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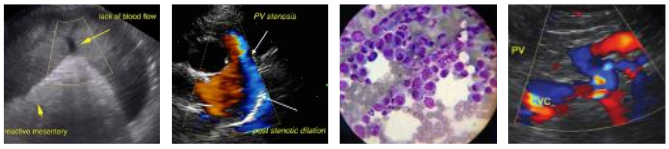

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Juliette Compa

SPECIES

Canine

BREED

Coton De Dulear

SEX

FS

AGE

10 yrs

WEIGHT

17.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton Vet

REFERRING VET

Dr. Kim

INVOICE

15134

DATE

10-7-22

PRESENTING CLINICAL SIGNS

Presented 9/16/2022 for V/D, decreased appetite, uncomfortable abdomen, CPL normal. Improved with Metro, Proviable, Cerenia, Gabapentin but GI signs returned. Current meds: Metro, Proviable, Gabapentin, Vetoryl (hx of Cushings, well controlled)
Abnormal PE/Chem/CBC/UA Results: 8/2022- ALP 346 (131H);

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

The area of the aortic trifurcation was free of pathology.

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 4.5 cm in length. The right kidney measured 4.5 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 1.6 cm length x 0.48 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 1.7 cm length x 0.55 cm width at the caudal pole. No evidence of adrenal tumors was noted.

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 presented mildly 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 minor echogenic luminal debris. The cystic and common bile ducts were normal. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted.

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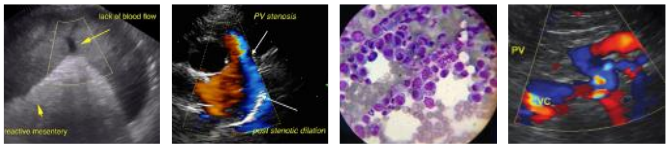

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Gastrointestinal

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 small intestine exhibited generalized intact wall layering with subjective propensity for generalized mildly prominent duodenojejunal mucosa. Intermittent duodenojejunal mucosal speckling was present. A segment of the mid-abdominal jejunum exhibited variable mural hypertrophy, intact yet indistinct wall layering measuring approximately 4.0 cm in length with wall width up to 0.66 cm. By comparison, adjacent jejunum wall width measured 0.36 cm. The duodenum wall measured 0.38 cm width.

Normal visible colon wall layers were present with semi-formed to soft fecal matter.

Pancreas

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

Mid-abdominal, peri intestinal, mild hyperechoic mesentery was noted primarily around the area of the regionally thickened jejunum. No evidence of significant lymphadenopathy or peritoneal free fluid.

ULTRASONOGRAPHIC FINDINGS

- Generalized enteropathy exhibiting mild duodenojejunal mucosal speckling
- Segmentally thickened mid-abdominal jejunum exhibiting intact yet indistinct wall layering detail, regional peri intestinal reactive mesentery
- Mild vacuolar hepatopathy pattern
- Heterogeneous pancreas - age/patient variant with minor benign remodeling, potential for low-grade / chronic pancreatitis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonographically, the appearance of the generalized intestinal tract is suggestive of inflammatory criteria, i.e., enteritis, IBD, or other. The thickened segment of jejunum, likewise, may indicate segmental pronounced inflammation with mild corrugation, although the possibility of emerging infiltrative neoplasia or intestinal mass cannot be definitively excluded. Intestinal biopsies would be required for a definitive diagnosis. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended.

Continued therapy for IBD with sonographic monitoring of the segmentally thickened jejunum with initial recheck in 4 weeks would also be reasonable.

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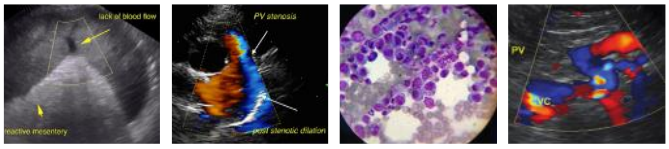

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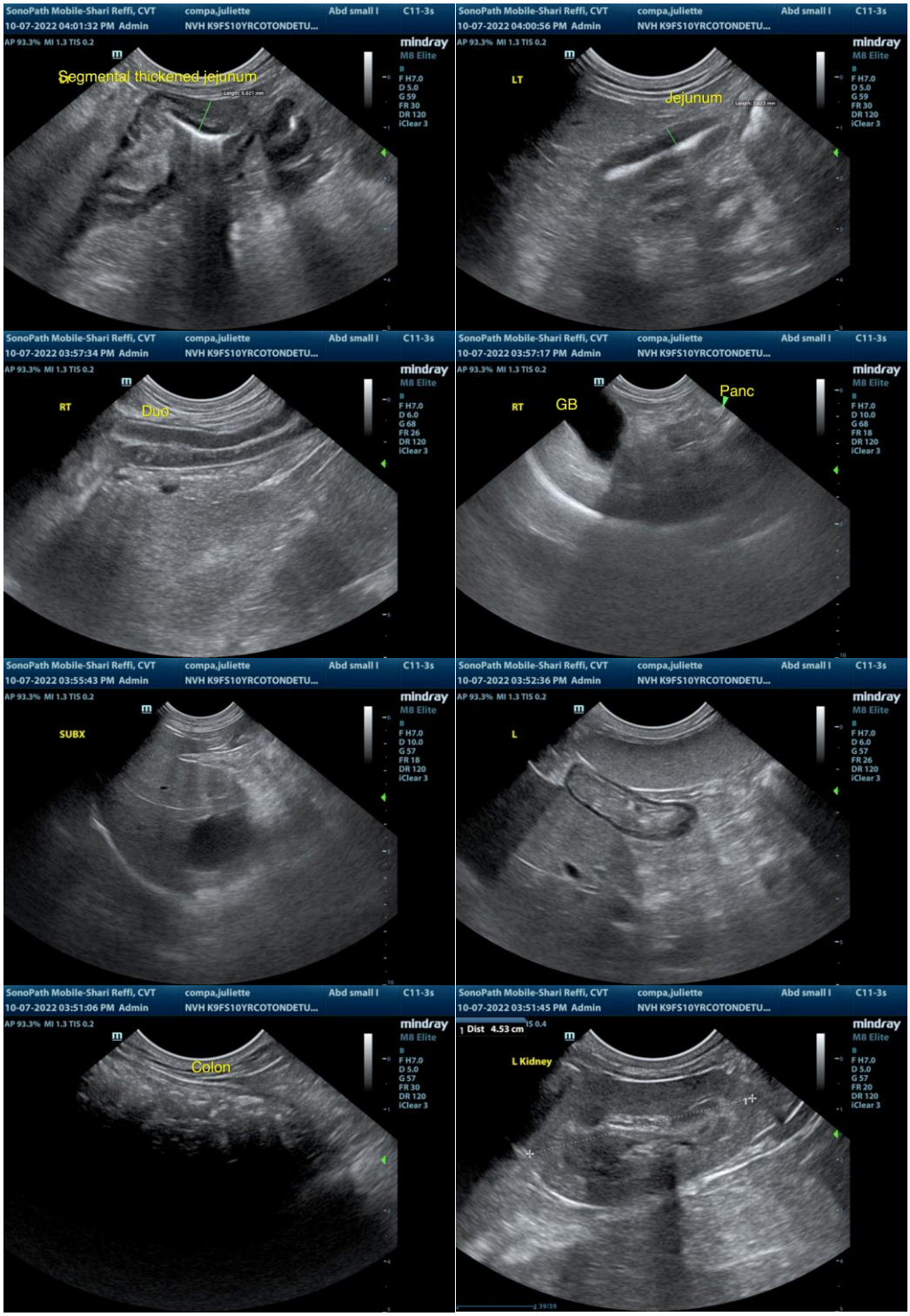

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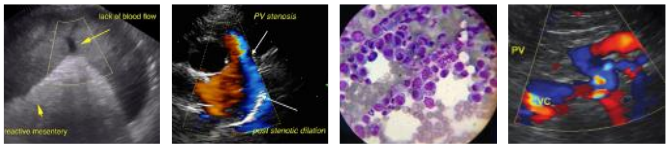

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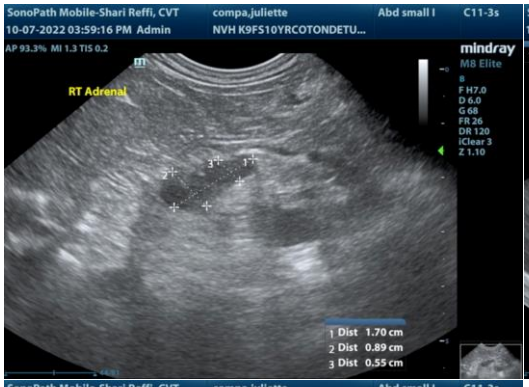

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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