



PATIENT

Rufus Smythe

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.

SPECIES

Canine

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

BREED

Plott Hound

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age related changes or benign parenchymal remodeling and considered incidental. No signs of active inflammation or neoplasia.

Free Abdomen

SEX

MN

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

AGE

11yr

- Chronic hepatopathy with focal non-specific subjective benign intraparenchymal nodule
- Early/immature non-inflamed gallbladder mucocele
- Overall static non-homogeneous nodular left adrenomegaly with early/mild phrenicoabdominal vein invasion
- Non-specific chronic renal changes with cortex hyperechogenicity and cortical cysts
- Static benign splenic nodule with diffuse hyperechoic parenchyma foci-benign myelolipoma, suspect pinpoint splenic microinfarction, fibrosis or mineralization

WEIGHT

84.8lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Continued close monitoring of the left adrenal gland and gallbladder is recommended. Continued hepatosupportive medication with the addition of Ursodiol may prove beneficial.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Periodic screening BP is advised to assess for evidence of hypertension which may allude to emerging left adrenal neoplastic criteria i.e. pheochromocytoma.

HOSPITAL NAME

Chase Veterinary Clinic

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

REFERRING VET

Dr. Caffarella

INVOICE

12223ag

DATE

11-21-2022



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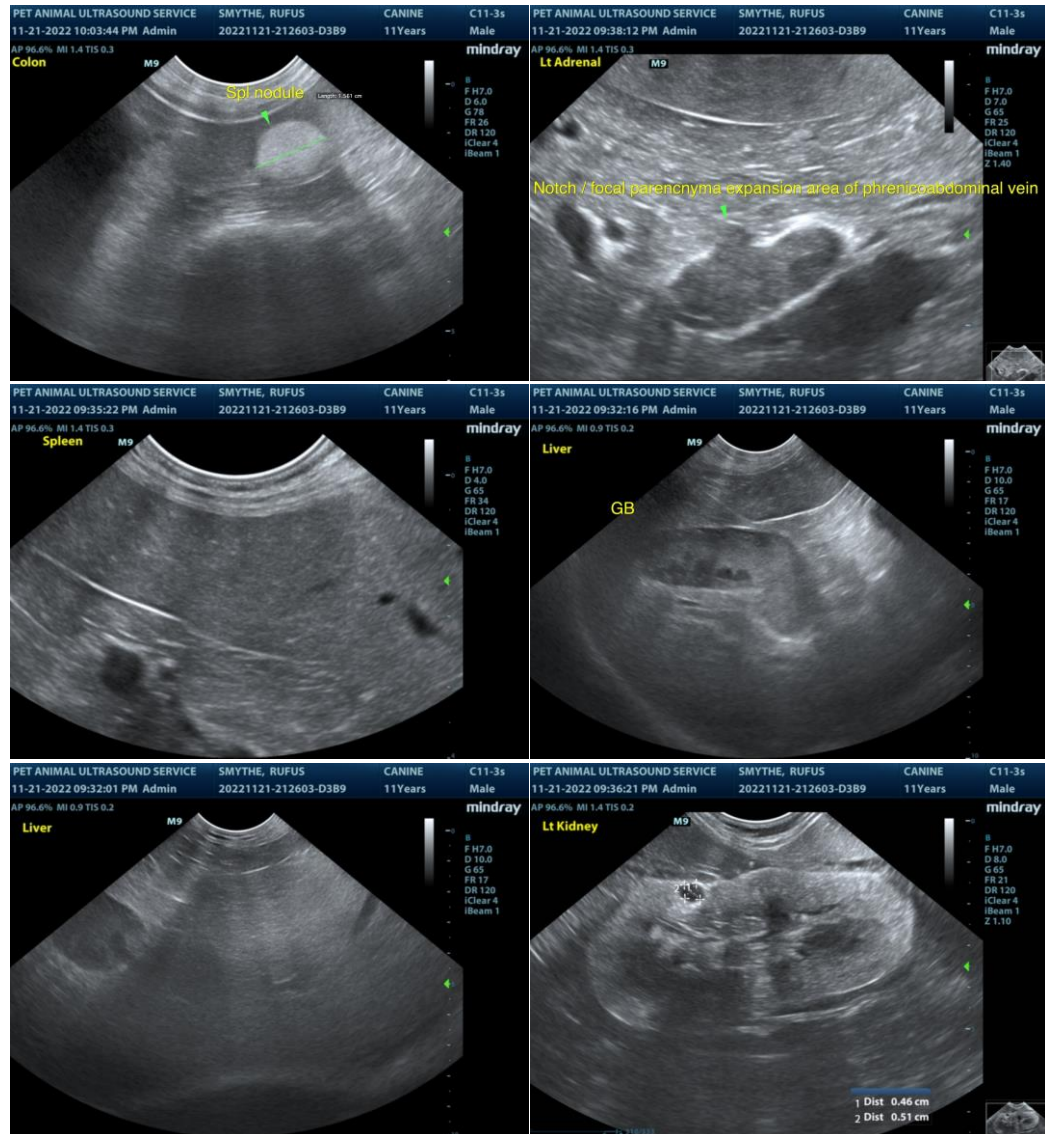
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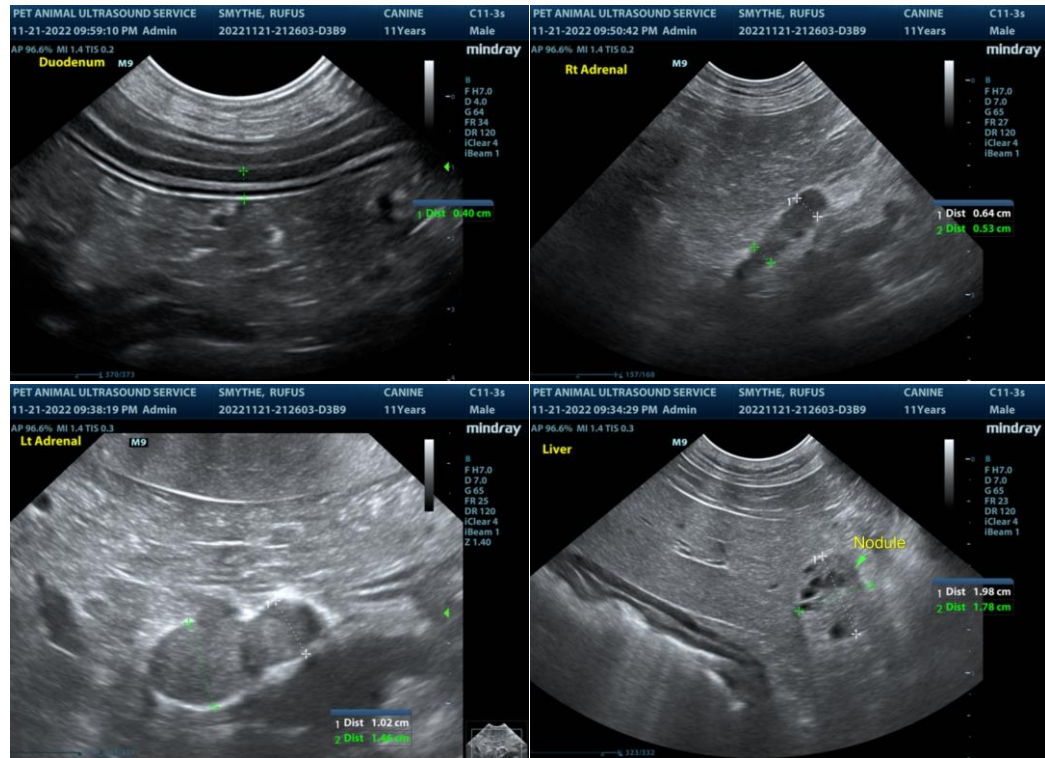
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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