



**PATIENT**

Solveig Pearson

**SPECIES**

Canine

**BREED**

German Shorthaired  
Pointer

**SEX**

F/S

**AGE**

2 years

**WEIGHT**

25.5 kg

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Dr. Sarah Barthelemy

**HOSPITAL NAME**

Alpine Pet Hospital

**REFERRING VET**

Dr. Katz

**INVOICE**

16197

**DATE**

2/16/23

**PRESENTING CLINICAL SIGNS**

Presented for vomiting and urinary incontinence, wobbly. Ate something at park. Did have some vomiting which started 2-3 days prior the park ingestion incident. Past history of GI upsets.

Abnormal PE/Chem/CBC/UA Results: Weak positive in urine drug test for THC. Mild elevation in ALP 196 and GGT 14. Amylase and lipase elevation. Normal resting cortisol and T4 values.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, and cystourethral junction 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. The urethra exhibited overtly normal structure and tone to a depth of 4.0 cm.

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 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. The left kidney measured 6.0 cm in length. The right kidney measured 6.0 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.41 cm width at the caudal pole and 0.36 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 0.50 cm width at 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.

**Liver/ Gallbladder**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**Gastrointestinal**

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.



**PATIENT**

Solveig Pearson

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.

**SPECIES**

Canine

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

***Pancreas***

**BREED**

German Shorthaired Pointer

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**

F/S

***Free Abdomen***

**AGE**

2 years

Intermittent, variably prominent, mildly nonhomogeneous, mesenteric nodes were present in the mid-abdomen. The lymph nodes exhibited subtle asymmetrical contour. An example of the lymph node measured 4.5 cm x 0.77 cm with maintained normal width: length ratio (<0.5). No evidence of perilymphatic inflammation was noted.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

25.5 kg

- Structurally normal gastrointestinal tract
- Low-grade benign hepatopathy, sonographically normal gallbladder
- Normal pancreas - no sonographic evidence of active inflammation
- Variably prominent, nonhomogeneous, subjective benign / reactive, midabdominal mesenteric lymph nodes - lymphoid hyperplasia or possible reactive lymphadenitis secondary to inflammatory bowel episode
- Sonographically unremarkable urinary bladder and visible proximal urethra

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**IMAGING PERFORMED BY**

Dr. Sarah Barthelemy

Overall, no sonographic evidence of significant visceral pathology.

**HOSPITAL NAME**

Alpine Pet Hospital

Potential for dietary indiscretion, given the patient's history, is possible although the past history of gastrointestinal signs may suggest more chronic underlying gastrointestinal disease i.e., inflammatory bowel disease or other.

**REFERRING VET**

Dr. Katz

Likewise, the potential for low-grade or chronic pancreatitis, which may present as sonographically normal, could be possible. Further assessment may include a Spec cPL or ideally A GI panel to include PLI/TLI/Cobalamin/Folate.

**INVOICE**

16197

Empirically, as-needed gastrointestinal and generalized supportive care, given the possibility of possible toxin exposure, is recommended. Urinalysis +/- screening C/S on a sterile urine sample may be considered if evidence of persistent or progressive incontinence.

**DATE**

2/16/23



**PATIENT**

Solveig Pearson

**SPECIES**

Canine

**BREED**

German Shorthaired Pointer

**SEX**

F/S

**AGE**

2 years

**WEIGHT**

25.5 kg

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Sarah Barthelemy

**HOSPITAL NAME**

Alpine Pet Hospital

**REFERRING VET**

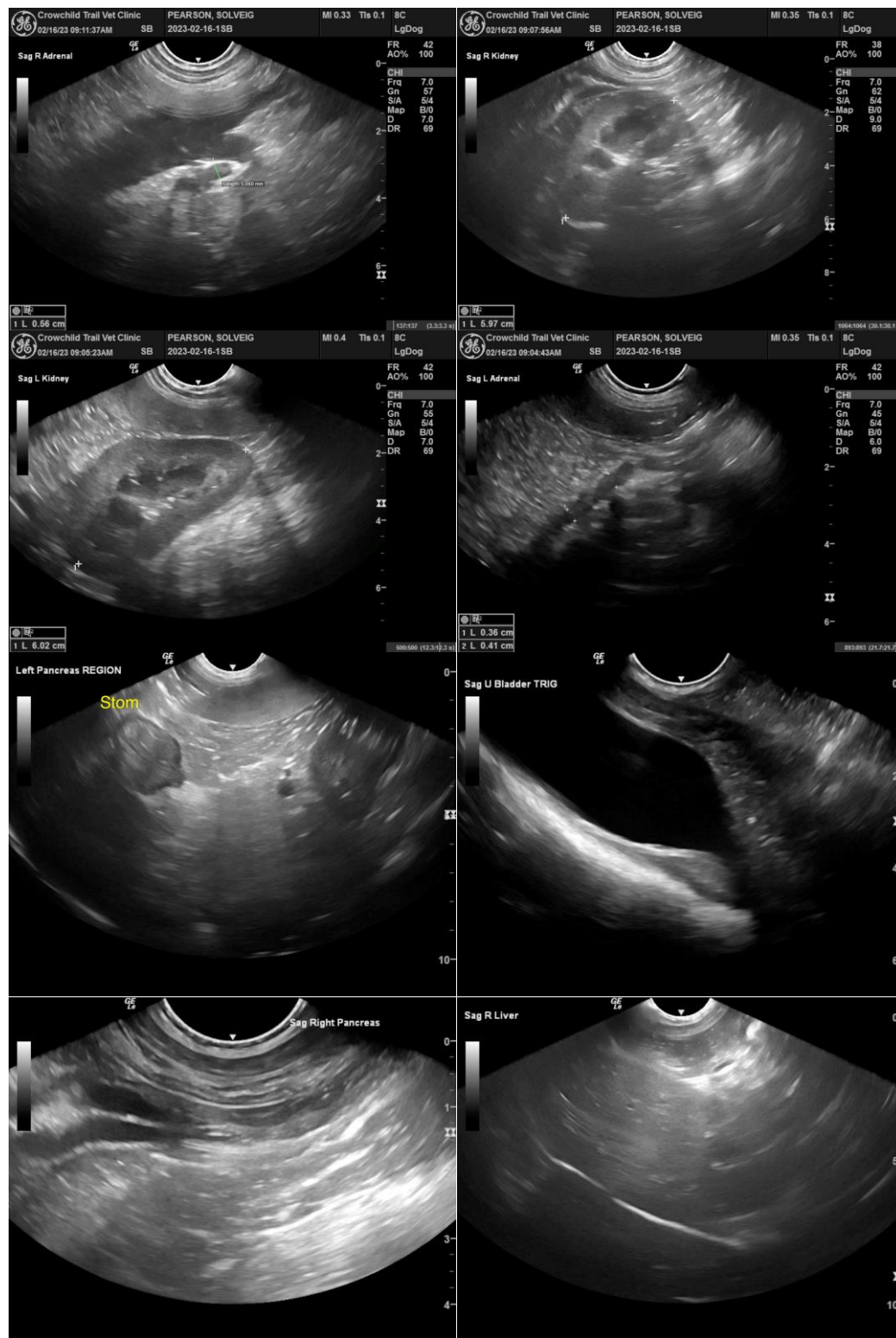
Dr. Katz

**INVOICE**

16197

**DATE**

2/16/23





## PATIENT

Solveig Pearson

## SPECIES

Canine

## BREED

German Shorthaired Pointer

## SEX

F/S

## AGE

2 years

## WEIGHT

25.5 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Sarah Barthelemy

## HOSPITAL NAME

Alpine Pet Hospital

## REFERRING VET

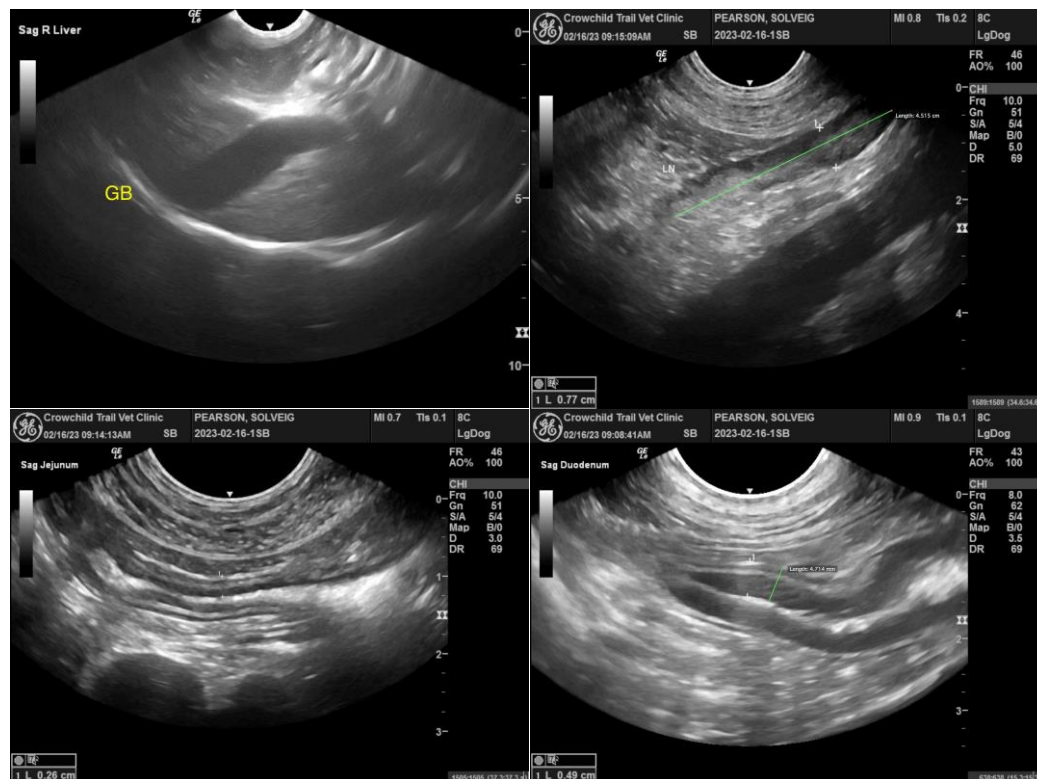
Dr. Katz

## INVOICE

16197

## DATE

2/16/23



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