



PATIENT

Missy Harte

PRESENTING CLINICAL SIGNS

Healthy in general, Tuesday started decreased appetite that has progressed to anorexia. Noticed frank blood in stool a couple days ago that has resolved. CBC at RDVM showed regenerative anemia. T-bil 1.0

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: BW at RDVM 11/9 Chem/lytes: T-bil 1.0 CBC: RBC: 3.09 (5.65-8.87) Hct: 16.9 (22%) Hgb: 7.2 (13.1-20.5) Retic- 126.2 regenerative Dehydration Mild hyperthermia Splenomegaly CBC to the lab for path review: pending PCV/TS: 22/8.0

BREED

Airedale Terrier

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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 were noted.

SEX

Female

The area of the aortic trifurcation was free of pathology.

AGE

8.5 Years

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 kidneys measured 7.5 cm each.

WEIGHT

24.9 kg

Adrenal Glands

The adrenal glands were overtly normal in size, position, and shape. The left adrenal gland measured 0.52 cm at the caudal pole and 0.64 cm at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen exhibited variable enlargement with symmetrical yet swollen capsule contour. Normal splenic parenchyma echogenicity exhibiting moderate coarse echotexture and mild parenchyma heterogeneity. No evidence of splenic masses or nodules. No evidence perisplenic hyperechoic mesentery.

IMAGING PERFORMED BY

Der. Laura de Cordon

Liver

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.

HOSPITAL NAME

Mason Dixon Animal
Emergency Hospital

REFERRING VET

Dr. Laura de Cordon

Gastrointestinal

The stomach was non-distended in size with intact, sonographically unremarkable gastric wall layering. A solitary shadowing area of ingesta to echo present in the pylorus, which did not appear to be obstructive to pyloric outflow, measuring 2.4 cm in diameter.

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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.

DATE

11/19/22

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



PATIENT

Pancreas

Missy Harte

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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Airedale Terrier

- Variable moderate splenomegaly exhibiting maintained uniform homogeneous parenchyma - hyperplasia / hematopoiesis owing to anemia, splenitis, infiltrative round cell neoplasia possible
- Mild hepatomegaly - subjectively benign
- Focal shadowing pyloric ingesta / echo

SEX

Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

8.5 Years

Assessment for evidence of agglutination and abdominal radiographs to see if the shadowing pyloric ingesta / echo is radiopaque is suggested if not done. Concern for nonobstructive pyloric foreign body warranted, although not definitive. Sonographic monitoring of the shadowing pyloric ingesta / echo over next 24 hours with 12-hour NPO is suggested. Assuming normal coags, spleen FNA cytology using 25 ga needle is warranted. The mild hepatomegaly is nonspecific without elevated hepatic enzymes yet subjectively benign. Infectious disease testing may be considered if clinically indicated. Correlation with pending CBC path review.

WEIGHT

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HOSPITAL NAME

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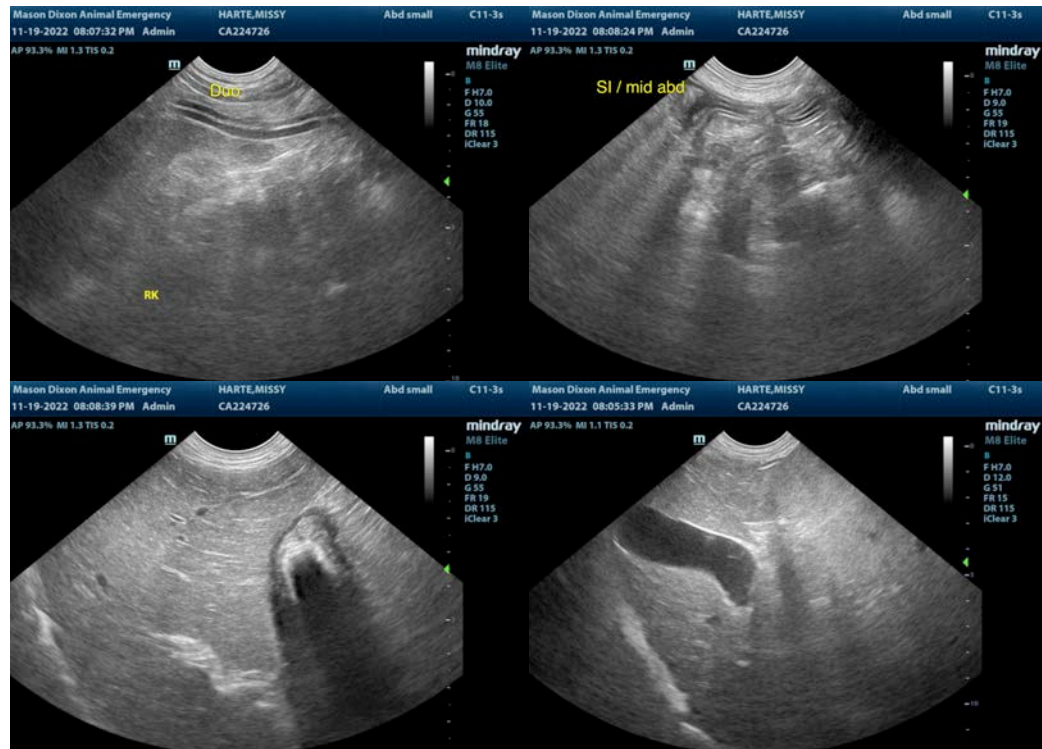
Dr. Laura de Cordon

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SPECIES

Canine

BREED

Airedale Terrier

SEX

Female

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WEIGHT

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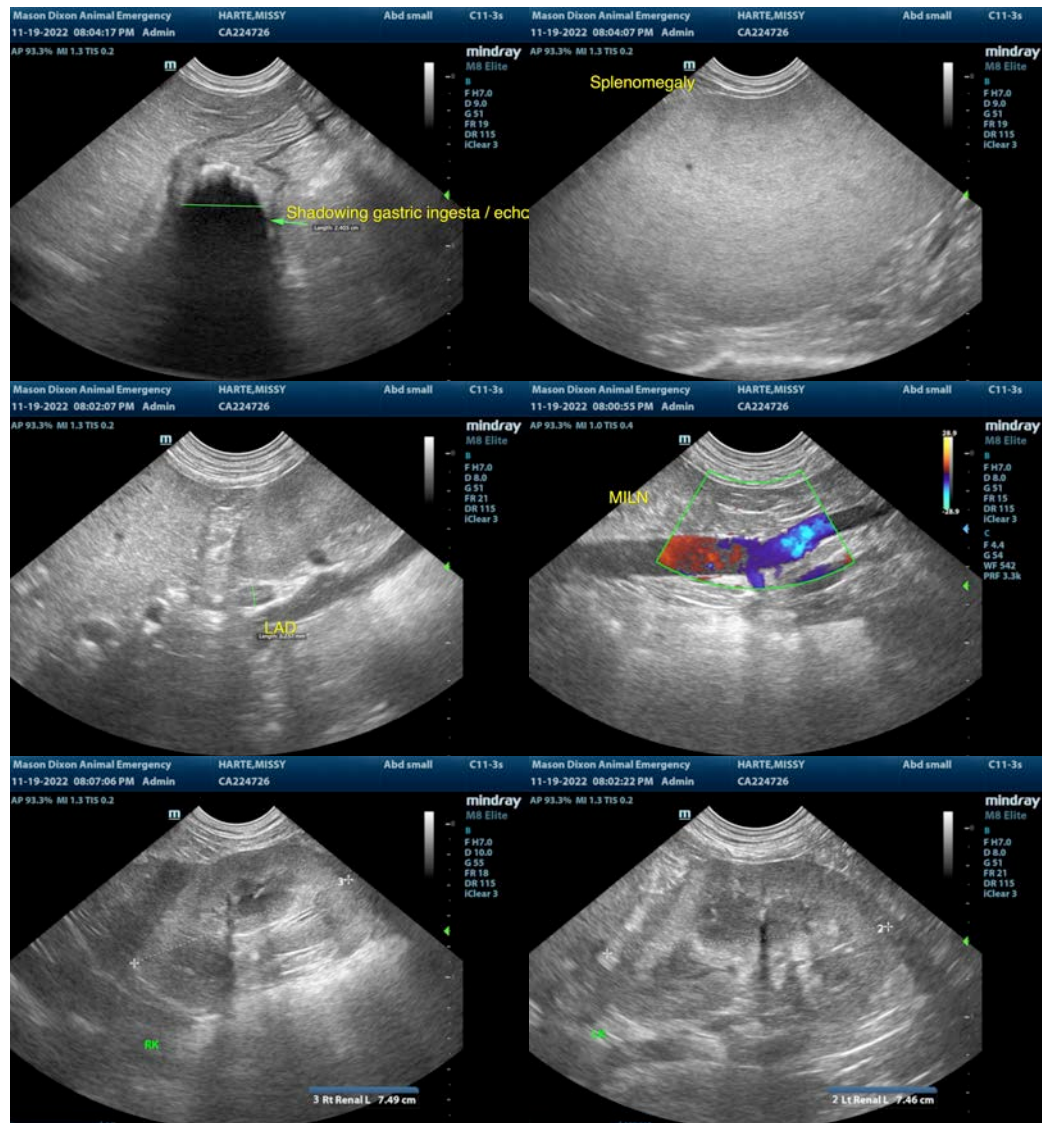
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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