



PATIENT PRESENTING CLINICAL SIGNS

Holly Rescue Puppy mill dog, hematuria, incontinence.
Medication: Clavamox

SPECIES

Canine

BREED

Poodle Mix

SEX

F

AGE

2014

WEIGHT

16.4

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone. Primarily ventroapical to apical polyploid cystitis was present. Several to multiple primarily small dependent calculi and minor mineral were present in the dependent lumen. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

The uterus was overtly normal in sonographic appearance measuring 0.73 cm diameter. No overt pathology was noted in the area of the left or right ovaries.

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 corticomedulary 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. No evidence of mineral or pyelectasia was noted. The left kidney measured 4.1 cm in length. The right kidney measured 4.3 cm in length.

INTERPRETED BY

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Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.4 cm length x 0.48 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 1.9 cm length x 0.58 cm width at the caudal pole.

IMAGING

PERFORMED BY
Rebekah Jakum, CVT
ARDMS/RVT

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.

HOSPITAL NAME

New Britain VC

REFERRING VET

Dr. Bandekar

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 containing anechoic content with moderate, nonorganized, mildly hyperechoic gallbladder debris, which is likely incidental and not consistent with mucocele criteria given the lack of cholestasis on attached bloodwork. No evidence of gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.

INVOICE

16409

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PATIENT ***Gastrointestinal***

Holly Rescue 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.

SPECIES 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.

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

BREED ***Pancreas***

Poodle Mix Prominent, mildly irregular, heterogeneous to mildly hypoechoic pancreas base and right pancreatic limb was noted.

SEX ***Free Abdomen***

F Intermittent, mildly prominent mesenteric lymph nodes were present in the mid-abdomen. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example lymph node measured 1.4 cm x 0.47 cm. Subjective mild perilymphatic to regional peri intestinal mild hyperechoic omentum was present. No evidence of omental masses or free fluid was noted.

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WEIGHT **ULTRASONOGRAPHIC FINDINGS**

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- Several to multiple small cystic calculi / mineral with ventroapical polyploid cystitis
- Normal kidneys
- Prominent mildly irregular / nonhomogeneous pancreas, potential for mild chronic to chronic active inflammation
- Moderate gallbladder debris (non-mucocele)
- Intermittent minor benign / reactive mesenteric lymph nodes, subjective mild perilymphatic / peri intestinal mild hyperechoic omentum

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Urine C/S on a sterile urine sample is suggested 7 days post completion of current antibiotics.

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Assessment for evidence of cranial abdominal or subxiphoid discomfort on palpation in the area of the pancreas, which may allude to pancreatic inflammation, if clinical signs of pancreatitis are noted, is suggested.

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Ovariohysterectomy with cystotomy, urinary bladder flush, urinary bladder wall biopsies for histopathology, +/- tissue C/S, and gross inspection of the gastrointestinal tract, pancreas, and gallbladder may be considered in this patient. No overt evidence of intraabdominal neoplastic criteria was noted.

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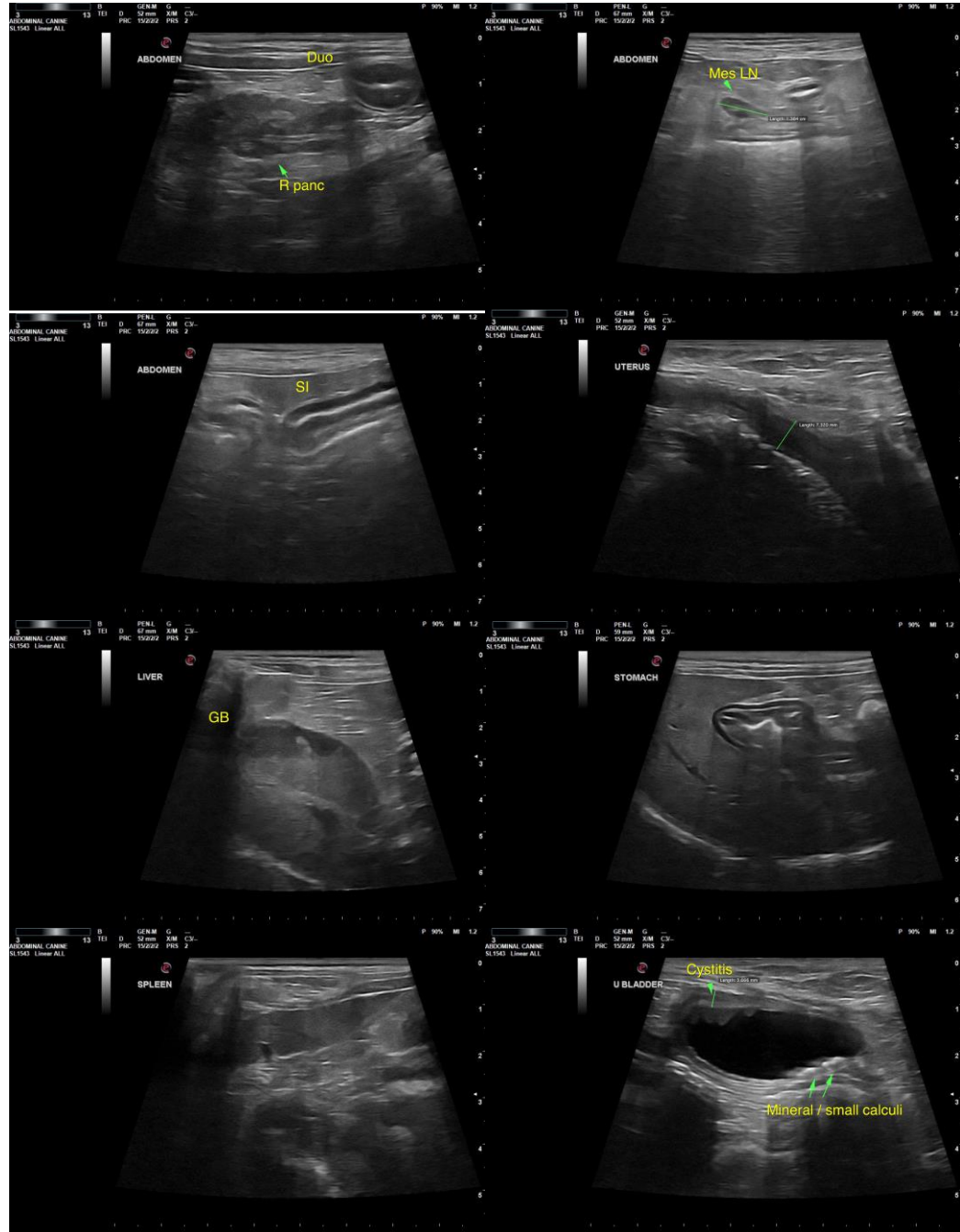
Dr. Bandekar

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PATIENT

Holly Rescue

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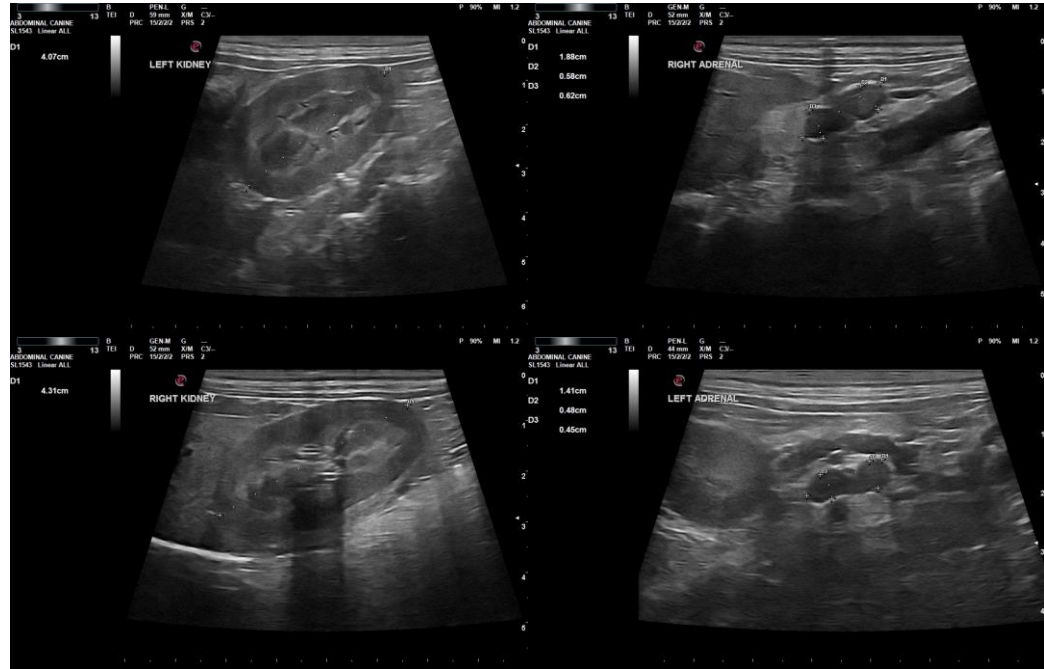
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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