



PATIENT

Luria Frida

SPECIES

Canine

BREED

Chihuahua

SEX

Intact Female

AGE

8

WEIGHT

7 lbs. 7 oz.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Tudor Suciu

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Tudor Suciu

INVOICE

16239

DATE

2/21/23

PRESENTING CLINICAL SIGNS

Presented 2/11/23 for vomiting once (food) and anorexia, no diarrhea. No change in the diet (commercial frozen food, owner cannot recall the brand name) prior to presentation. She was also shaking a lot and she was more quiet than usual; stomach was very hard at touch. Frida has a history of pancreatitis in 2021. She was treated as outpatient and sent home with oral Cerenia. While on medication Frida improved, but once the treatment was stopped 2 days ago, she became more quiet than usual, appetite was decreased yesterday and she didn't want to eat today. There was one episode of vomiting yesterday. She cries when the abdomen is touched. Frida lost 7 oz since 2/11, part of it due to dehydration (5-7%).

Abnormal PE/Chem/CBC/UA Results: Blood work done 2/11/23: CBC: normal WBC (7.18), with low monocytes (0.04) – R/O stress normal RBC, platelets CHEM: high albumin (4.0) – R/O dehydration high total bilirubin (0.7) stress hyperglycemia (149) EPOC: high hematocrit (56%) – R/O dehydration stress hyperglycemia (142) high potassium (5.2) low pH (7.326) AUS done 1/11/2021 (Dr Sergio Serrano LV, DVM, DACVECC) : Liver/Gb: Smooth surface, sharp edges, normal parenchyma and vasculature. Normal gallbladder and extrahepatic biliary tree. Spleen: Normal Kidneys: Both normal in size (left 3.8cm, right 4.0cm), shape, corticomedullary differentiation and pelvises GI Tract/ Pancreas: The stomach is moderately distended and gas filled, subjectively hypomotile, no evidence of mechanical obstruction. The intestines are normal in thickness and layering, there is increased gas without distension. The proximal duodenum is slightly corrugated and the left limb of the pancreas hypoechoic with bright surrounding omentum. Adrenals: Not visualized due to gas. Lymph Nodes: Normal Urinary bladder: Normal wall and anechoic contents Reproductive tract: No evidence of uterine enlargement or ovarian cysts. Assessment: Pancreatitis with delayed gastric emptying.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Minor, nondependent, particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted. The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.

The uterus was free of pathology. The left and right ovaries were not definitively visualized. No overt ovarian pathology was noted.

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 or pyelectasia. The left kidney measured 3.1 cm in length. The right kidney measured 3.2 cm in length.



PATIENT

Adrenal Glands

Luria Frida

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.45 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm width at the caudal pole.

SPECIES

Canine

BREED

Spleen

Chihuahua

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.

SEX

Intact Female

Liver/ Gallbladder

AGE

8

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 containing anechoic content with mild, nondependent, echogenic gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammation was noted. The cystic and common bile ducts were normal.

WEIGHT

7 lbs. 7 oz.

INTERPRETED BY

Gastrointestinal

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

The stomach presented intact borderline to mild prominent wall layering. The stomach contained luminal gas, as well as a mild amount of retained anechoic fluid. No evidence of mechanical pyloric outflow obstruction was noted.

IMAGING PERFORMED BY

Dr. Tudor Suci

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. No evidence of mechanical / metabolic ileus was noted. Intermittent luminal gas was present.

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

HOSPITAL NAME

Animal Clinic of
Queens

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.

REFERRING VET

Dr. Tudor Suci

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

INVOICE

16239

ULTRASONOGRAPHIC FINDINGS

DATE

2/21/23

- Minor urinary bladder sediment
- Heterogeneous to remodeled pancreas - possible remodeling owing to previous Inflammatory episode given the history, potential for low-grade to mild persistent chronic pancreatitis
- Mild hypomotile gastritis pattern, sonographically unremarkable small bowel



PATIENT

- Mild gallbladder debris (non-mucocele)

Luria Frida

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Potential for persistent low-grade to chronic pancreatitis may be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with a Spec cPL or ideally full GI panel to include PLI/TLI/Cobalamin/Folate to rule out concurrent nonstructural intestinal disease as a contributing factor is recommended. Low-fat bland or hydrolyzed diet, as-needed gastroprotectants, +/- empirical coverage for helicobacter may be considered with an assessment of clinical response. Sonographic reassessment of the stomach is recommended if evidence of persistent / progressive vomiting or anorexia.

Canine

BREED

Chihuahua

SEX

Intact Female

AGE

8

WEIGHT

7 lbs. 7 oz.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Tudor Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

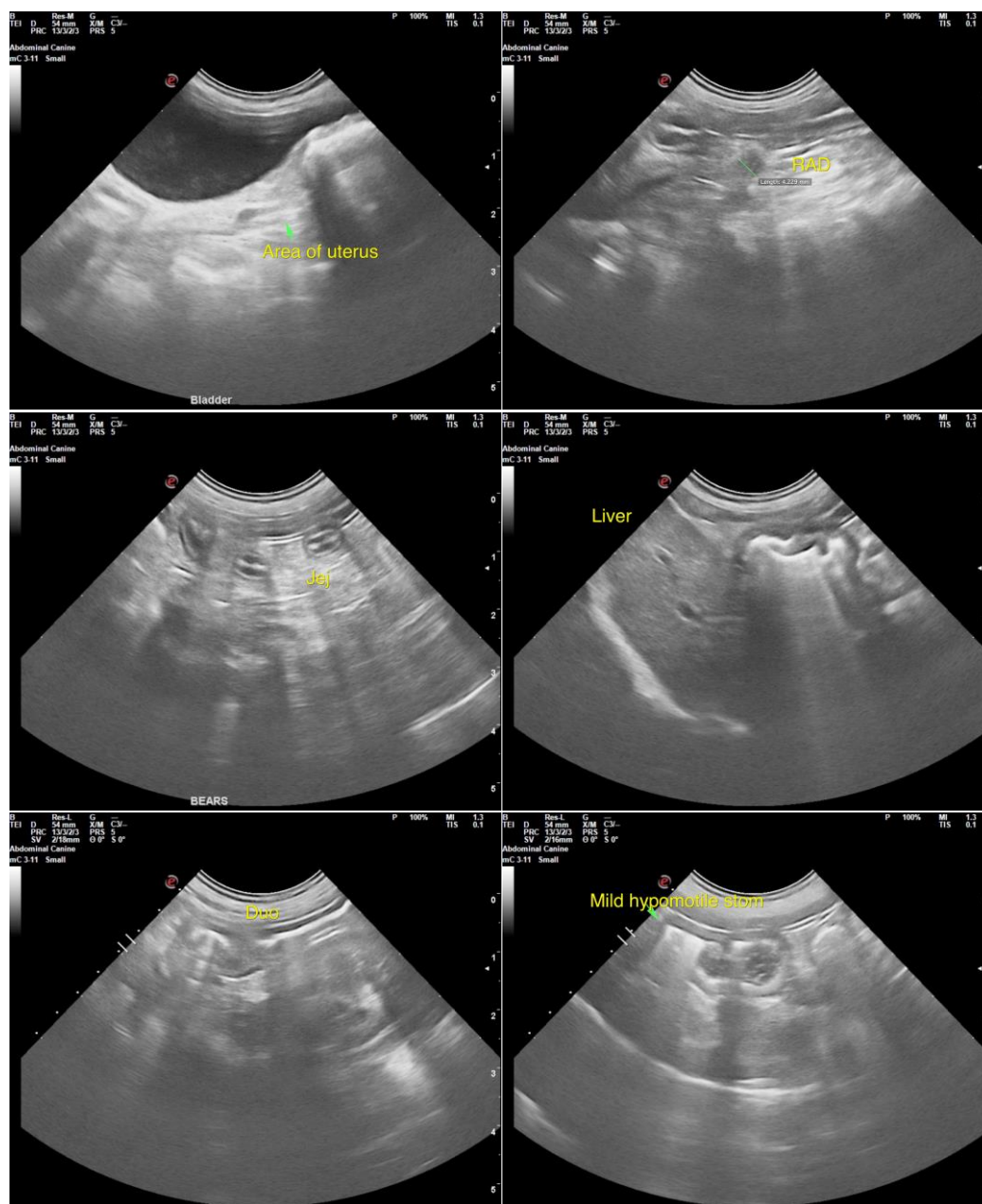
Dr. Tudor Suci

INVOICE

16239

DATE

2/21/23





PATIENT

Luria Frida

SPECIES

Canine

BREED

Chihuahua

SEX

Intact Female

AGE

8

WEIGHT

7 lbs. 7 oz.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Tudor Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

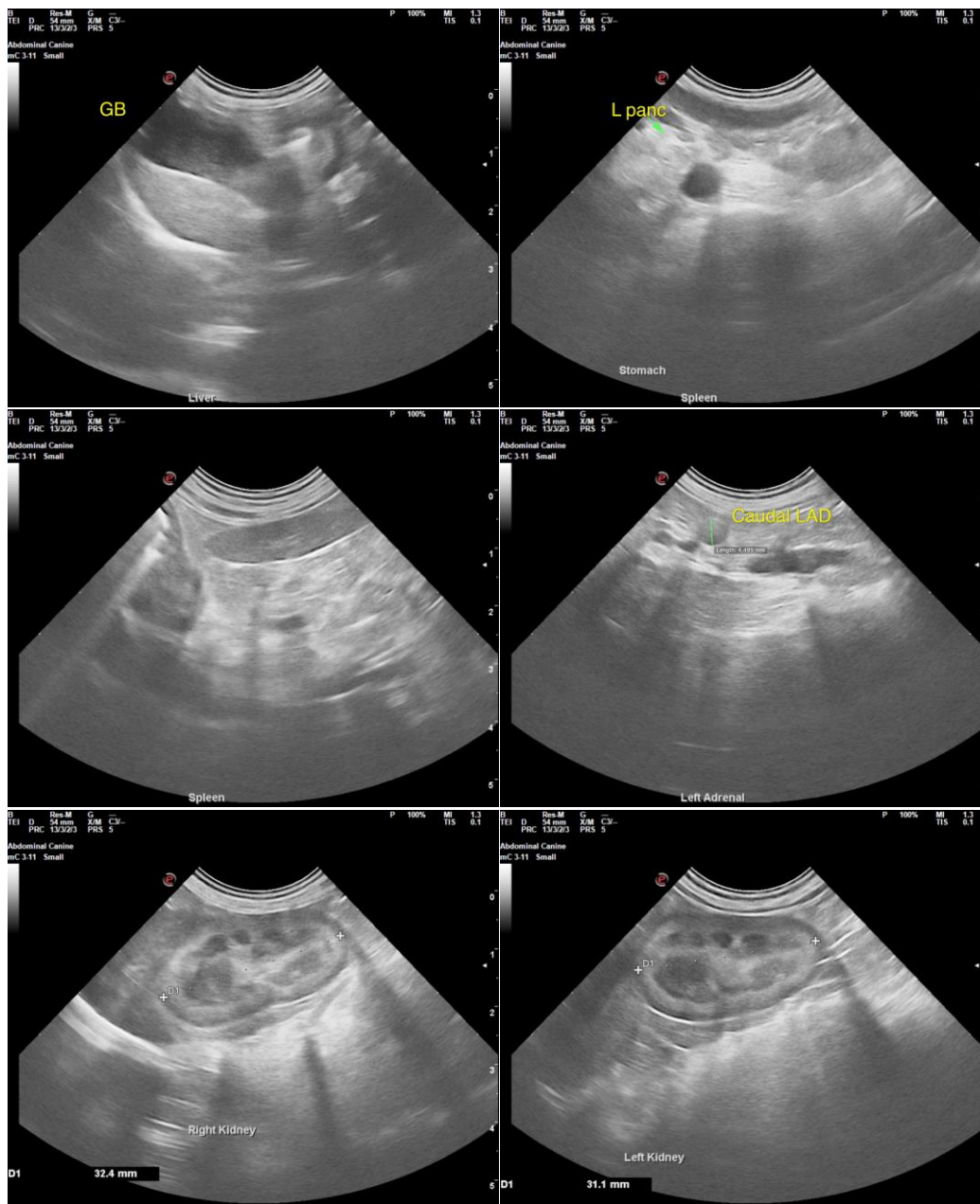
Dr. Tudor Suci

INVOICE

16239

DATE

2/21/23



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