



PATIENT

Chloe Novo

PRESENTING CLINICAL SIGNS

P presented for ADR/V+/intermittent lethargy + anorexia x 2 wks. In house labs showed azotemia. No current meds.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: BUN 163, Creat 2.5, Glu 113, Phos 6.9, TP 8.3, Glob 5.3

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Poodle Mix

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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

FS

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient.

AGE

13yr

Mild left kidney pyelectasia was present. Focal areas of non-obstructive medullary mineral were present in the bilateral kidneys. The left kidney measured 4.2 cm in length. The right kidney measured 4.9 cm in length

The area of the aortic trifurcation was free of pathology.

WEIGHT

8.6lb

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width at the caudal pole and 1.4 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.49 cm width at the caudal pole and 1.6 cm length.

INTERPRETED BY

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

Spleen

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.

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Andover AH

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 and moderate mildly congealed non-organized luminal debris. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Bihlear

INVOICE

12285ag

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.

DATE

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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.

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

SPECIES

Canine

Pancreas

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.

BREED

Poodle Mix

Free Abdomen

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

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

13yr

- Chronic nephropathy exhibiting mild left kidney pyelectasia and bilateral non-obstructive medullary mineral
- Moderate congealed non-organized gallbladder debris (non-mucocele)
- Sonographically unremarkable GI tract, likely mild gastritis or potential mild uremic gastritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the kidneys is consistent with chronic nephropathy although the possibility of acute on chronic renal insult cannot be definitively excluded. The left kidney pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Less likely potential for left kidney pyelonephritis. The kidneys do not appear to be end stage yet prognosis is likely dependent on renal response to diuresis protocol (with monitoring of urine output and body weight) and as needed GI support. CRD therapy is indicated.

WEIGHT

8.6lb

The gallbladder debris is considered incidental given the lack of reported cholestasis or hepatic enzyme elevations. Ursodiol therapy may be considered if evidence of cholestasis arises.

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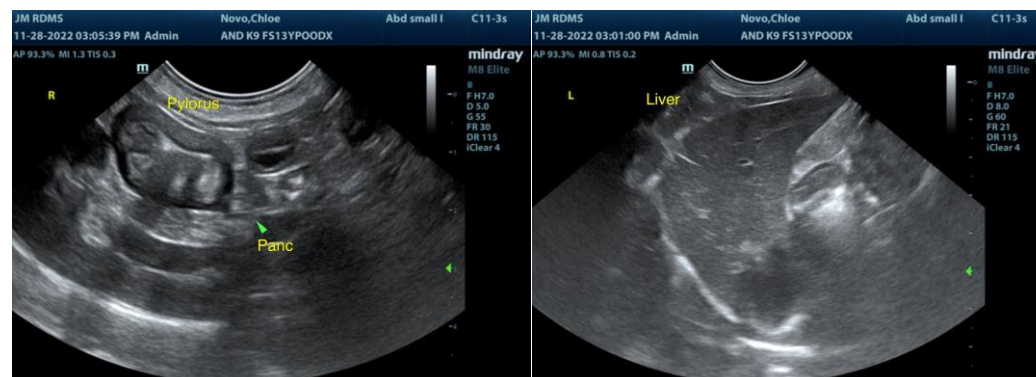
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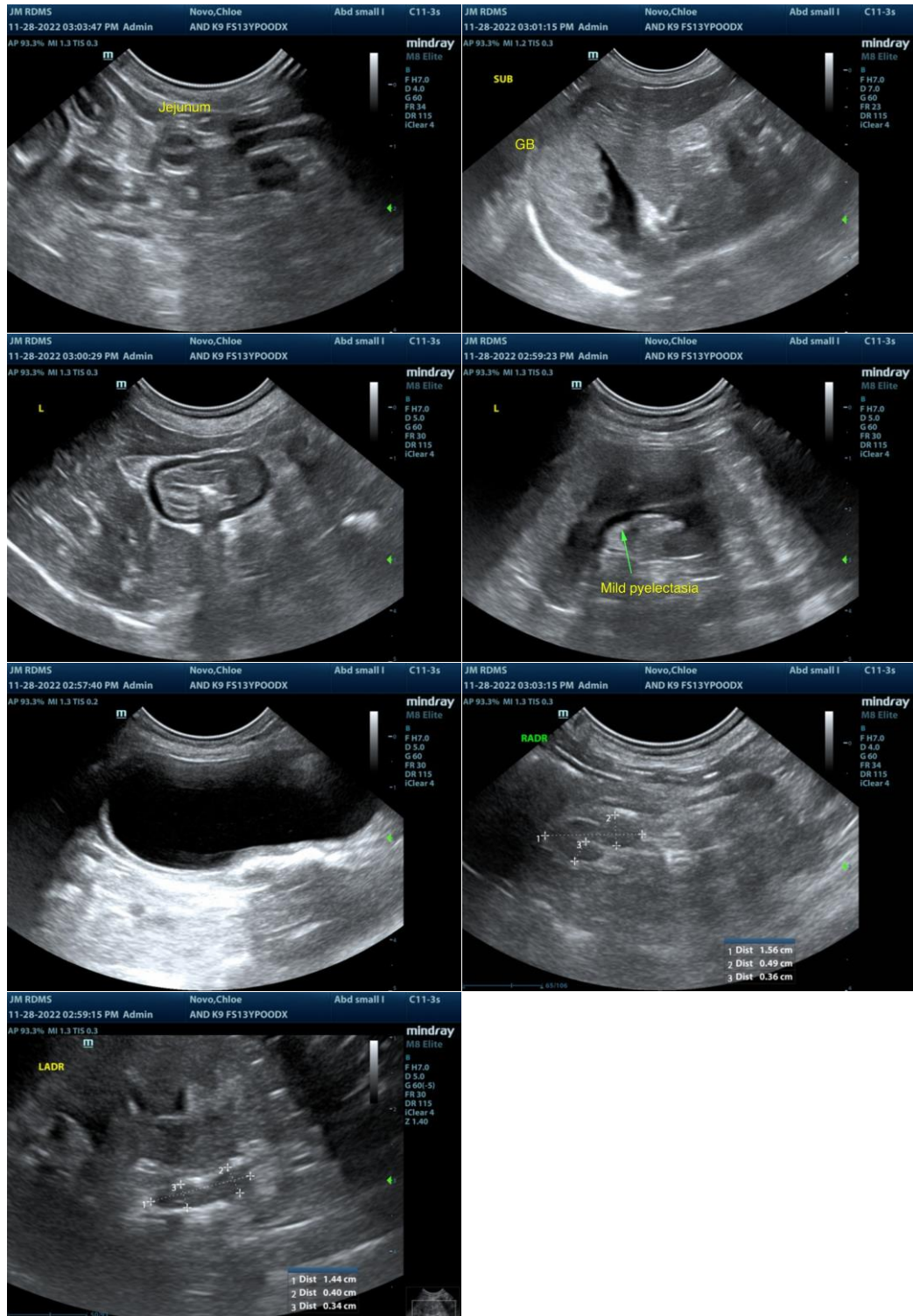
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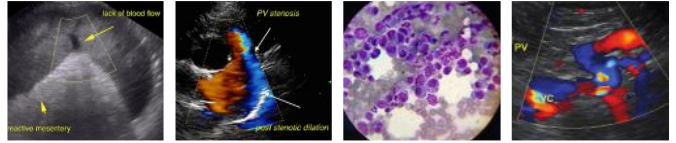
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



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can be of any further assistance, please contact me.

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mac.daniel@sonopath.com

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