



**PATIENT**

Vinnie Leader

**PRESENTING CLINICAL SIGNS**

History: Weight loss, food allergies

Medication: Tylosin

**SPECIES**

Canine

TLI >50

**BREED**

Pitbull

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

***Urinary System***

**SEX**

Neutered Male

The urinary bladder was normal in size and tone with subtle micropolypliod areas noted along the Inner luminal surface. These are considered incidental. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

The area of the residual prostate was free of overt pathology.

**AGE**

4 years

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

56 Pounds

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 5.1 cm in length. The right kidney measured 6.4 cm in length.

**INTERPRETED BY**

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

***Adrenal Glands***

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.55 cm width at the caudal pole and 0.64 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.52 cm width at the caudal pole and 0.42 cm width at the cranial pole.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

***Spleen***

The spleen exhibited generalized enlargement with symmetrical to mildly swollen splenic capsule. Subtle generalized splenic parenchyma heterogeneity was noted. No splenic masses or nodules were present. Normal splenic vascularity was noted.

**HOSPITAL NAME**

Carpe Diem

**REFERRING VET**

Dr. Farr

***Liver/ Gallbladder***

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.

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**DATE**

2.8.2022



**PATIENT** *Gastrointestinal*

Vinnie Leader The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.48 cm.

**SPECIES**

Canine The small intestine presented intact wall layering and primarily maintained 1:3 muscularis/mucosa ratio with intermittent mucosal speckling and segmental propensity for subtle prominent to echogenic submucosa layer. The duodenum wall width measured 0.59 cm. The jejunum wall width measured 0.30 cm.

**BREED**

Pitbull Normal visible colon wall layers were present with subjective semi-formed feces in lumen.

**SEX**

*Pancreas*

Neutered Male 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 were evident.

**AGE**

*Free Abdomen*

4 years

Suspected minor benign to reactive mesenteric lymph nodes without evidence of significant lymphadenopathy were present. No effusion was present.

**WEIGHT**

56 Pounds

**ULTRASONOGRAPHIC FINDINGS**

- Nonspecific splenomegaly
- Suspect chronic inflammatory enteropathy, potential for IBD

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The gastrointestinal tract exhibited subtle mural changes which may suggest chronic inflammatory gastroenteropathy or gastroenterocolonopathy. Likewise, elevated TLI levels, although nonspecific, may be associated with gastrointestinal disease and/or chronic enteropathy. If not recently done, recheck GI panel for a reassessment of TLI levels, as well as cobalamin / folate levels, is recommended.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

Considerations for the splenomegaly may include hyperplasia, hematopoiesis, incidental splenitis, splenomegaly secondary to sedation if clinically applicable, while the possibility of splenic neoplasia cannot be excluded given the patient's weight loss.

**HOSPITAL NAME**

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Dr. Farr

Assuming normal clotting status, ultrasound guided FNA of the spleen using a 25-gauge needle is warranted for screening cytology.

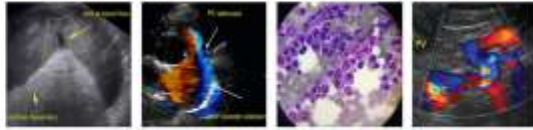
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Empirically, a limited antigen or hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Proviale or Visbiome), antibiotic trial and as needed gastrointestinal support with assessment of clinical response may prove beneficial. Intestinal biopsies may be indicated if GI signs continue despite empirical therapy. Resting cortisol level to rule out occult Addison's Disease, although is thought less likely, may be considered.

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Vinnie Leader

**SPECIES**

Canine

**BREED**

Pitbull

**SEX**

Neutered Male

**AGE**

4 years

**WEIGHT**

56 Pounds

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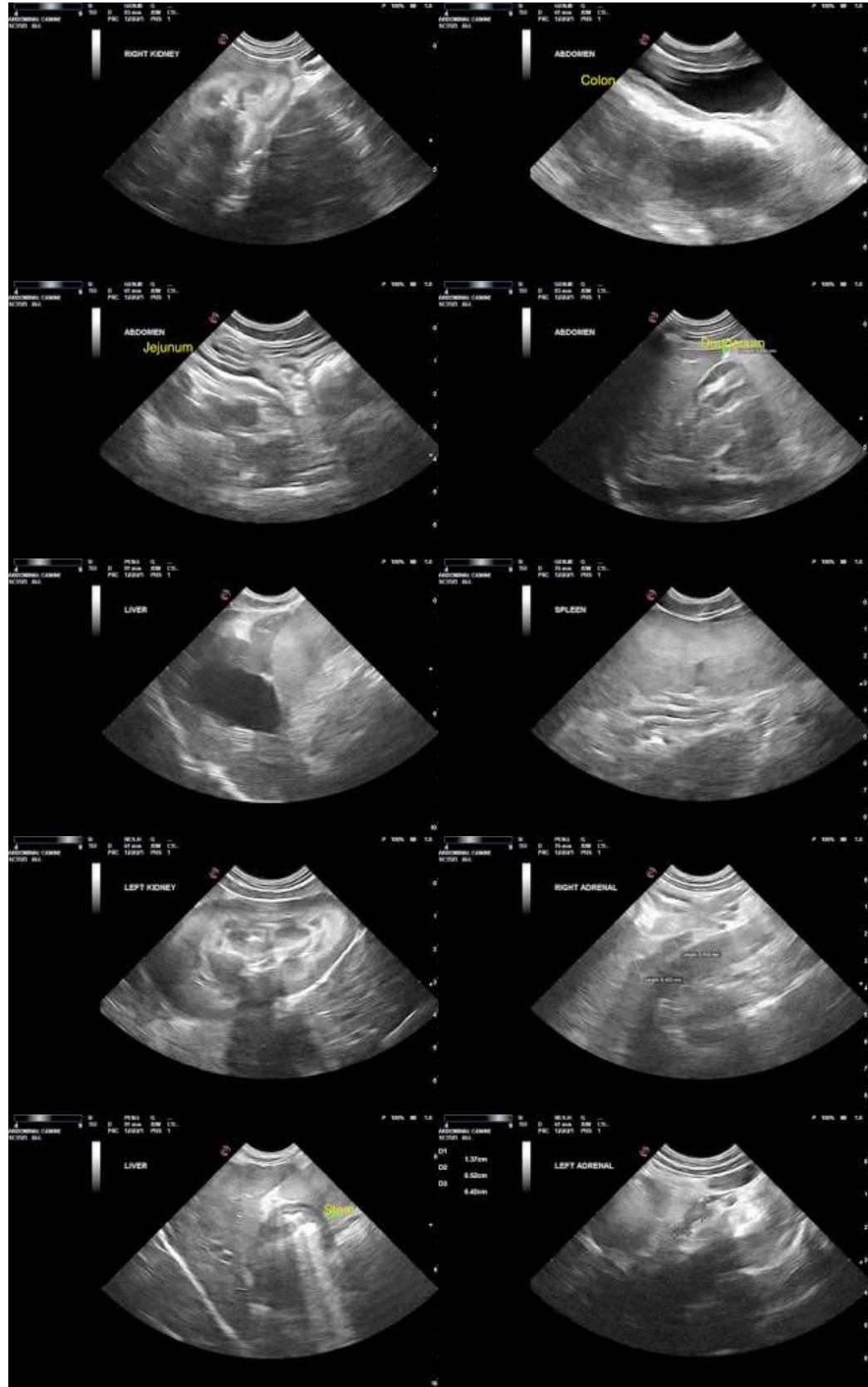
Dr. Farr

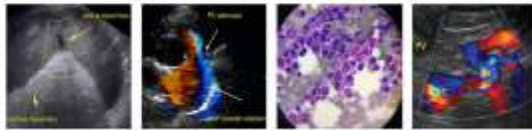
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**PATIENT**

Vinnie Leader

**SPECIES**

Canine

**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.**

**BREED**

Pitbull

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.

**SEX**

Neutered Male

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

**AGE**

4 years

**WEIGHT**

56 Pounds

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