



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Brutus Kirkbright
History: Vomiting started day and a half ago, much worse this am, threw up water after drinking, lethargy and diarrhea has developed Has not eaten for 2 days

SPECIES
Canine
Abnormal PE/Chem/CBC/UA Results: Tense abdomen Moderate to severe dental disease Evidence of colitis with blood tingeing on the thermometer Unremarkable blood chemistry and normal cPLi Hemoconcentrated - dehydration

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED
Chihuahua X
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 were noted.

SEX
Neutered Male

The area of the residual prostate appeared normal and free of pathology.

AGE
4 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 left kidney measured 4.2 cm in length. The right kidney measured 4.4 cm in length.

WEIGHT
7.9 kg

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 0.53cm width at the caudal pole.

INTERPRETED BY

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

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.9 cm length x 0.54 cm width at the caudal pole.

IMAGING PERFORMED BY

Dr. Alastair Westcott

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

Dr. Alastair Westcott,
DVM

Liver

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.

REFERRING VET

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20102

Gastrointestinal

The stomach presented mild wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with primarily anechoic fluid was present.

DATE

12/14/22

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A minor segmental



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ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

SPECIES

Canine

The colon revealed sonographically unremarkable wall layering. The colon exhibited generalized distention containing non-formed fecal matter consistent with patient history.

BREED

Chihuahua X

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.

SEX

Neutered Male

Free Abdomen

Several, mildly prominent to enlarged colic lymph nodes were present adjacent to the ileocolic junction. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation or neoplastic criteria and maintaining a normal width: length ratio (<0.5). An example of lymph node size measured 0.4 cm diameter. No evidence of free fluid.

AGE

4 Years

ULTRASONOGRAPHIC FINDINGS

- Acute gastroenterocolitis pattern
- Heterogenous pancreas – age-related variant, potential for low grade inflammation possible'
- Intermittent benign/reactive colic lymphadenopathy

WEIGHT

7.9 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gastrointestinal foreign material or mechanical obstructive pattern. Acute hemorrhagic diarrhea syndrome, dietary intolerance, occult parasitism, enterotoxic insult, infectious gastroenterocolitis are all potentials. A spec cPL could be considered to assess for evidence of low-grade pancreatitis, especially if evidence of cranial abdominal or subxiphoid discomfort on palpation. Empirical therapy for acute hemorrhagic diarrhea syndrome should prove beneficial. If persistent or recurrent gastrointestinal signs, a GI panel to include PLI/TLI/Cobalamin/Folate +/- resting cortisol level could be considered. No indication for surgical intervention.

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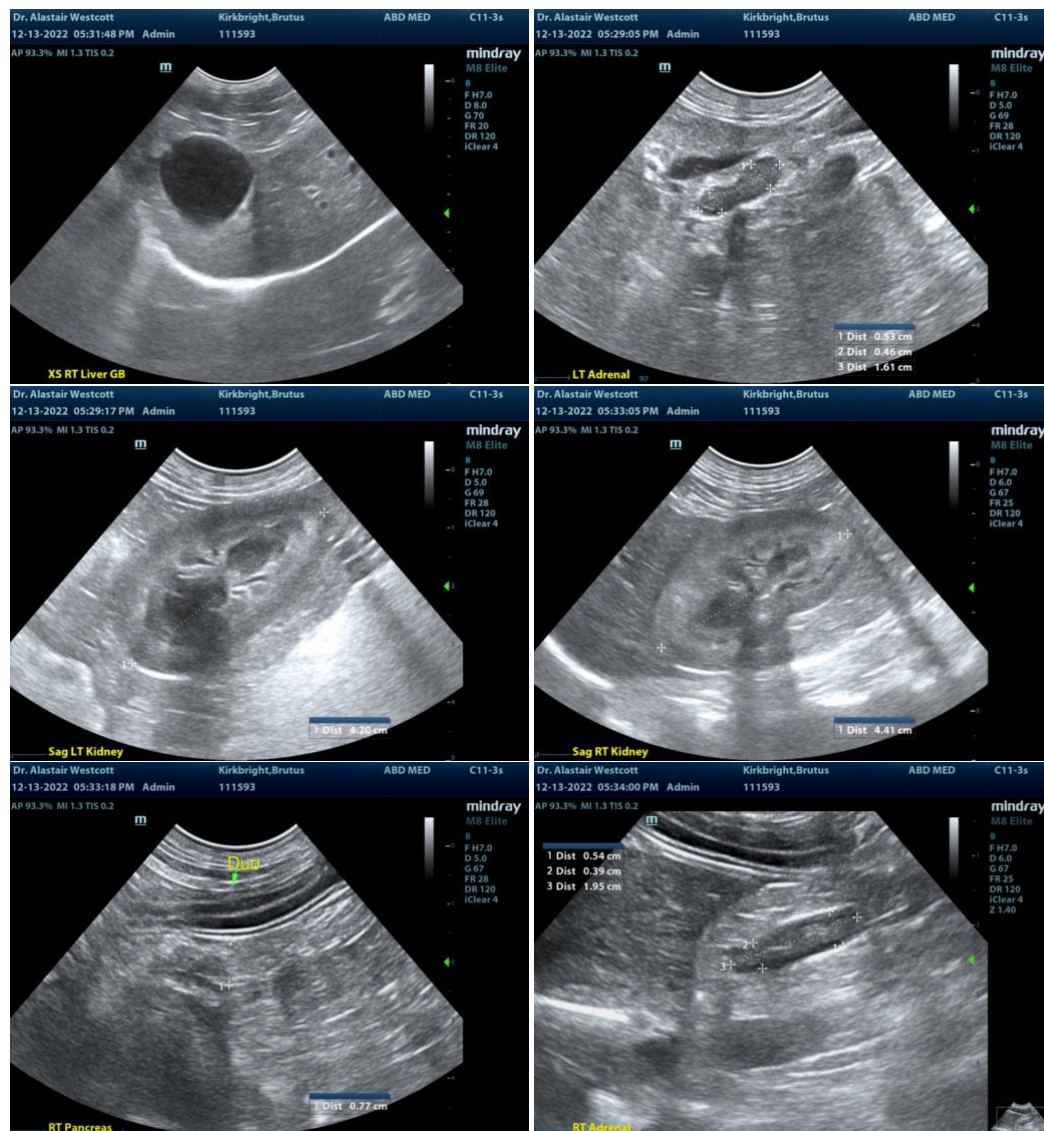
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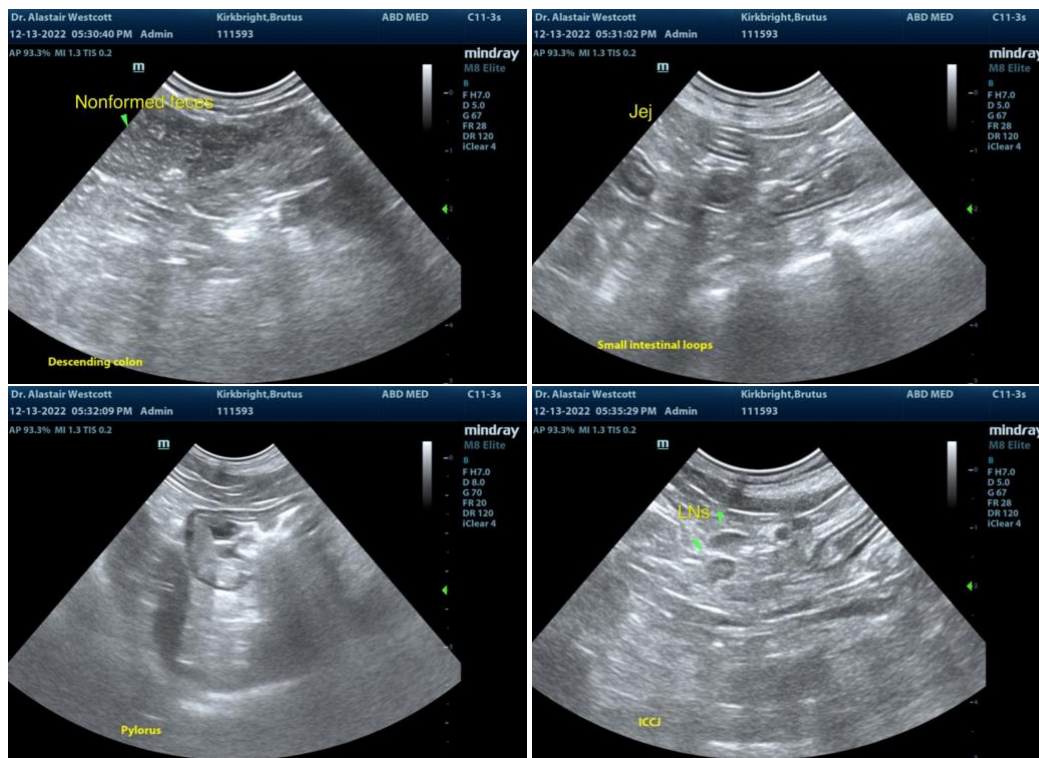
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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