



PATIENT PRESENTING CLINICAL SIGNS

Bobo Healey Patient is a diabetic since June 2020. Currently has intermittent vomiting, severe dental disease, interdigital growth (suspect neoplasia on cytology) and pancreatitis. Eating well, doing ultrasound to see if any other serious medical issues before considering a dental.

SPECIES

Canine

On Apoquel 4mg SID, Humulin N 1U BID, Cerenia 8mg prn.

Abnormal PE/Chem/CBC/UA Results: Glob 4.4 a/g ratio 0.6, ALP 213, bun/creat ratio 32, chol 353, mono 1224, precision psl 315.

BREED

Miniature Pinscher

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

MN

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

AGE

13yr

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Pinpoint medullary mineral was present. Mild right kidney pyelectasia was noted. The left kidney measured 4.0 cm in length. The right kidney measured 3.4 cm in length.

WEIGHT

7.5lb

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The bilateral adrenal glands were mildly prominent in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.45 cm width in the cranial pole and 0.61 cm width in the caudal pole. The right adrenal gland measured 0.57 cm width in the cranial pole and 0.69 cm width in the caudal pole.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

HOSPITAL NAME

Norfolk County Veterinary Service

Liver/Gallbladder

The liver presented 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 and moderate mildly congealed non-organized echogenic debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

REFERRING VET

Dr. McCabe

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Gastrointestinal



PATIENT

Bobo Healey

The stomach presented mild wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with minor retained primarily anechoic fluid was present.

SPECIES

Canine

Moderate variably thickened upper duodenum was present exhibiting duodenal corrugation and indistinct wall layer detail. The duodenum wall measured 1.0 cm width. The jejunal and ileum to the level of the colon exhibited intact wall layering with mildly prominent mucosal layer. The jejunum wall measured 0.40 cm width.

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

Pancreas

The pancreas base and right pancreatic limb exhibited mild variable prominent size with capsule asymmetry and non-homogenous variably hypoechoic parenchyma.

SEX

MN

Free Abdomen

No omental masses or overt lymphadenopathy was present.

AGE

13yr

Intermittent scant pocket of peritoneal free fluid. Mid to cranial abdominal primarily peri duodenal to peripancreatic hyperechoic omentum was present.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

7.5lb

- Generalized gastroenteritis pattern with marked duodenitis.
- Subjective chronic active pancreatitis pattern.
- Vacuolar/diabetic hepatopathy.
- Gallbladder debris-not consistent with mucocele criteria.
- Chronic renal changes with mild right kidney pyelectasia.
- Mildly prominent to irregular bilateral adrenal glands-no adrenal tumors.
- Cranial abdominal mild hyperechoic omentum and scant peritoneal free fluid.

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DABVP (Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

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The generalized GI tract yet primarily the upper GI tract along with the pancreas may indicate upper GI inflammation with marked duodenitis and chronic active pancreatitis. Potential for upper duodenal infiltrative neoplastic criteria or less likely pancreatic neoplastic criteria cannot be definitely excluded.

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Veterinary Service

Endoscopic intestinal biopsies would be required for a definitive diagnosis. Empirical as needed GI support and therapy for gastroenteritis/pancreatitis with assessment of clinical response and ideally sonographic monitoring of the pancreas and duodenum for resolved mural changes vs progressive mural pathology is recommended.

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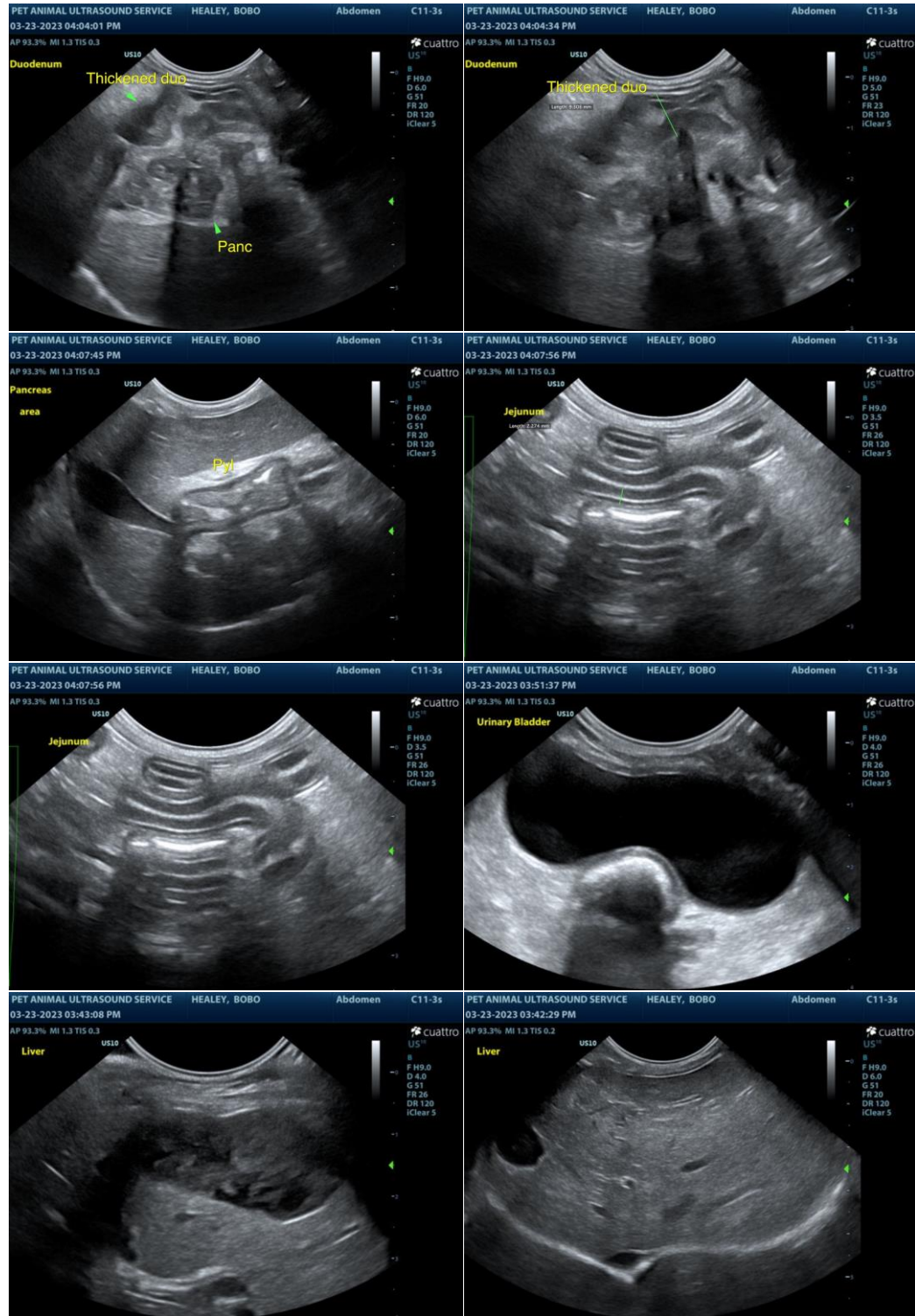
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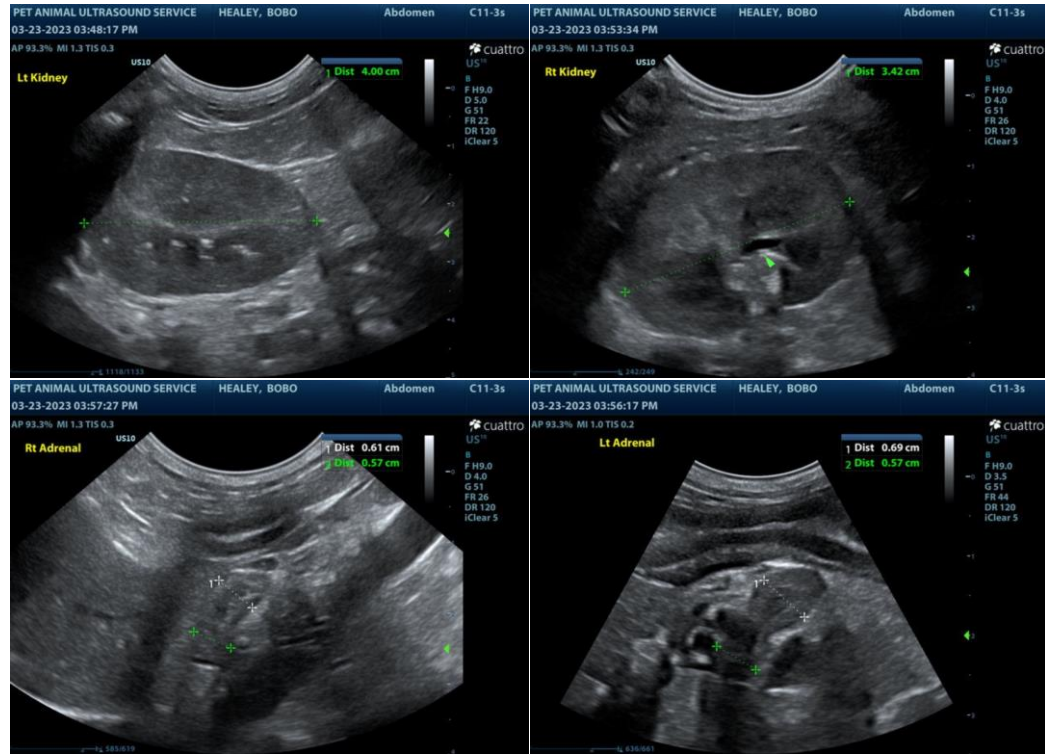
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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