



PATIENT	PRESENTING CLINICAL SIGNS
Layla Underhill	Weight loss, diarrhea, anorexia and tense cranial abdomen. Suspect mass in colon. Has been on Cerenia and Tylosin.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Please see attached rads. Sever Thrombocytopenia lack of production vs consumption? Azotemia, pre renal likely due to significant dehydration on exam and loss in watery diarrhea. ALKP has increased - could have some degree of cholestatic disease, hypochloremia - vomiting? Snap cPL positive
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Shepherd Lab Mix	Urinary System
SEX	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.
FS	
AGE	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. The kidneys did not appear to be end stage and without evidence of significant pathology. The left kidney measured 6.1 cm in length. The right kidney measured 6.5 cm in length.
12yr	
WEIGHT	The area of the aortic trifurcation was free of pathology.
51lb	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was indistinctly visualized owing to patient size and conformation without overt pathology. The left adrenal gland measured 0.81 cm width at the caudal pole and 2.0 cm length. The right adrenal gland was not visualized.
IMAGING PERFORMED BY	Spleen
Crystal Hill	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.
HOSPITAL NAME	Liver/Gallbladder
Norwich Veterinary Clinic	The liver presented mildly 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. 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.
REFERRING VET	Gastrointestinal
Dr. Kungl	The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The gastric body wall measured 0.63 cm width. Mild gastric distension with primarily anechoic fluid was present.
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PATIENT	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. The small intestine wall measured 0.43 cm in width.
Layla Underhill	
SPECIES	The visualized transverse and proximal descending colon exhibited intact overtly normal wall layering containing apparent formed feces in lumen. Subjective mild thickened distal descending colon was present cranial and craniodorsal to the urinary bladder measuring 0.75 cm in wall width. By comparison, normal appearing transverse to proximal descending colon wall measured 0.25 cm in width.
Canine	
BREED	Pancreas
Shepherd Lab Mix	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age related changes and considered incidental. No signs of active inflammation or neoplasia.
SEX	Free Abdomen
FS	No omental masses, overt lymphadenopathy or peritoneal effusion was present.
AGE	ULTRASONOGRAPHIC FINDINGS
12yr	<ul style="list-style-type: none"> • Mild thickened distal descending colon • Mild gastritis pattern, sonographically unremarkable small bowel • Mild heterogenous pancreas-not overtly consistent with active pancreatitis without neoplastic criteria • Non-specific hepatopathy-subjectively benign, suspect metabolic/reactive vacuolar hepatopathy • Mild age related kidney changes
WEIGHT	
51lb	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. A fresh fecal analysis is recommended to rule out parasitic ova/giardia. A definitive colon/colorectal mass was not overtly visualized yet cannot be definitively excluded.
IMAGING PERFORMED BY	A definitive cause of the severe thrombocytopenia was not obvious. A CBC pathology review may be considered for further assessment. Upper and lower GI biopsies may be considered for potential definitive diagnosis.
Crystal Hill	
HOSPITAL NAME	Empirically, a limited antigen or hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Proviale or Visbiome), cobalamin supplementation pending assessment of cobalamin levels +/- fiber supplementation and as needed gastrointestinal support with empirical therapy for pancreatitis and colitis and assessment of clinical response may prove beneficial.
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PATIENT

Layla Underhill

SPECIES

Canine

BREED

Shepherd Lab Mix

SEX

FS

AGE

12yr

WEIGHT

51lb

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Crystal Hill

HOSPITAL NAME

Norwich Veterinary
Clinic

REFERRING VET

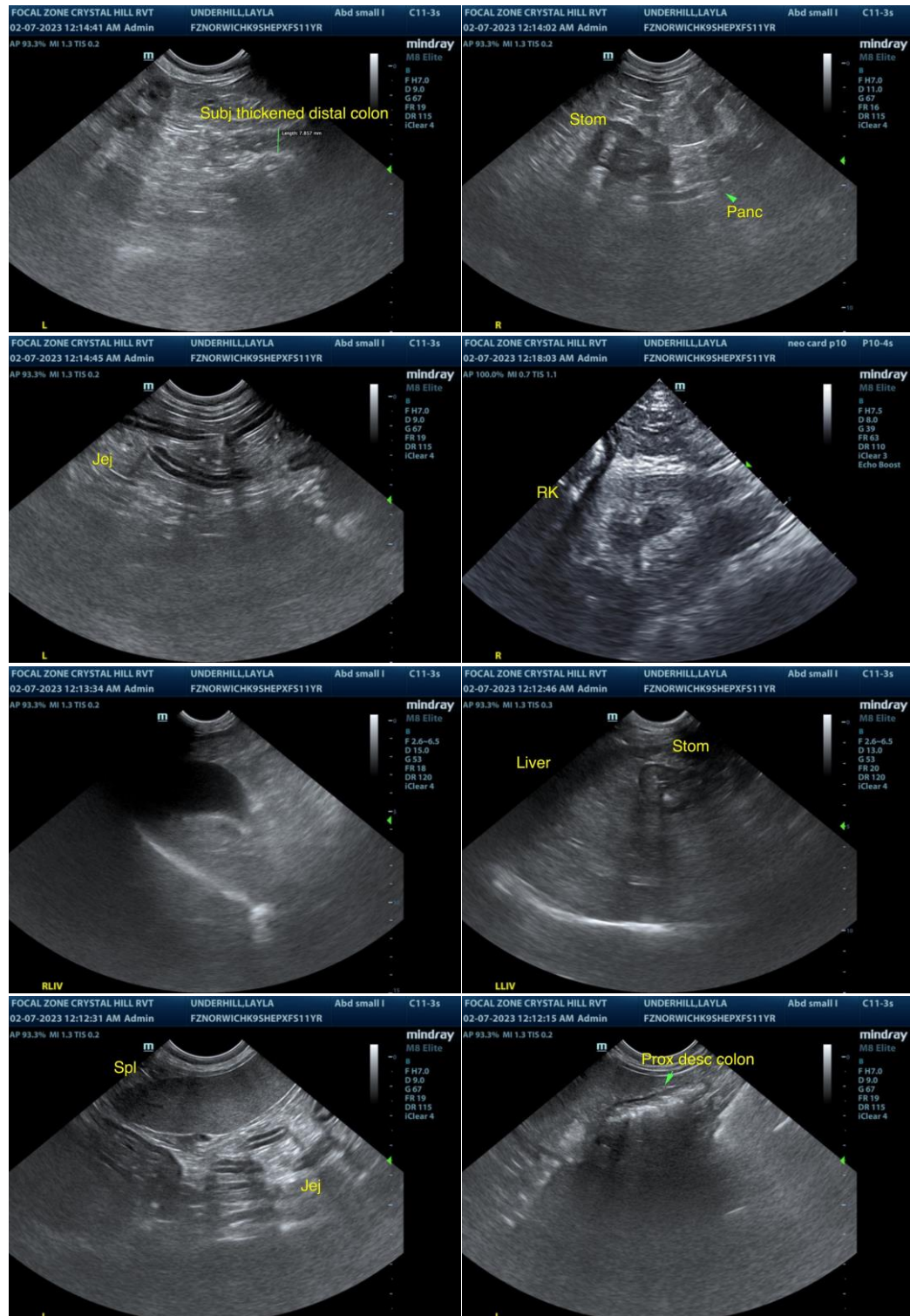
Dr. Kungl

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PATIENT

Layla Underhill

SPECIES

Canine

BREED

Shepherd Lab Mix

SEX

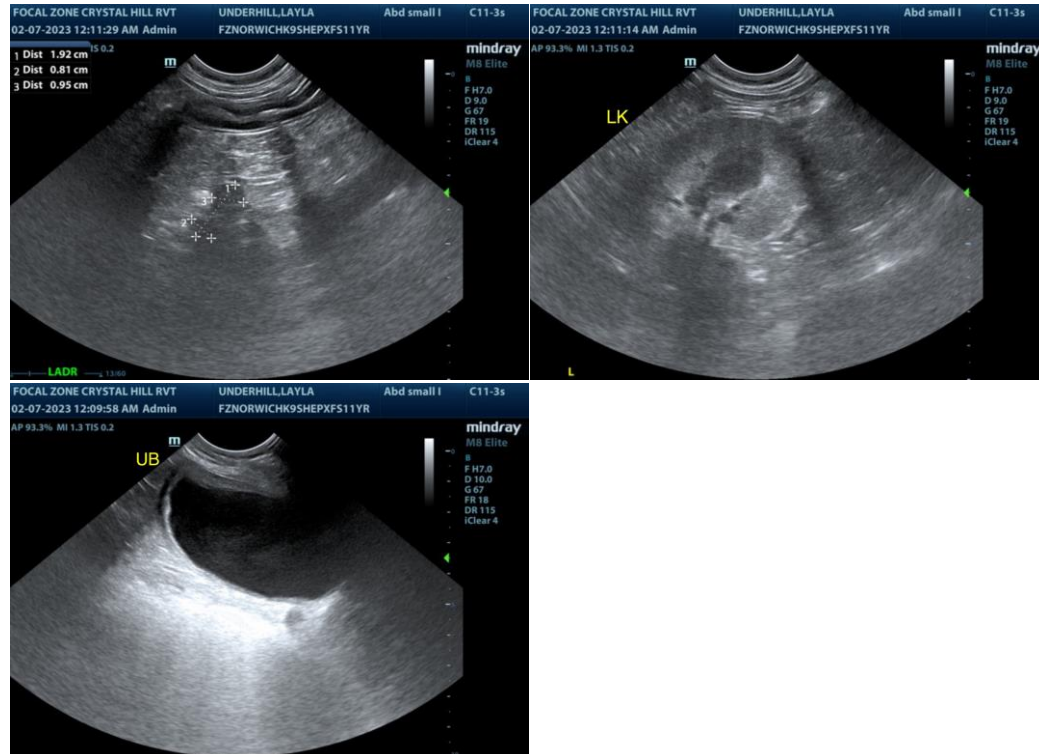
FS

AGE

12yr

WEIGHT

51lb



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)

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INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

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