



PATIENT PRESENTING CLINICAL SIGNS

Pip Bried Lethargy, trembling, inappropriate elimination, tachycardia.

Medication: Clavamox, Mirtazipine, Metronidazole, Cerenia, Ursodial, Denamarin

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Alp >2000, ALT 914, GGT 33, TBIL 5.5, BUN 8, CREAT 0.6, GLU 97, ALB 2.9, WBC 10.6

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Mixed

Urinary System

The urinary bladder was subnormal in size which prohibited full evaluation of the urinary bladder walls. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Minimal 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

MN

AGE

2013

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.2 cm in length. The right kidney measured 5.0 cm in length

WEIGHT

23.4

The area of the aortic trifurcation was free of pathology.

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

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 0.57 cm width at the caudal pole and 2.1 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.59 cm width at the caudal pole and 2.1 cm length.

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

Lehigh Valley AH Allen

Liver

REFERRING VET

Dr. Hersh

The liver presented mildly 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 mildly distended in size with primarily anechoic luminal content and mild non-dependent echogenic non-organized debris. The cystic and common bile ducts were normal.

INVOICE

12425ag

DATE

12/15/2022

Gastrointestinal



PATIENT 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.

Pip Bried

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.

SPECIES

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

Canine

Pancreas

BREED

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.

Mixed

Free Abdomen

SEX

No peritoneal effusion was present.

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Intermittent mildly prominent to enlarged mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a lymph node measured 0.4 cm. This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.

AGE

2013

ULTRASONOGRAPHIC FINDINGS

WEIGHT

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- Hepatopathy-subjectively benign, vacuolar hepatopathy, non-obstructive cholestasis, inflammatory/immune mediated disease, hematopoiesis, hyperplasia, infiltrative neoplasia (less likely) possible
- Gallbladder debris (non-mucocele)
- Unremarkable GI tract-potential of low-grade gastroenteritis

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(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered for further assessment primarily to assess for and identify inflammatory cell type if present. Hepatic functionality is subjectively normal given normal ALB, GLU and BUN levels. A leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area. A hepatic core surgical biopsy may be required for a definitive diagnosis. If GI signs are present, a GI panel to include PLI/TLI/Cobalamin/Folate is recommended.

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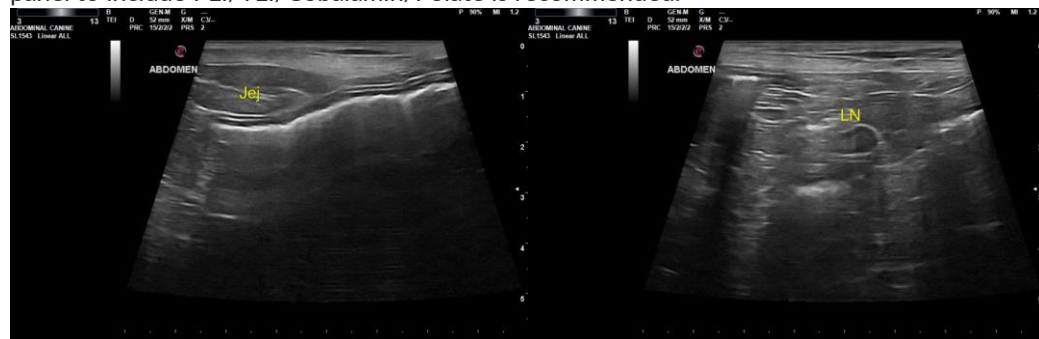
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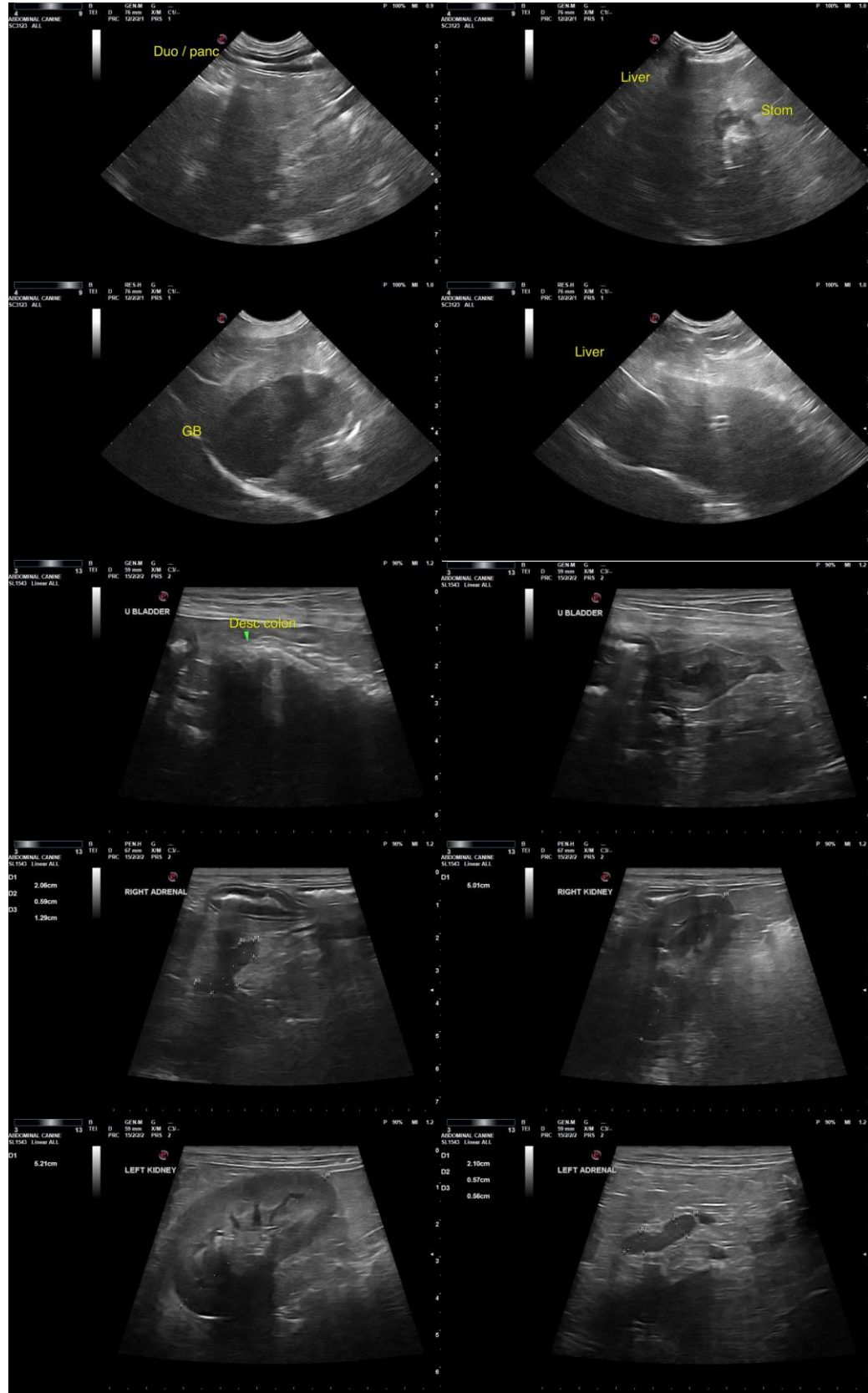
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PATIENT

Pip Bried

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.

SPECIES

Canine

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.

BREED

Mixed

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