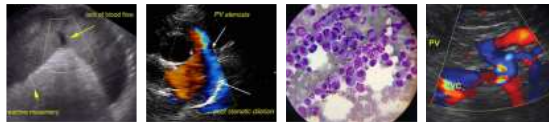


PATIENT	PRESENTING CLINICAL SIGNS
Cassandar Gleason	No abnormalities on physical exam Minor weight loss Abnormal PE/Chem/CBC/UA Results: Increased Liver values and history of increased kidney values previously
SPECIES	
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Shepherd Mix	Urinary System 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 was noted.
SEX	
FS	The area of the aortic trifurcation was free of pathology.
AGE	
10 years	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 5.5 cm in length. The right kidney measured 5.3 cm in length.
WEIGHT	
48.5 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.74 cm width at the caudal pole and 0.55 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.52 cm width at the caudal pole and 1.0 cm width at the cranial pole.
IMAGING PERFORMED BY	Spleen
Jenna Walsh, CVT	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	Liver/ Gallbladder
Paws Animal Hospital	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. Mild to moderate congealed subtly shadowing gallbladder debris was present. The gallbladder was otherwise normal without evidence of inflammatory criteria, as well as no evidence of peripheral gallbladder inflammation. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Johnson	
INVOICE	
13359	
DATE	
2/15/22	



PATIENT

Gastrointestinal

Cassandar Gleason

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

Canine

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 duodenum wall width measured 0.39 cm. The jejunum wall width measured 0.32 cm.

BREED

Shepherd Mix

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

SEX

FS

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.

AGE

10 years

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

48.5 lbs.

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

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

- Mild age-related renal change
- Hepatopathy - subjectively benign
- Mild to moderate inspissated gallbladder debris - potential for emerging cholelith
- Overtly normal gastrointestinal tract

IMAGING PERFORMED BY

Jenna Walsh, CVT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the liver was nonspecific yet most consistent with benign hepatopathy. Depending on the degree of hepatic enzyme elevation, vacuolar hepatopathy, nonspecific inflammatory hepatopathy (viral, bacterial, Leptospirosis, etc.), are possible. The potential for hepatic neoplasia is considered an unlikely differential diagnosis. Hepatosupportive medications including Ursodiol if evidence of cholestasis, are recommended.

HOSPITAL NAME

Paws Animal
Hospital

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

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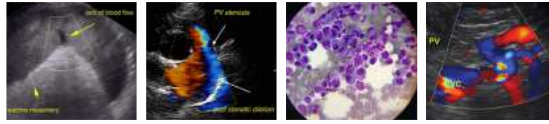
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Overall, an obvious cause of the patient's minor weight loss was not definitively evident. A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or rule out occult disease which may cause weight loss.

DATE

2/15/22



PATIENT

Cassandar Gleason

SPECIES

Canine

BREED

Shepherd Mix

SEX

FS

AGE

10 years

WEIGHT

48.5 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Paws Animal
Hospital

REFERRING VET

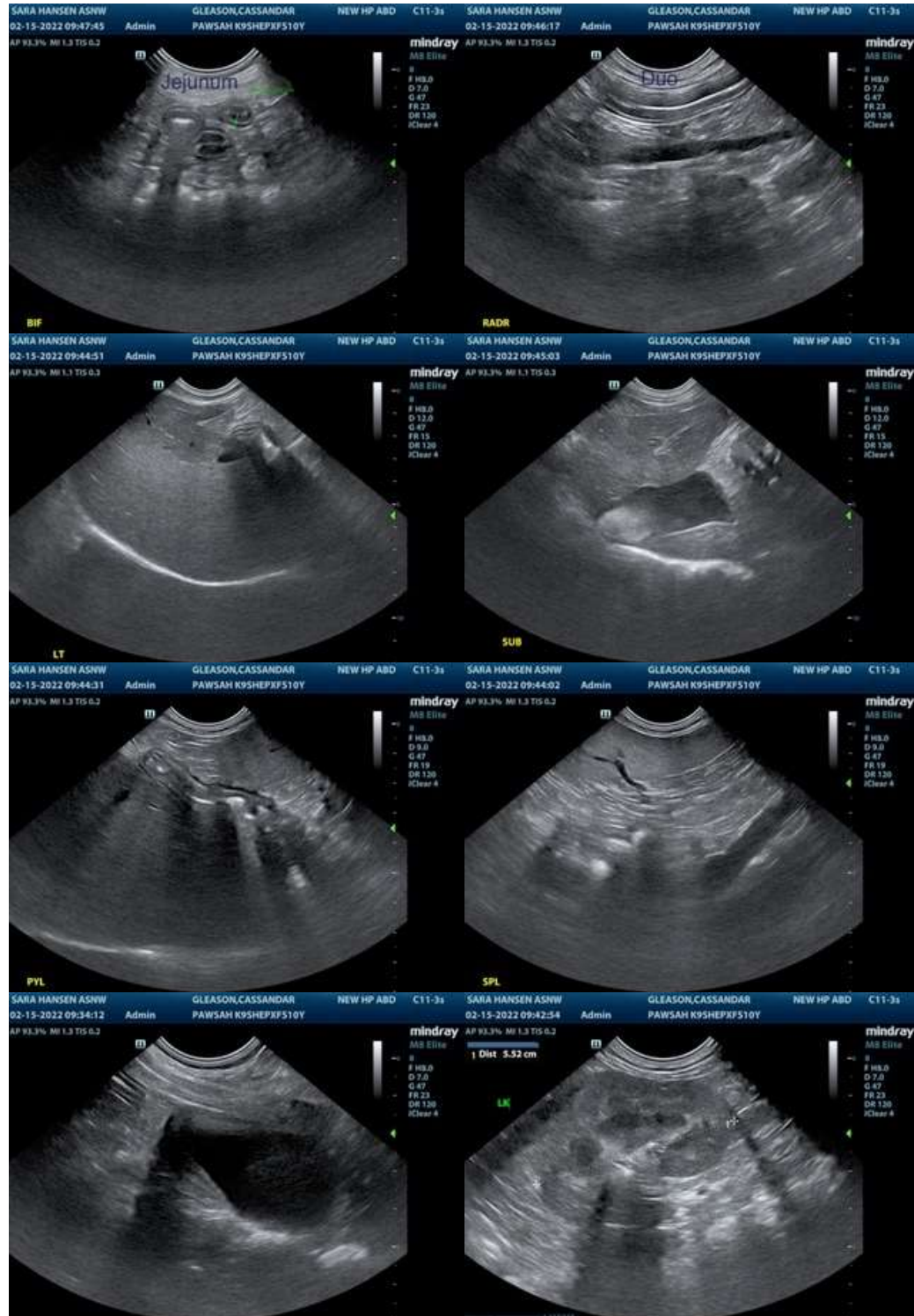
Dr. Johnson

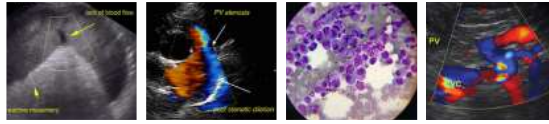
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PATIENT

Cassandar Gleason

SPECIES

Canine

BREED

Shepherd Mix

SEX

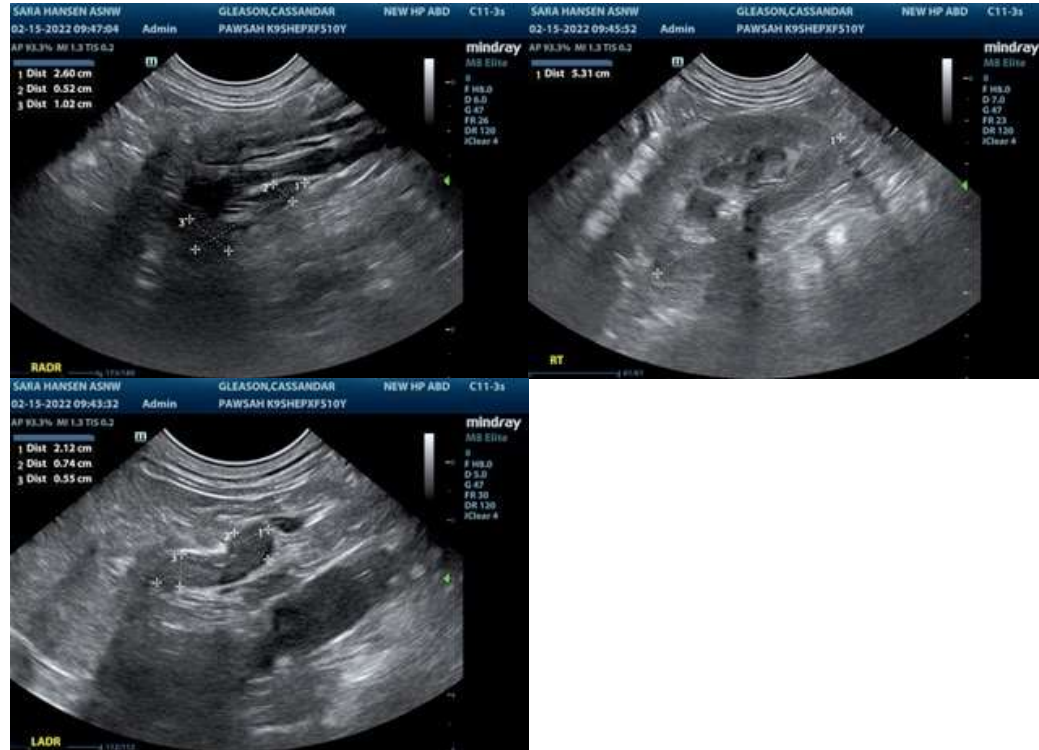
FS

AGE

10 years

WEIGHT

48.5 lbs.



INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

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.

HOSPITAL NAME

Paws Animal
Hospital

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

REFERRING VET

Dr. Johnson

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