



PATIENT

Caesar Ingoldsby

PRESENTING CLINICAL SIGNS

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

13 Years

WEIGHT

16 Pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Brighton Greens VH

REFERRING VET

Dr. Robin Janeway

INVOICE

33923

DATE

12/31/21

Had U/S performed 2/10/21 for chronic hepatopathy for comparison. Was treated and did well. Recently has no appetite and diarrhea. PE: dehydration, murmur grade 4/6 BW: TP 7.7, glob 4.6, ALT 205, ALP 194, BUN 119, Creat 3.9, BUN/Creat 31, Phos 7.2, T4 0.6, proteinuria 2+ with RBC likely iatrogenic from cysto. OPG, accuplex all negative. Recommend urine culture. Reason for Ultrasound: evaluate for liver mass and renal failure. Rad review: Radiographic Findings Three images of Caesar are available for evaluation. The stomach contains a small amount of gas and the lumen is void of solid ingesta. Some segments of small bowel are gas-filled and the wall of the bowel appears diffusely thickened and hypermotile. No bowel segments are distended. The colon contains formed feces. The liver is mildly enlarged and has a rounded caudal contour. The other abdominal structures are unremarkable and the serosal detail is adequate. Mild generalized cardiomegaly is present without specific chamber dilatation. The esophagus and other thoracic structures are unremarkable. The disc space at T12 - T13 is narrowed with mild spondylosis. Mild right stifle DJD is also present. Conclusion The bowel changes are consistent with enteritis/IBD. No indication of foreign body or obstruction. Small liver mass suspected. Recommend further evaluation with ultrasound. Mild generalized cardiomegaly with no evidence of cardiac decompensation. Craig Long, DVM, DACVR | 530-219-

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Bladder walls were generally sonographically unremarkable. A focal area of minor symmetrical mural hypertrophy present in the mid ventral urinary bladder wall measuring 0.22 cm in diameter. This area was not consistent with neoplastic criteria and likely incidental or focal age related urinary bladder change. Primarily anechoic urine present with very minor particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the left kidney. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Mild pyelectasia noted as well as focal areas of non-obstructive medullary mineral. The left kidney measured 4.3 cm.

The right kidney exhibited marked chronic degenerative changes with moderate hydronephrosis and asymmetrical margination. The fluid within the dilated right kidney medulla and pelvis was anechoic. Overt evidence of concurrent right hydroureter was not definitively evident.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.67



PATIENT

Caesar Ingoldsby cm at the cranial pole and 0.72 cm at the caudal pole. The right adrenal gland measured 0.76 cm at the cranial pole and 0.72 cm at the caudal pole.

SPECIES *Spleen*

Canine The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

BREED

Mix

SEX *Liver*

Neutered Male The liver exhibited subjective mild generalized enlargement. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Intermittent discreet, hyperechoic nodules and focal small parenchymal cysts are present. No evidence of masses. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size. Mildly prominent to echogenic gallbladder walls noted with moderate congealed yet mobile, non-organized luminal debris present. The common bile duct exhibited subtle non-obstructive proximal distention without evidence of mucoduct or calculi.

AGE

13 Years

WEIGHT

16 Pounds

Gastrointestinal

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

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. Gastric body wall measured 0.24 cm.

IMAGING BY

Loetitia Saint-Jacques,
LVT

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. Jejunum wall measured 0.25 cm.

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

HOSPITAL NAME *Pancreas*

Brighton Greens VH

The pancreas base and right pancreatic limb were prominent in size with asymmetrical margination, heterogeneous to remodeled parenchyma, with indistinct nodular changes. Subtle evidence of right pancreatic limb reactive mesentery noted.

REFERRING VET

Dr. Robin Janeway

Free Abdomen

No effusion. No lymphadenopathy.

INVOICE

33923

DATE

12/31/21



PATIENT

Caesar Ingoldsby

PRIMARY FINDINGS

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

- Left kidney moderate chronic changes with mild pyelectasia
- Right kidney marked progressive chronic changes with moderate hydronephrosis
- Chronic hepatopathy exhibiting parenchymal remodeling with intermittent discreet nodular changes and focal parenchymal cysts – subjectively benign, no evidence of hepatic masses.
- Moderate congealed yet subjectively mobile gallbladder debris with subtle evidence of chronic cholecystitis.
- Heterogeneous prominent to indistinctly nodular pancreas – age related changes, remodeling owing to previous inflammation, chronic pancreatitis with indistinct nodular hyperplasia suspected. Minor potential for emerging pancreatic neoplasia, yet considered unlikely.
- Mild gastroenteritis pattern – suspect resolving.

SECONDARY FINDINGS

AGE

13 Years

- Focal mild symmetrical ventral urinary bladder mural hypertrophy – likely incidental, age related change.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

16 Pounds

Potential for non-obvious right ureter obstruction cannot be definitively excluded. This patient may be passing intermittent mineral from the kidneys to the urinary bladder. Correlation with spec cPL could be considered. Functionality of the right kidney is highly questionable. Potential for chronic right kidney pyelonephritis cannot be definitively excluded. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

Continued as needed hepatic and gastrointestinal support warrante.

IMAGING BY

Loetitia Saint-Jacques,
LVT

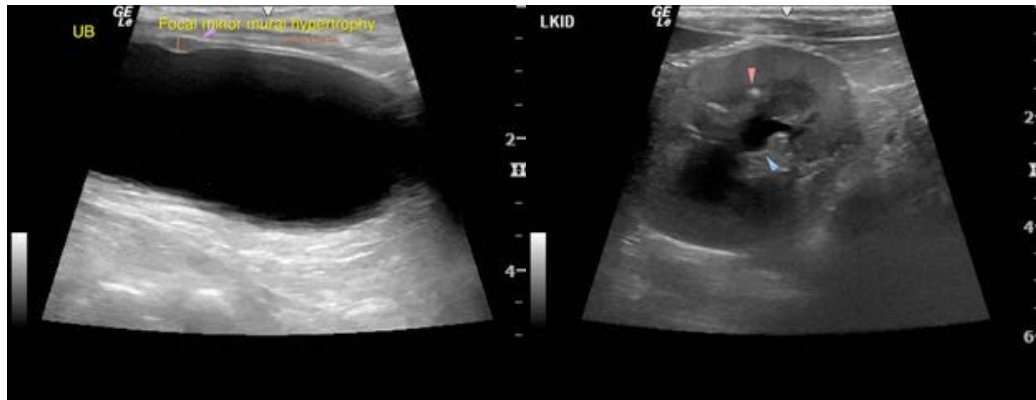
Continued monitoring for evidence of subxiphoid or cranial abdominal discomfort associated with either the gallbladder or the pancreas recommended.

HOSPITAL NAME

Brighton Greens VH

REFERRING VET

Dr. Robin Janeway



INVOICE

33923

DATE

12/31/21



PATIENT

Caesar Ingoldsby

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

13 Years

WEIGHT

16 Pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Brighton Greens VH

REFERRING VET

Dr. Robin Janeway

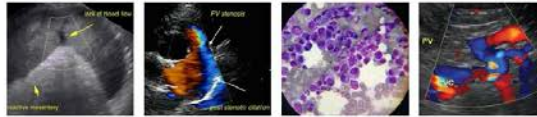
INVOICE

33923

DATE

12/31/21





PATIENT

Caesar Ingoldsby

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

13 Years

WEIGHT

16 Pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Brighton Greens VH

REFERRING VET

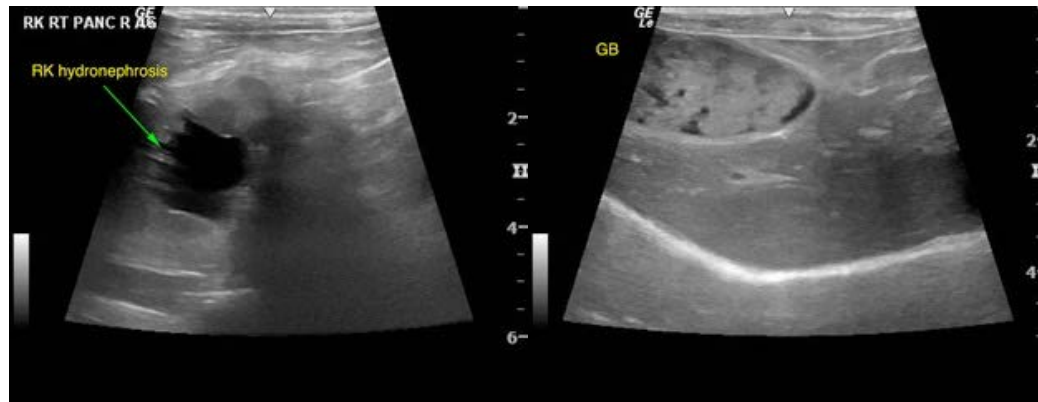
Dr. Robin Janeway

INVOICE

33923

DATE

12/31/21



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)
info@SonoPath.com