



PATIENT

Kona Toornman

SPECIES

Canine

BREED

German Shepherd X

SEX

Spayed Female

AGE

10 Years

WEIGHT

75.6

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Hannah Fearing

HOSPITAL NAME

Laniar AH

REFERRING VET

Dr. Macie Joncas

INVOICE

45509

DATE

2/26/23

PRESENTING CLINICAL SIGNS

Kona is here because she has been vomiting. She vomited 4 times since 5am. She has been laying around and lethargic. Mom did not offer food today. She was herself yesterday. Mom says she has not gotten into anything or changed diets. She is on Purina Pro Plan Adult Shreds, Chicken and Pedigree canned. She is on Proheart and not on any medications. HST ON 2/17/23

Abnormal PE/Chem/CBC/UA Results: Total protein 8.3 ALT 752 BW on 2/17/23

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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 were 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. The left kidney measured 6.9 cm. The right kidney measured 6.8 cm.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.86 cm at the cranial pole and 0.87 cm at the caudal pole.

The right adrenal gland was indistinctly visualized, overtly normal in size, position, and shape, subjectively measuring 0.62 cm 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

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 mild to moderately gas distended. No overt evidence of retained ingesta, significant fluid, or mechanical pyloric outflow obstruction. No overt gastric foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no evidence of small intestinal mechanical/metabolic ileus with segmental to generalized luminal gas.



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

Kona Toornman

Pancreas

SPECIES

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 was evident.

Canine

BREED

Free Abdomen

German Shepherd X

No overt lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed Female

- Sonographically unremarkable gastrointestinal tract with mild to moderate gastric and intestinal gas pattern
- Non-specific yet subjectively benign hepatopathy with sonographically unremarkable gallbladder
- Normal pancreas

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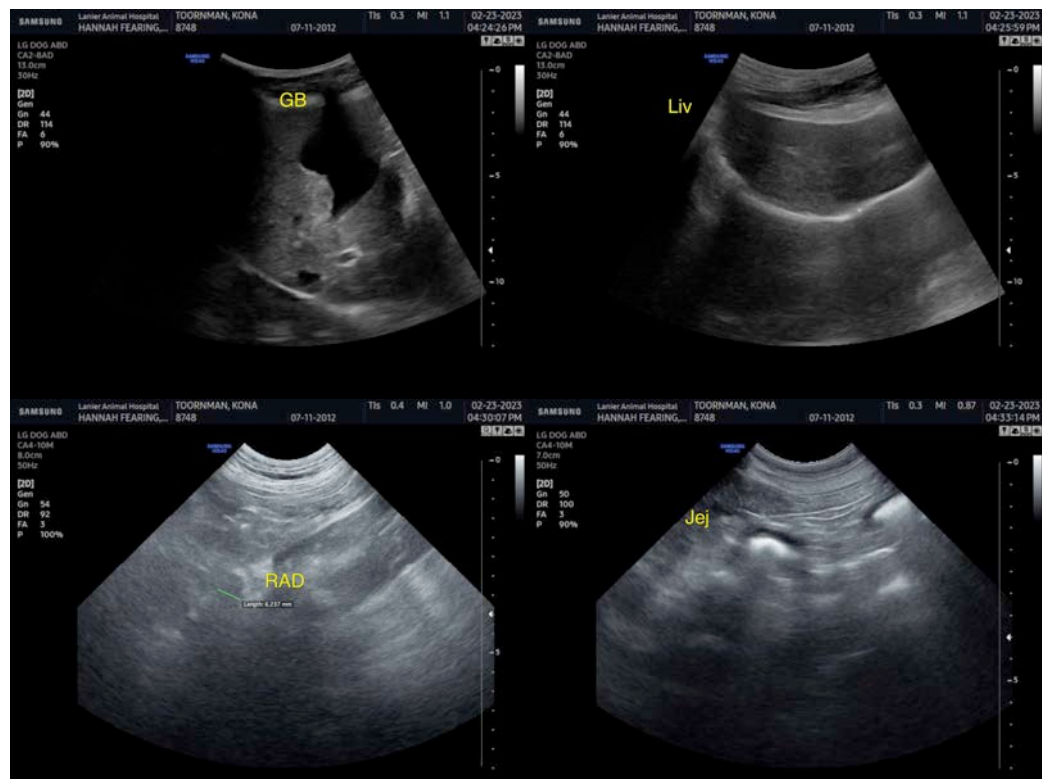
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Sonographically, no evidence of significant visceral pathology. Empirical gastrointestinal support and conservative therapy for gastroenteritis should prove beneficial. Concurrent hepatosupportive medications may be considered. Further assessment of the liver may include screening hepatic FNA cytology (assuming normal clotting status) +/- Leptospirosis titers/PCR if clinically indicated.

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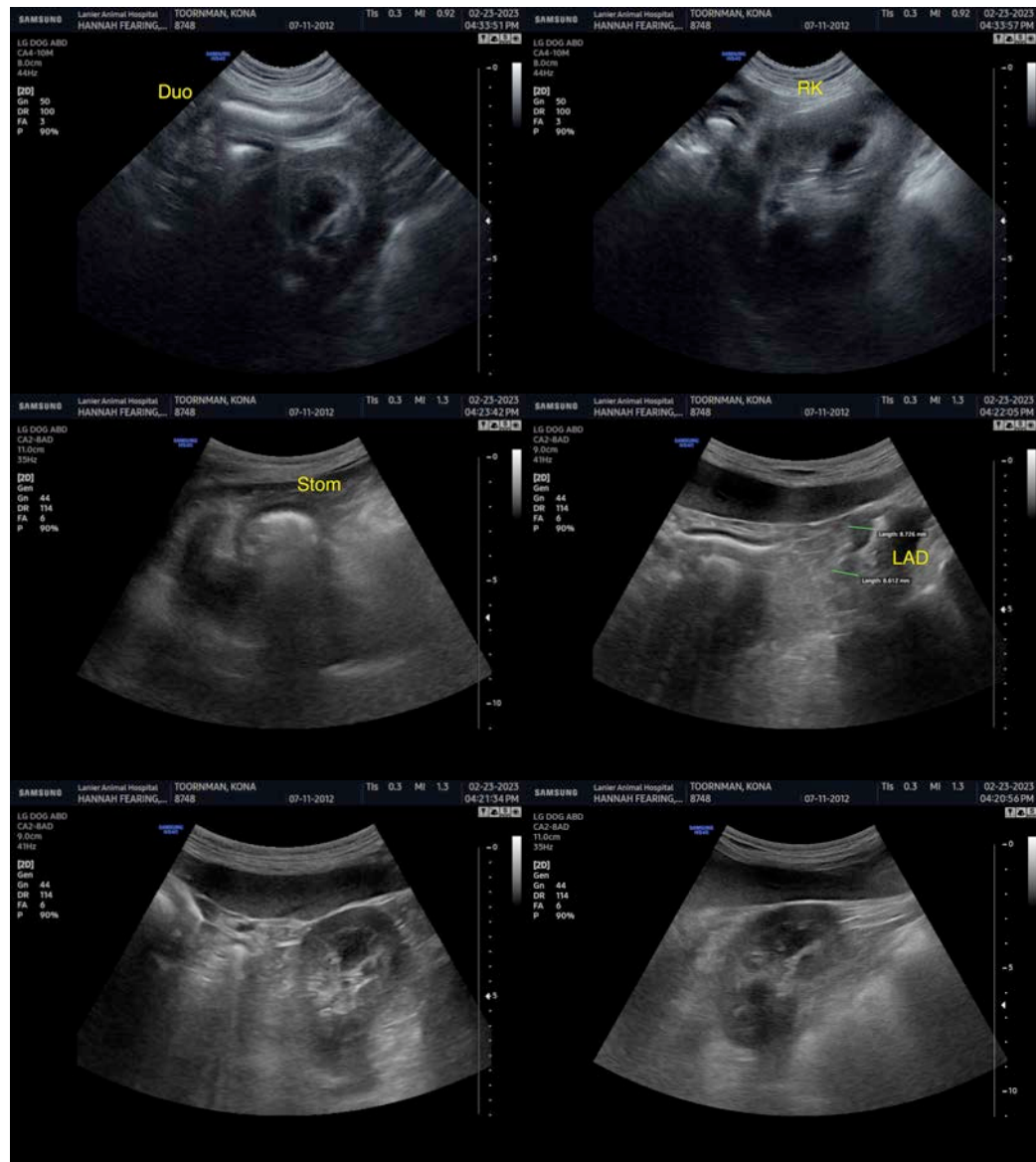
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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