



PATIENT PRESENTING CLINICAL SIGNS

Boomer Donchez

Proteinuria.

SPECIES

Canine

Medication: Fish oil

Urine specific gravity 1.041, 3+Protein, Negative Glucose & Blood, UPC 1.6, 4DX-Negative

BREED

Lab Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

FS

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no calculi or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of the aortic trifurcation was free of pathology.

AGE

2011

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 or pyelectasia. The left kidney measured 6.9 cm in length. The right kidney measured 6.4 cm in length.

WEIGHT

66

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.6 cm length x 0.68 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.7 cm length x 0.73 cm width at the caudal pole.

INTERPRETED BY

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

Spleen

IMAGING

PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

The spleen was normal in size and contour with subtle generalized splenic parenchyma heterogeneity. Intermittent nondisruptive variably echogenic hypoechoic to hyperechoic splenic nodules were present with an example measuring 0.75 cm in diameter. Normal splenic vascularity was present. The nodules did not distort the splenic capsule.

HOSPITAL NAME

Lehigh Valley AH
 (Allen)

Liver/ Gallbladder

REFERRING VET

Dr. Meyer

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 were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild, echogenic, nonorganized gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.

INVOICE

15747

DATE

12/29/22



PATIENT

Gastrointestinal

Boomer Donchez

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.

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Pancreas

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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.

SEX

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Free Abdomen

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No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

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- Sonographically unremarkable bilateral kidneys
- Normal urinary bladder - no evidence of overt inflammatory or neoplastic criteria
- Variably echogenic nondisruptive splenic nodules - subjectively benign, myelolipomas, discrete hyperplasia, hematopoiesis, small hematomas, or similar are likely
- Mild hepatic parenchymal remodeling - benign
- Minor gallbladder debris (non-mucocele)

INTERPRETED BY

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 (Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING

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Rebekah Jakum, CVT
 ARDMS/RVT

Overall, largely sonographically unremarkable abdomen without evidence of significant visceral, specifically upper or lower urinary tract pathology. Given the current UPC of 1.6 and assuming no evidence of azotemia, continued renal supportive care and periodic monitoring of UPC level or for evidence of polyuria/polydipsia would be reasonable. A renal diet could also be considered.

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Sonographic monitoring of the splenic nodules for evidence of progressive nodular changes +/- screening splenic FNA cytology, assuming normal clotting status and using a 25-gauge needle, for further assessment could be considered. Hepatosupportive medications including Denamarin and Ursodiol are suggested if evidence of hepatic enzyme elevations or cholestasis.

REFERRING VET

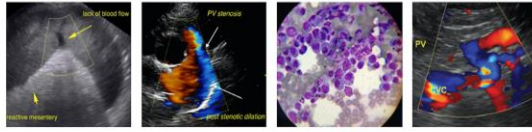
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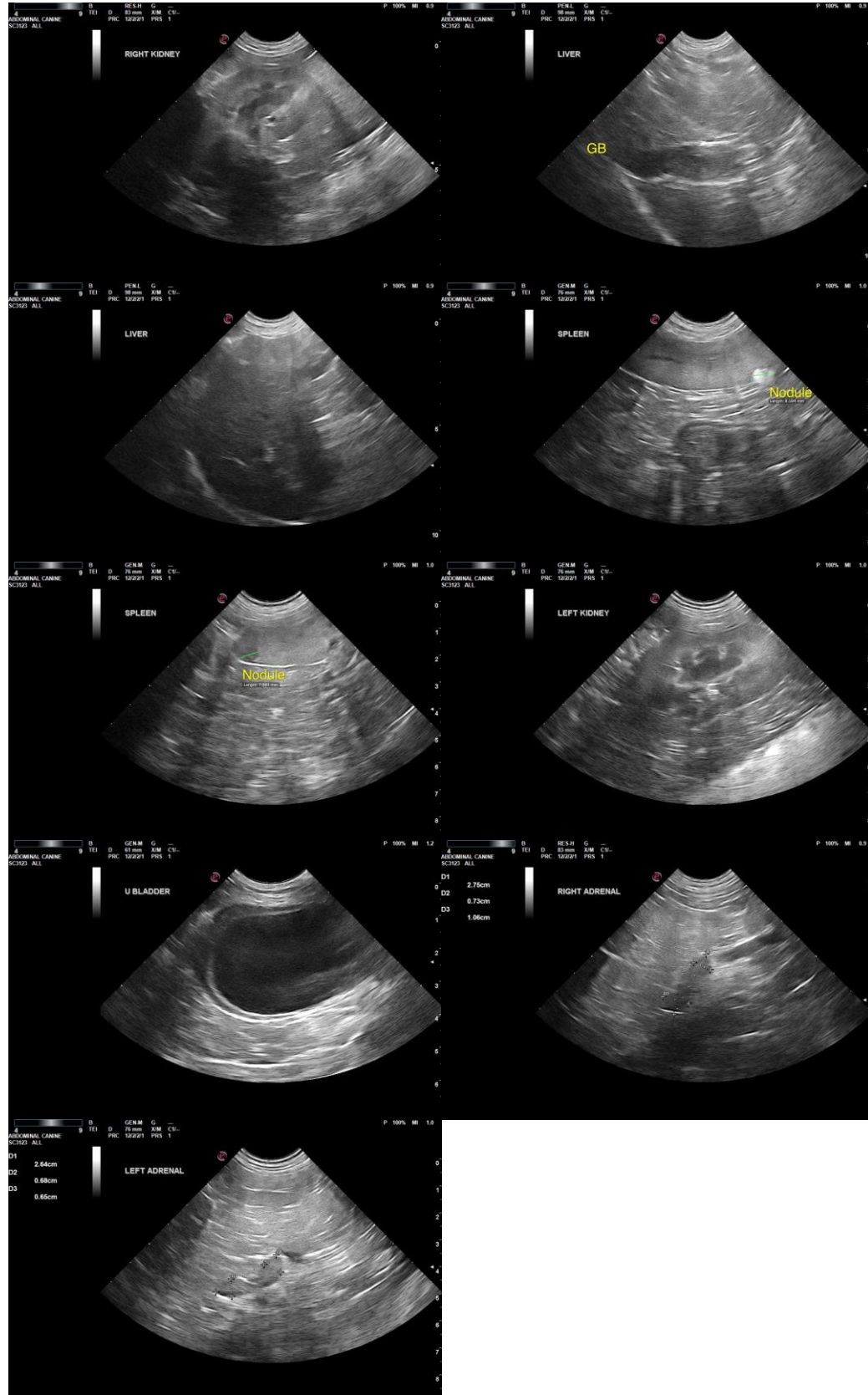
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

Lab Mix

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