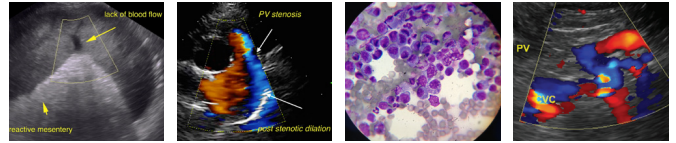


PATIENT	PRESENTING CLINICAL SIGNS
Troy Simmons	History: Presented today for one day of lethargy, hyporexia, and vomiting. Vomiting after drinking water. Drinking excessively. Has lost wt; reported to have weighed 15# 2 yr ago, would be 40% of body wt loss. O reports some signs that are suspected cognitive dysfunction.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Very subdued, depressed. Stands with wide base stance and head hanging. Weak. Possible grade 1/6 murmur. Cachectic. Tense, painful abdomen. Dehydrated.
Canine	leukocytosis and neutrophilia; wbc 21.53 (5.05-16.76); neutrophils 18.84 (2.95-11.64); bands, toxic neutrs suspected , eosinophils 1.01(0.06-1.23), cPL; >2000. Lactate 3.8
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Mix	Urinary System
SEX	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 were noted.
Neutered Male	
AGE	The area of the residual prostate appeared normal and free of pathology.
14 Years	No evidence of medial iliac or sublumbar lymphadenopathy.
WEIGHT	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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.3 cm in length. The right kidney measured 3.9 cm in length. A caudal thinly walled cyst was noted in the left kidney, measuring 1.3 cm in diameter.
8.7 Pounds	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left and right adrenal glands were not definitively visualized.
IMAGING PERFORMED BY	Spleen
Carter	The spleen was normal in size with areas of subtle capsule asymmetry and mild parenchyma heterogeneity. A solitary visualized nondisruptive well demarcated hyperechoic splenic nodule was noted, measuring 1.5 cm in diameter in the medial parenchyma.
HOSPITAL NAME	Liver
Willamette VH	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 parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion.
REFERRING VET	
Dr. Carter	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
INVOICE	Gastrointestinal
21139	The stomach exhibited moderate distention with retained fluid, noted primarily in the fundus and body, along with suspected retained variably echogenic mild irregular yet nonshadowing ingesta, primarily in the area of the antrum and pylorus. No obvious evidence of obstructive pyloric mural pathology, with the pylorus wall measuring 0.30 cm in wall width. The ventral gastric body wall measured 0.30 cm in wall
DATE	
2/17/23	



PATIENT

Troy Simmons

width. Concurrent mild gastric luminal gas artifact was noted. The area of the pyloric ingesta measured approximately 3.2 cm in diameter.

SPECIES

Canine

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor segmental nonshadowing mildly hyperechoic chyme and luminal gas were noted. No evidence of obstructive pattern.

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

Pancreas

BREED

Mix

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

Neutered Male

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings

AGE

14 Years

- Hypomotile stomach with suspect moderate variably echogenic yet nonshadowing pyloric ingesta
- Overtly normal small bowel with mild segmental ingesta/chyme- no evidence of obstructive pattern
- Heterogenous pancreas- not overtly consistent with significant/active pancreatitis

WEIGHT

8.7 Pounds

Secondary Findings

INTERPRETED BY

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

- Chronic renal changes with caudal left kidney cyst
- Benign splenic nodule- consistent with benign myelolipoma
- Mild hepatic parenchymal remodeling- benign

IMAGING PERFORMED BY

Carter

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Willamette VH

The suspected retained variably echogenic pyloric ingesta did not exhibit strong distal acoustic shadowing typically associated with gastric foreign material, however, the possibility of potential gastric foreign material cannot be definitively excluded. Likewise, marked irregular pyloric mucosal hypertrophy or ill-defined to unspecified pyloric mucosal mass lesion could be possible with potential for a more generalized structurally insignificant gastrointestinal disease, given the patients weight loss. The possibility of low grade to chronic pancreatitis as a contributing factor is possible yet sonographically the appearance of the pancreas did not indicate significant or active pancreatitis as a primary clinical player.

REFERRING VET

Dr. Carter

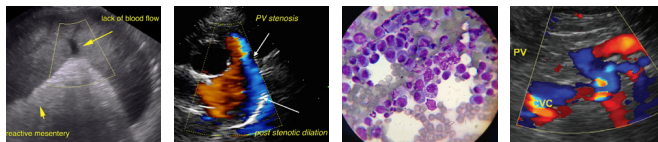
A GI panel to include PLI/TLI/Cobalamin/Folate, as well as thorough musculoskeletal and neurological examination to assess for occult disease is recommended. Hospitalization with rehydration protocol, as needed gastrointestinal supportive care with documented NPO and sonographic reassessment of the stomach in 24 hours is likely ideal. Alternatively, gastric endoscopy, once patient is stabilized (if available) may be considered for further clarification of the gastric interior.

INVOICE

21139

DATE

2/17/23



PATIENT

Troy Simmons

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

14 Years

WEIGHT

8.7 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Carter

HOSPITAL NAME

Willamette VH

REFERRING VET

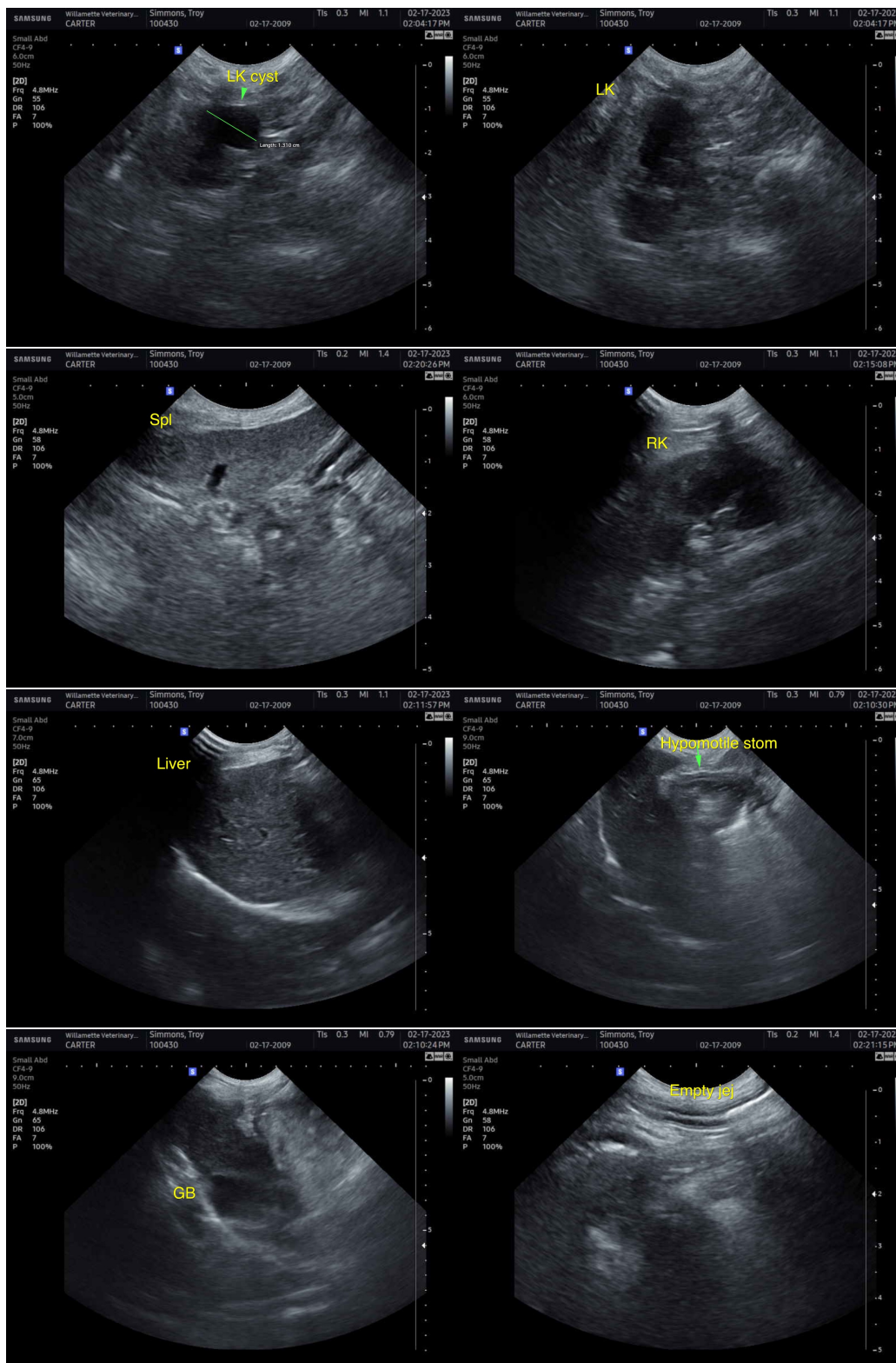
Dr. Carter

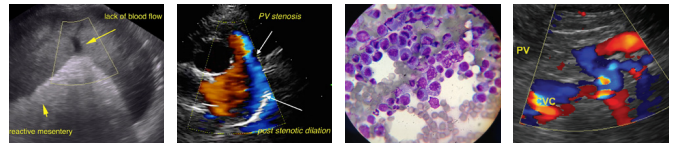
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DATE

2/17/23





PATIENT

Troy Simmons

SPECIES

Canine

BREED

Mix

SEX

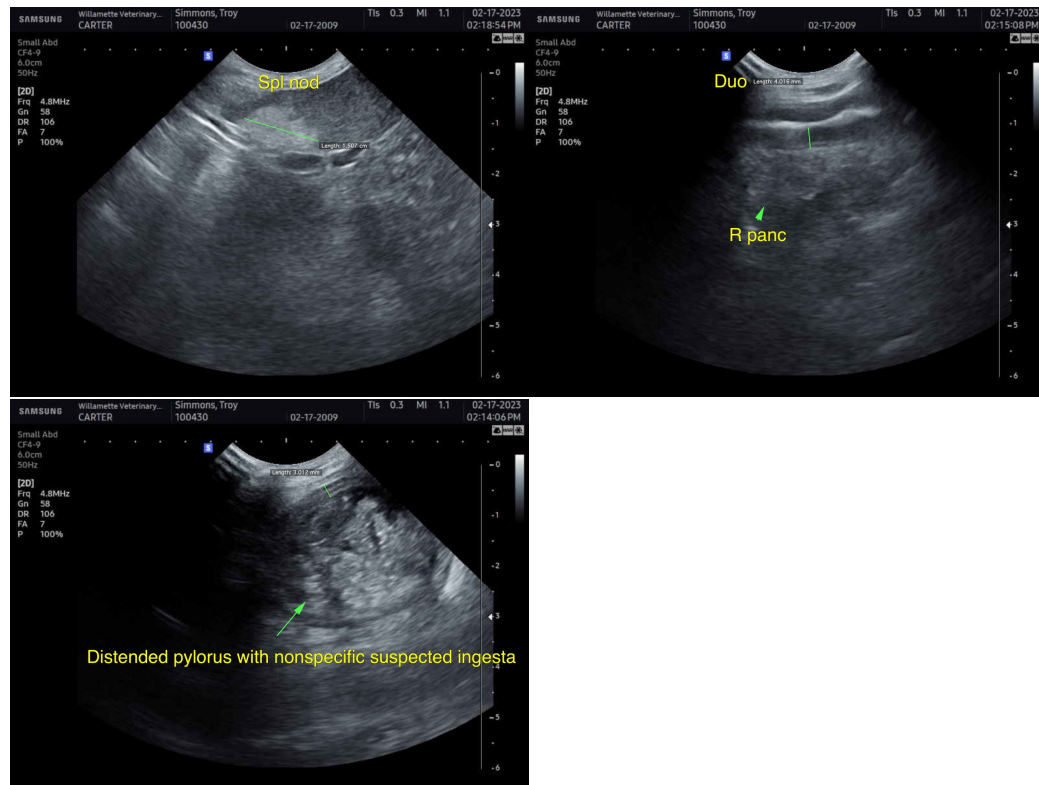
Neutered Male

AGE

14 Years

WEIGHT

8.7 Pounds



INTERPRETED BY

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

IMAGING PERFORMED BY

Carter

HOSPITAL NAME

Willamette VH

REFERRING VET

Dr. Carter

INVOICE

21139

DATE

2/17/23

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