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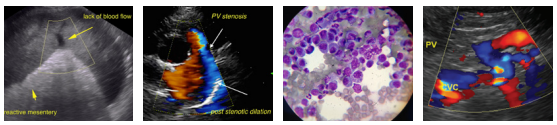

ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

PATIENT
Carmen Harris

SPECIES
Canine

BREED
Pit Bull

SEX
Spayed Female

AGE
11 Years

WEIGHT
62 Pounds

INTERPRETED BY
Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Jenna Walsh, CVT

HOSPITAL NAME
Whole Pet Vet Clinic

REFERRING VET
Dr. DeMarco

INVOICE
35379

DATE
2/1/22

PRESENTING CLINICAL SIGNS

Two week history of acting off/sick/adr. Reduced appetite in last 2-3 days. Getting pale gums with exercise/exertion. Bloodwork shows 50% less RBC parameters than last check in July 2021. No other significant bloodwork abnormalities. Not suspected to be hemolytic anemia. Looking in the abdomen for a source of bleeding or for mass. Current Medications Tramadol 50mg - Gabapentin 100mg and Galliprant 60mg
Abnormal PE/Chem/CBC/UA Results: PCV 22% and TP - 7.4 - IH

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

The area of the aortic trifurcation was free of pathology. No evidence of sublumbar or medial iliac lymphadenopathy.

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.6 cm. The right kidney measure 6.2 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.1 cm length x 0.62 cm at the caudal pole. The left adrenal gland measured 2.5 cm length x 0.60 cm at the caudal pole.

Spleen

The spleen exhibited potential for mild generalized enlargement with 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. No masses or nodules noted. 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.

Liver

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 with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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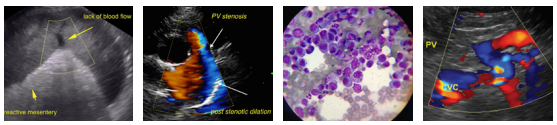

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild echogenic to focally shadowing ingesta/chyme. Ventral gastric body wall measured 0.37 cm. Pylorus wall measured 0.45 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. Jejunum wall measured 0.35 cm.

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

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.

Free Abdomen

No omental masses, lymphadenopathy or effusion.

Heart

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Focally shadowing gastric ingesta/chyme, overtly normal small bowel
- Minor hepatic parenchymal remodeling
- Mild gallbladder debris (non-mucocele)
- Potential mild splenomegaly exhibiting uniform parenchyma echogenicity – non-specific, suspect hyperplasia or hematopoiesis owing to anemia.
- Mild age related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely geriatric abdomen without evidence of significant visceral pathology. The focally shadowing gastric ingesta/chyme may indicate post-prandial presentation. However, if documented NPO, some degree of gastric hypomotility or stasis may be considered, while the possibility of potential gastric foreign material cannot be definitively excluded. Monitoring for normal gastric emptying is recommended.

Assuming normal clotting status, ultrasound guided FNA of the spleen using 25-gauge needle may be considered for screening cytology, primarily to ensure only benign changes are present and to rule out potential occult round cell neoplasia. CBC pathology review and infectious disease serology may be considered if clinically indicated. No evidence of intraabdominal masses or overt area of intraabdominal or gastrointestinal bleeding.

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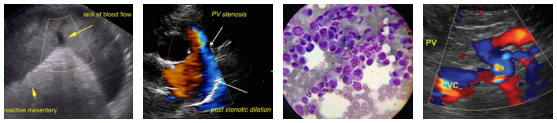

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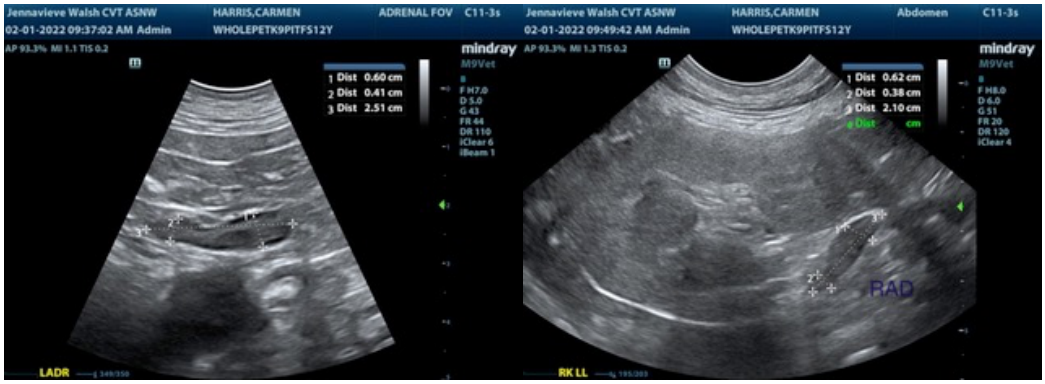

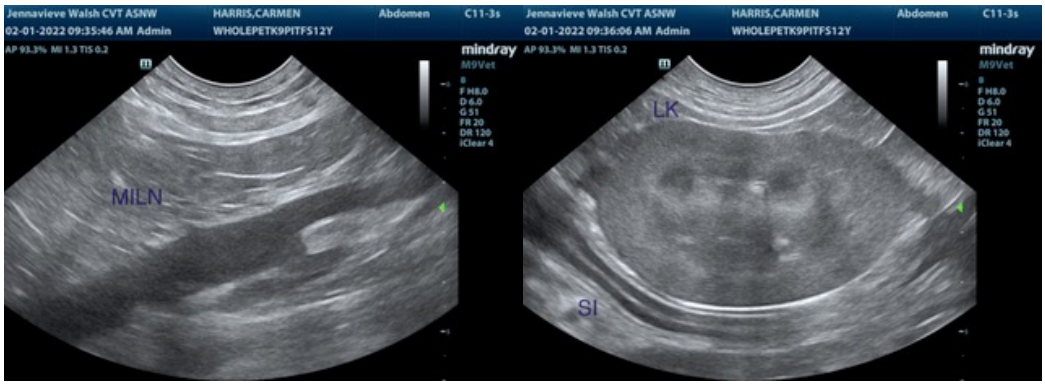

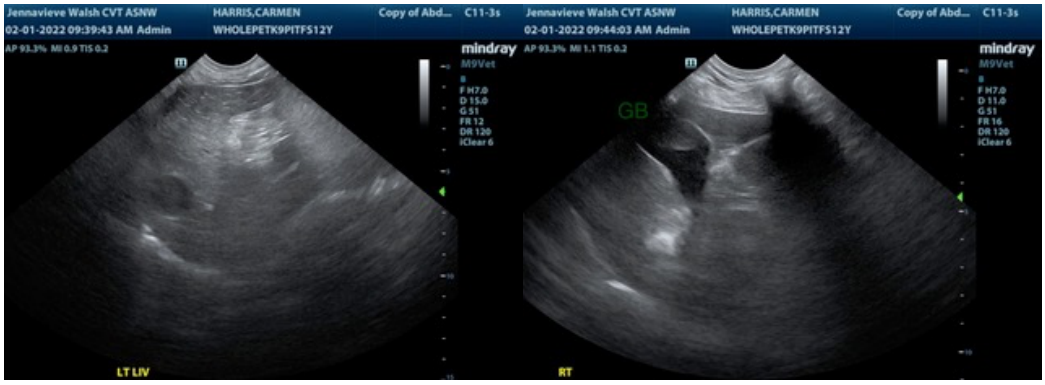

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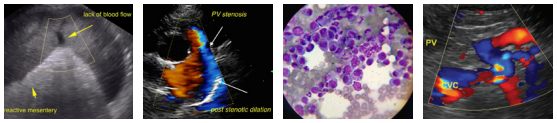

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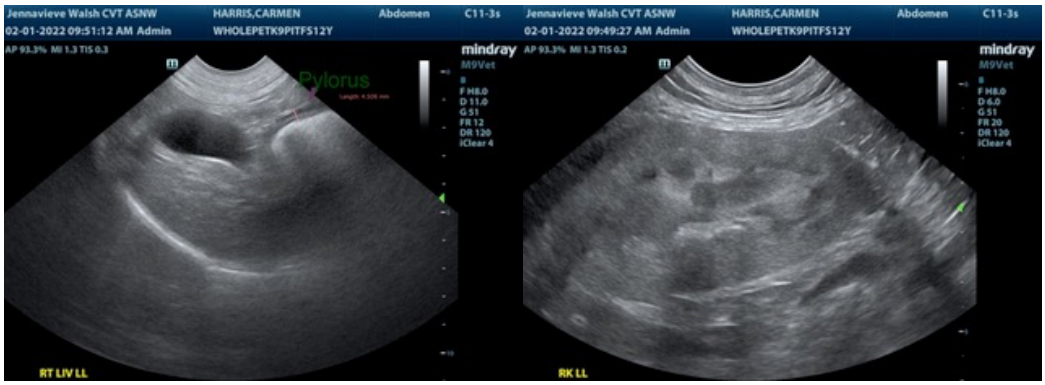

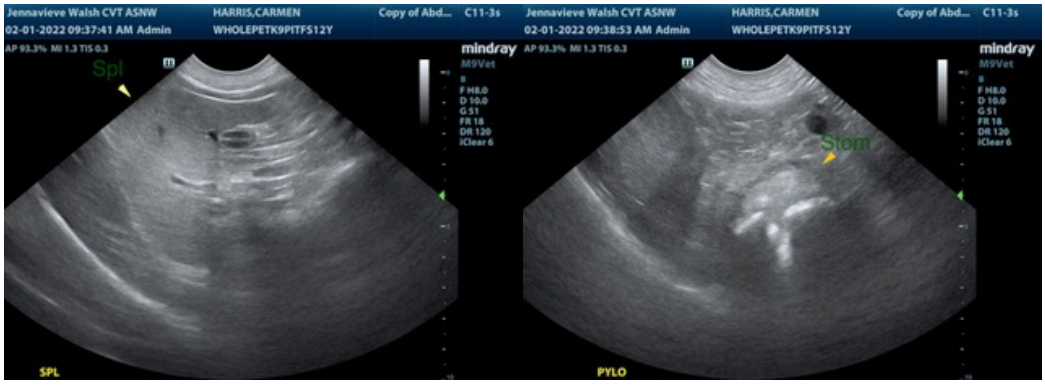

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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