in size. The gallbladder walls were overtly normal. Moderate, nondependent, mildly inspissated yet nonorganized hyperechoic gallbladder debris was noted. No evidence of gallbladder or peripheral gallbladder inflammation was noted.

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 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.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas
 The parenchyma of the pancreas was hyperechoic to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. These changes may suggest chronic inflammation, fibrosis, or saponification if previous history of pancreatitis. No overt signs of pancreatic neoplasia.

Free Abdomen
 No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hepatomegaly exhibiting parenchymal remodeling, intermittent likely benign intraparenchymal nodules, and mild lobar biliary tree mineralization
- Mildly distended gallbladder containing moderate nondependent hyperechoic debris - possible early gallbladder mucocele
- Chronic pancreatitis / pancreatic fibrosis
- Mild chronic renal changes with mild nonobstructive medullary mineral / renoliths

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY R. McKenzie Daniel, DVM, DABVP (Canine and Feline)
IMAGING PERFORMED BY Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME Pottstown Animal Wellness Services
REFERRING VET Dr. DiBuono

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

The hepatic lobar biliary tree mineralization is nonspecific and likely incidental, yet at times has been associated with chronic hepatobiliary inflammation. Correlation with clinical history if possible is suggested. Screening hepatic FNA cytology to assess for evidence of inflammatory cells could be considered. Hepatosupportive medications including Denamarin and Ursodiol are suggested.

A Spec cPL could be considered if clinical signs suggestive of chronic pancreatitis are present.

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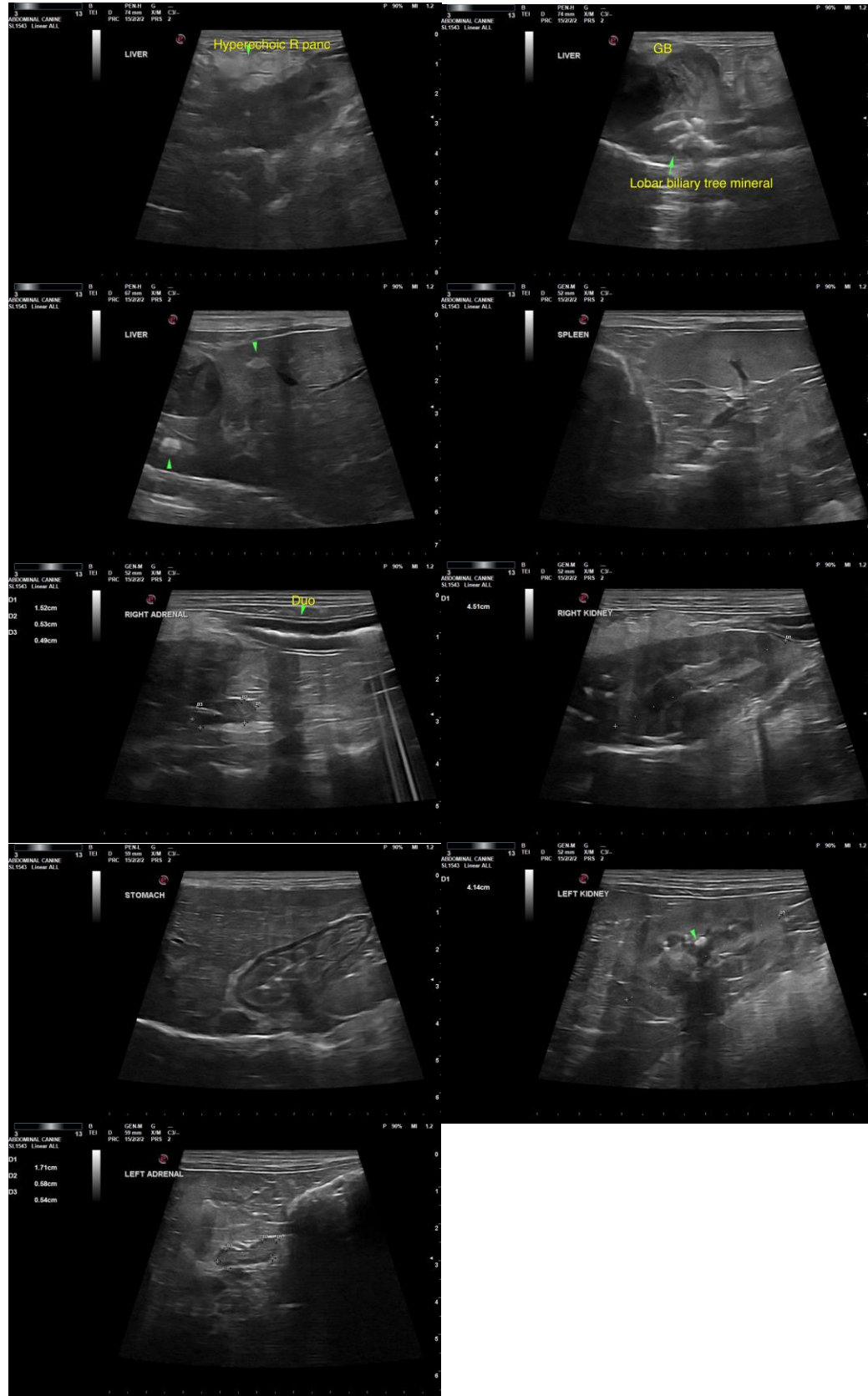
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Cappuccino Rescue

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.

SPECIES

Canine

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.

BREED

Yorkie Mix

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mac.daniel@sonopath.com

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