

PATIENT PRESENTING CLINICAL SIGNS

Sophie LaMura History: Several week duration hematuria, concern for cranial abdominal mass
Medication: Clavamox

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Pug Mix

Urinary System

SEX

FS

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone to a depth of 2.0 cm. Mild nonuniform thickening of the urinary bladder wall was present. Multiple hyperechoic focal echogenicities with distal acoustic shadowing were present in the dependent lumen. The echogenicities were variably sized to calculi ranging in size from 0.9 cm - 1.5 cm. The ventral urinary bladder wall measured 0.5 cm width. Likely pinpoint adhered mineral along the ventral luminal surface was present.

AGE

8 years

The area of the aortic trifurcation was free of pathology.

WEIGHT

25.8 Pounds

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 left kidney measured 4.6 cm in length. The right kidney measured 4.8 cm in length.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.44 cm width at the caudal pole and 0.46 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.55 cm width at the caudal pole and 0.77 cm width at the cranial pole.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

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.

HOSPITAL NAME

Community VP

REFERRING VET

Dr. Carpenter

Liver/ Gallbladder

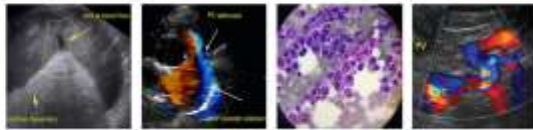
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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DATE

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PATIENT

Gastrointestinal

Sophie LaMura

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

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.

Canine

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

BREED

Pancreas

Pug Mix

The parenchyma of the pancreas was mildly echogenic 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.

SEX

FS

Free Abdomen

AGE

No overt lymphadenopathy or peritoneal effusion was present.

8 years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

Primary Findings

25.8 Pounds

- Multiple cystic calculi with concurrent cystitis, likely pinpoint adhered mineral along the ventral luminal surface
- Sonographically unremarkable kidneys

INTERPRETED BY

Secondary Findings

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- Echogenic pancreas - possible chronic pancreatitis or early fibrosis

IMAGING

PERFORMED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Rebekah Jakum, CVT
ARDMS/RVT

Cystotomy with submission of calculi for analysis, as well as urinary bladder mural biopsy for tissue C/S and histopathology are recommended. No evidence of intraabdominal masses or overt neoplasia was noted.

HOSPITAL NAME

Antibiotic therapy, ideally based on urine +/- tissue C/S results is warranted. No evidence of a portosystemic shunt was noted.

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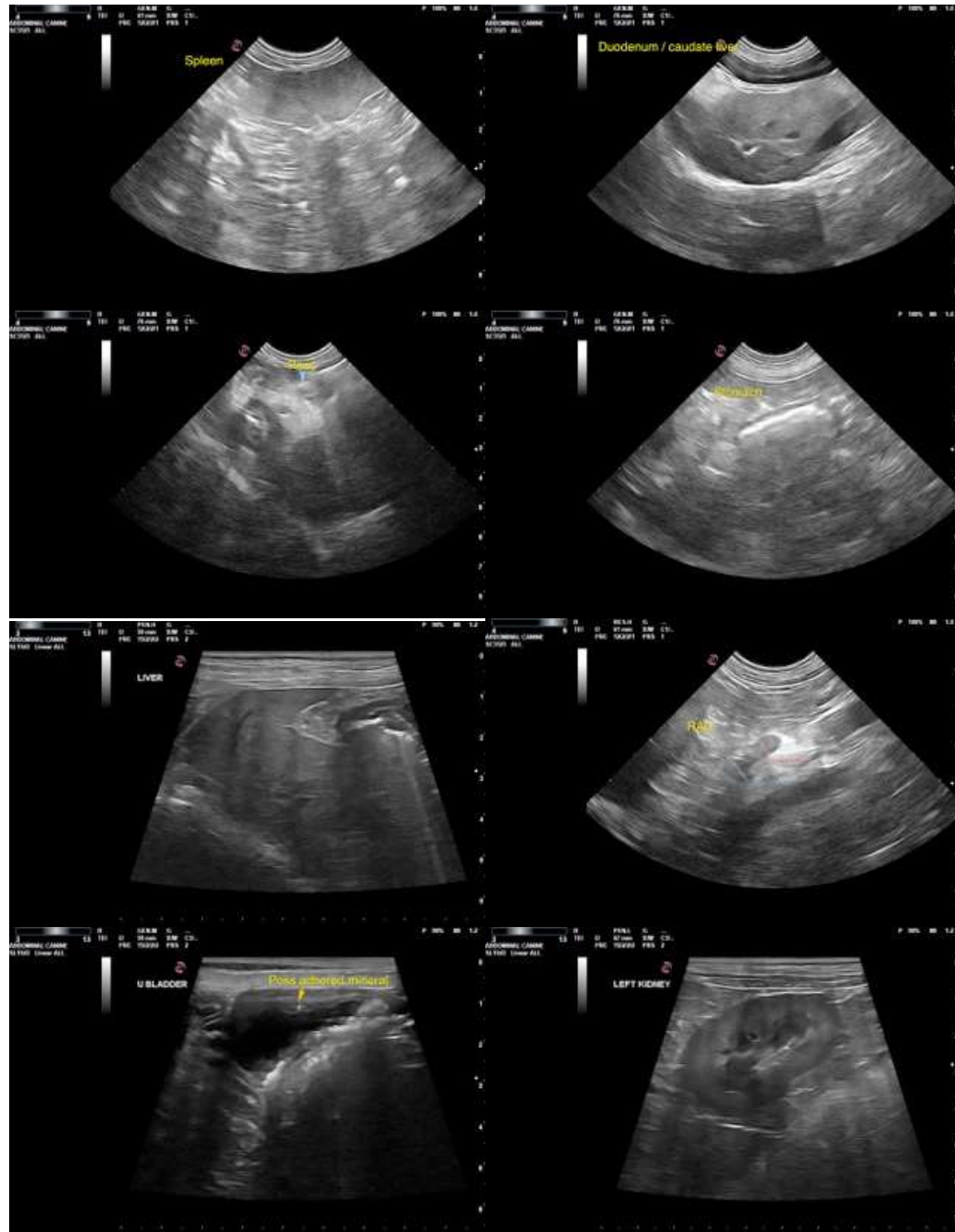
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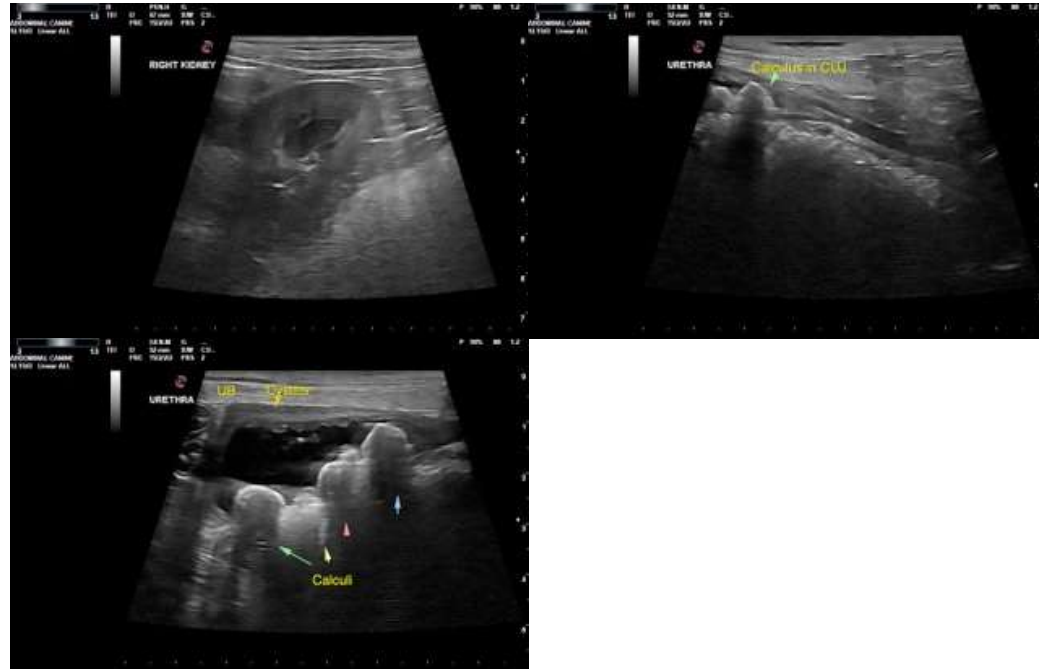
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AGE

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WEIGHT

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

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