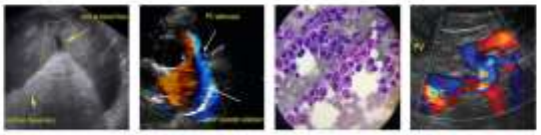


PATIENT

Chloe Wentz

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

14 years

WEIGHT

12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

Lehighton AH

REFERRING VET

Dr. Carpenter

INVOICE

12900

DATE

12.28.2021

PRESENTING CLINICAL SIGNS

History: Frequent, inappropriate urination, dribbling, decreased appetite, weight loss

Medication: Galliprant

ALT 149, BUN 29

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was subnormal in size owing to a lack of urine distention. Minimal anechoic urine was present. Subtle asymmetrical luminal surface contour was present. The urinary bladder mural echogenicity was subtly nonhomogeneous yet without evidence of mural mineralization or distinct masses. The apical urinary bladder wall measured 0.48 cm. The proximal urethra exhibited subjective mild prominent size yet maintained symmetrical contour and normal tone to a depth of 2.0 cm. Pinpoint areas of suspected nonobstructive luminal mineral were present in the proximal urethra. The proximal urethra measured 0.43 cm in width.

The area of the aortic trifurcation was free of pathology.

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. Pinpoint medullary mineral were noted in the left kidney. No evidence of pyelectasia was present. The left kidney measured 3.3 cm in length. The right kidney measured 3.2 cm in length.

Adrenal Glands

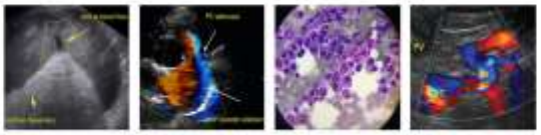
The caudal pole of the left adrenal gland was mildly prominent in size yet maintained symmetrical capsule contour. Mild parenchyma heterogeneity and mild capsule asymmetry were present without suspicion for overt neoplasia. The left adrenal gland measured 0.36 cm width in the cranial pole and 0.62 cm width in the caudal pole. No evidence of left adrenal neoplastic criteria was noted.

The right adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry were present without suspicion for overt neoplasia. The right adrenal gland measured 0.55 cm width in the cranial pole and 0.49 cm width in the caudal pole.

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.

Pennsylvania Mobile
VETERINARY ULTRASOUND SERVICES
IMAGING PERFORMED BY
PAMobileVet.com 443-794-4700



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Chloe Wentz

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

14 years

WEIGHT

12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

Lehighton AH

REFERRING VET

Dr. Carpenter

INVOICE

12900

DATE

12.28.2021

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature was normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact yet subjective mild prominent wall layering with minor retained anechoic fluid present in the pylorus. The ventral gastric body wall width measured 0.6 cm. The pylorus wall width measured 0.53 cm.

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. The jejunum wall width measured 0.35 cm.

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

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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Cystitis / urethritis pattern with suspect pinpoint nonobstructive proximal urethral luminal mineral
- Mild age-related kidneys, no overt pyelonephritis
- Low-grade hepatopathy - subjectively benign
- Mild gallbladder debris - non-mucocele
- Suspect mild gastritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Reassessment of the full urinary bladder for further evaluation of the urinary bladder walls would be ideal. Cystitis along with concurrent urethritis is suspected. Potential for emerging urinary bladder or urethral neoplastic process is thought less likely, yet cannot be definitively excluded. Screening BRAF Assay may be considered. Recheck urine C/S ideally on a sterile urine sample may be considered.

Medical therapy for cystitis/urethritis i.e., anti-inflammatories +/- incontinence medications may prove beneficial. Likewise, a Prazosin trial could be considered If a clinical concern for urethral hyperreflexia.

PATIENT

Chloe Wentz

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

14 years

WEIGHT

12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

Lehighton AH

REFERRING VET

Dr. Carpenter

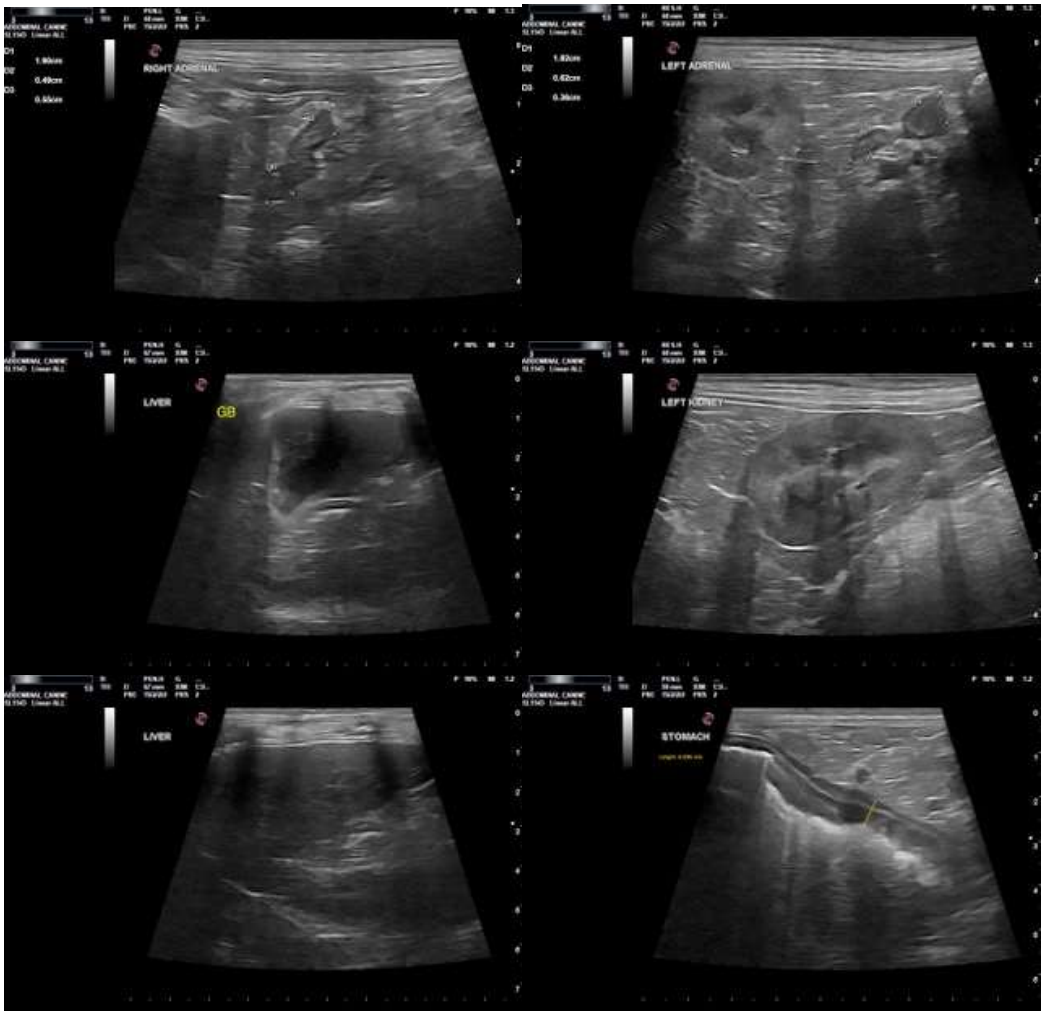
INVOICE

12900

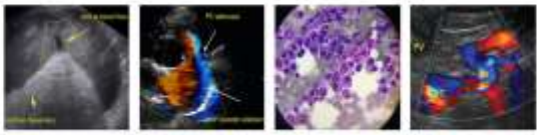
DATE

12.28.2021

A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or rule out occult disease which may cause weight loss.



Pennsylvania Mobile
VETERINARY ULTRASOUND SERVICES
IMAGING PERFORMED BY
PAMobileVet.com 443-794-4700



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Chloe Wentz

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

14 years

WEIGHT

12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

Lehighton AH

REFERRING VET

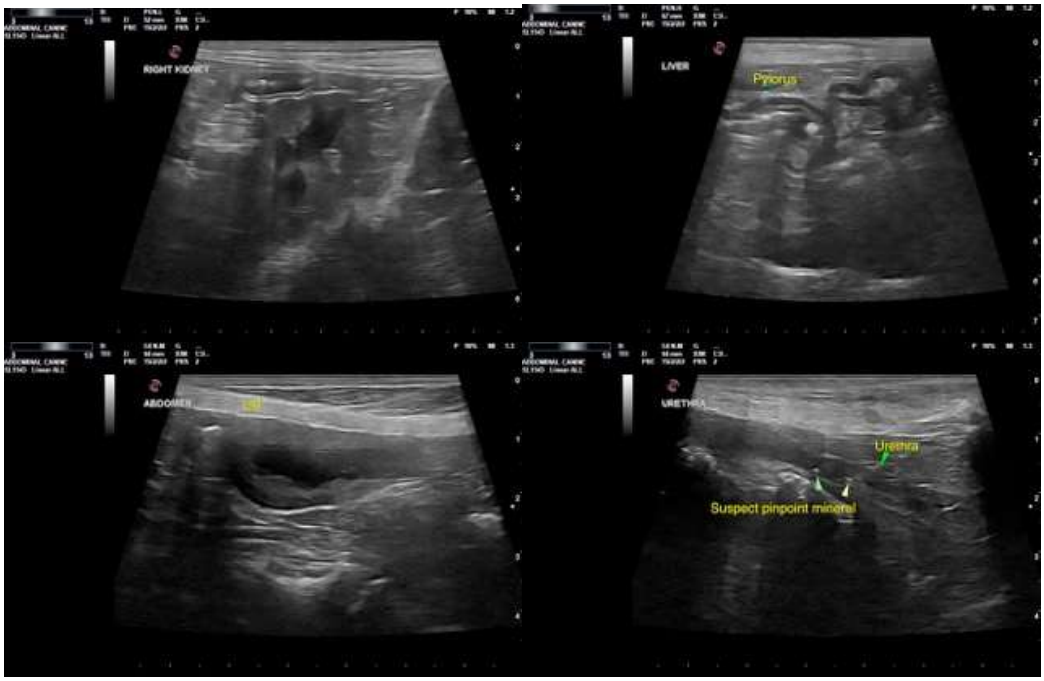
Dr. Carpenter

INVOICE

12900

DATE

12.28.2021



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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
mac.daniel@sonopath.com