



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Percy Moo Latimer	Acute onset V/d with blood. Currently at boarding kennel. Hx of pancreatitis. Cardiac patient ; Enalapril, Pimobendan, and furosemide
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.
Dachshund	
<b>SEX</b>	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. Mild non-obstructive bilateral medullary to lateral diverticuli mineral was present. The left kidney measured 4.3 cm in length. The right kidney measured 5.2 cm in length.
MN	
<b>AGE</b>	The area of the aortic trifurcation was free of pathology.
17yr	The area of the residual prostate appeared normal and free of pathology.
<b>WEIGHT</b>	<b>Adrenal Glands</b>
20	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.7 cm width at the caudal pole and 0.6 cm width at the cranial pole. The right adrenal gland was not definitively visualized.
<b>INTERPRETED BY</b>	<b>Spleen</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multiple to coalescing well-defined, symmetrical, hyperechoic nodules were present throughout the medial 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 or neoplastic changes were not noted. The hyperechoic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.
<b>IMAGING PERFORMED BY</b>	<b>Liver/Gallbladder</b>
Hope Brossman	The liver presented 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. A solitary non-disruptive mildly irregular hyperechoic nodule was present measuring 1.3 cm in diameter. 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. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	
Animal Mansion VH	
<b>REFERRING VET</b>	
Dr. Parker	
<b>INVOICE</b>	<b>Gastrointestinal</b>
13003ag	The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with mild retained primarily anechoic fluid was present.
<b>DATE</b>	
02/17/2023	



**PATIENT**

Percy Moo Latimer

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

**SPECIES**

Canine

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

**Pancreas**

**BREED**

Dachshund

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**

**SEX**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

MN

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

17yr

- Acute gastroenterocolitis pattern, suspect HGE
- Minor heterogenous pancreas-age related pancreatic changes, remodeling owing to previous inflammation or low grade to chronic pancreatitis possible
- Subjective mild hepatomegaly with solitary intraparenchymal nodule-benign, nodule likely consistent with focal nodular hyperplasia or lipogranuloma
- Mild chronic renal changes with mild non-obstructive medullary mineral

**WEIGHT**

20

**Secondary findings**

- Benign to coalescing splenic nodules, potential for medial capsule fibrosis

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Hospitalization with empirical therapy for HGE/chronic pancreatitis recommended. Dietary indiscretion / food hypersensitivity, enterotoxic insult, occult parasitism, infectious gastroenterocolitis, low grade to chronic pancreatitis or infiltrative neoplasia (thought less likely) all potentials. Pending clinical response to empirical therapy a GI panel to include PLI/TLI/Cobalamin/Folate +/- resting cortisol level could be considered to rule out occult disease.

**IMAGING PERFORMED BY**

Hope Brossman

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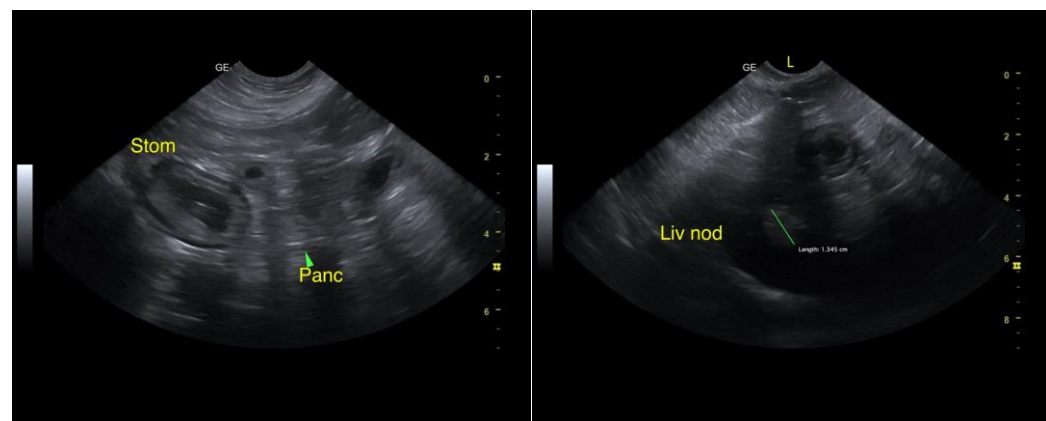
Dr. Parker

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**DATE**

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**PATIENT**

Percy Moo Latimer

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

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**AGE**

17yr

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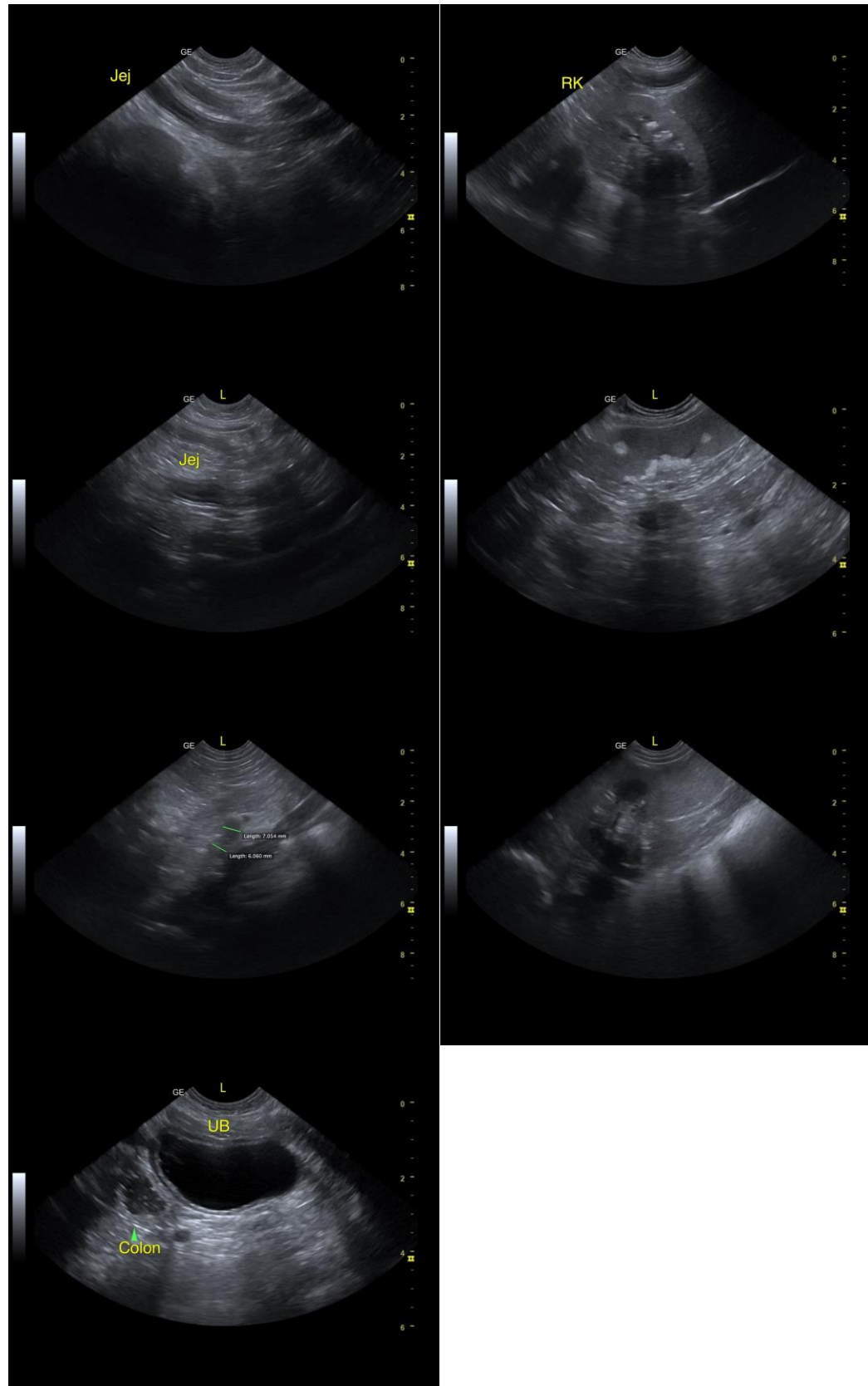
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**PATIENT**

Percy Moo Latimer

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**

Dachshund

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)  
[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)

**SEX**

MN

**AGE**

17yr

**WEIGHT**

20

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DVM, DABVP  
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