



**PATIENT PRESENTING CLINICAL SIGNS**

Madison Stonebach History: FULL FEELING ABDOMEN CLINDAMYCIN  
 Abnormal PE/Chem/CBC/UA Results: ALP 136 BUN 46 CREAT 2.2 PSL 157 CBC wnl

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

BREED

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone to a depth of 2 cm. Mild nonuniform thickening of the urinary bladder wall was present. Cystic calculus was present in the ventroapical urinary bladder. The ventroapical bladder wall measured 0.48 cm width. The dependent calculus measured 1.5 cm in diameter. Concurrent areas of adhered mineral along the ventroapical and mid ventral luminal surface were observed.

Cocker Spaniel X

SEX

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some moderately increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Multiple medullary renoliths were present along with mild bilateral pyelectasia. The left kidney measured 3.2 cm in length. The right kidney measured 4.1 cm in length.

Spayed female

AGE

15 years

**Adrenal Glands**

WEIGHT

The left adrenal gland was mildly prominent with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.67 cm width at the caudal pole and 0.54 cm width at the cranial pole. The right adrenal gland was mildly prominent with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.55 cm width at the caudal pole and 0.77 cm width at the cranial pole.

23.8 pounds

**INTERPRETED BY**

**Spleen**

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

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the medial parenchyma with subtle distal acoustic shadowing. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**Liver**

**HOSPITAL NAME**

MIII Pond VC

The liver presented enlarged in size. Generalized mild parenchymal remodeling with intermittent discrete hypoechoic parenchymal nodules were observed. 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 moderate nondependent hyperechoic luminal debris. The gallbladder walls were mildly prominent to echogenic in appearance. No evidence of peripheral inflammation was noted. The cystic and common bile ducts were normal.

**REFERRING VET**

NA

**Gastrointestinal**

**INVOICE**

10120ag

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.

**DATE**

03/03/2022

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.



**PATIENT**

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

Madison Stonebach

**Pancreas**

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Cocker Spaniel X

- Cystic calculus, concurrent ventroapical cystitis pattern with minor concurrent adhered luminal mineral.
- Bilateral chronic renal changes exhibiting medullary renolithiasis and mild pyelectasia.
- Vacuolar hepatopathy pattern with generalized mildly remodeled to discretely nodular parenchyma, subjectively benign.
- Moderate gallbladder debris, potential for mild cholecystitis.
- Pancreatic remodeling.
- Mildly prominent bilateral adrenal glands.
- Benign splenic nodules-consistent with benign myelolipomas, nodular hyperplasia or potential emerging mineralization.

**SEX**

Spayed female

**AGE**

15 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

23.8 pounds

A full urinary workup including UA, C/S, +/- baseline UPC if no evidence of significant inflammatory cells is recommended. Screening UCCR +/- full adrenal workup may be considered if clinical signs suggestive of hyperadrenocorticism are present.

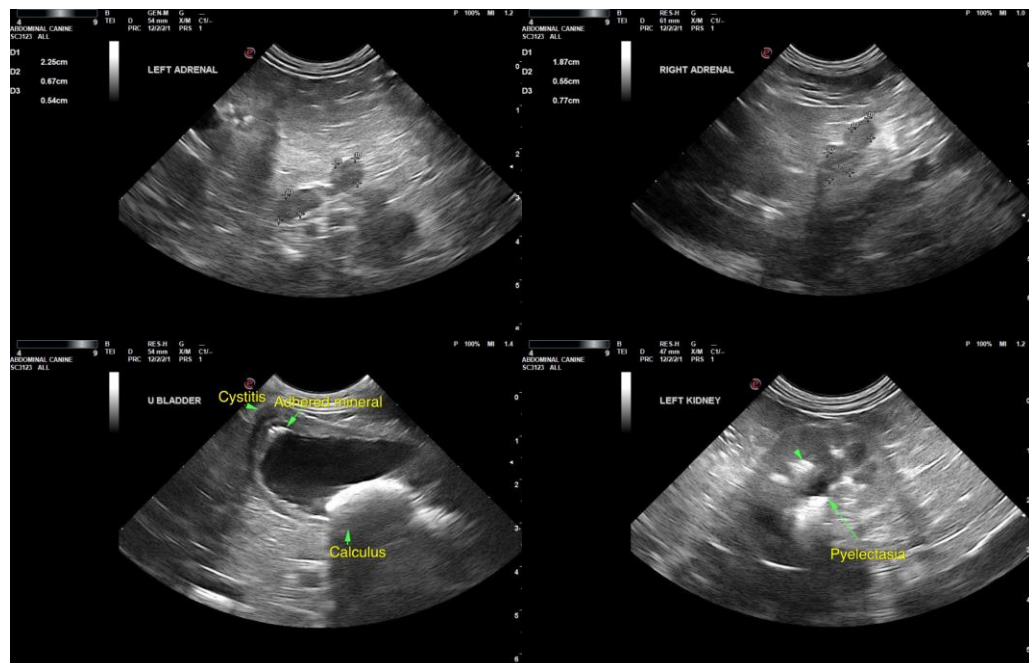
**INTERPRETED BY**

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DVM, DABVP  
(Canine and Feline)

Denamarin/Ursodiol therapy may prove beneficial. Continued monitoring for evidence of progressive signs of cholestasis with sonographic reassessment of the gallbladder is recommended. Potential for very early gallbladder mucocele formation could be possible.

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ARDMS/RVT



**HOSPITAL NAME**

Mill Pond VC

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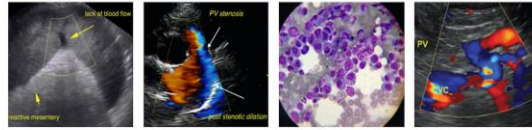
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**PATIENT**

Madison Stonebach

**SPECIES**

Canine

**BREED**

Cocker Spaniel X

**SEX**

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**AGE**

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**WEIGHT**

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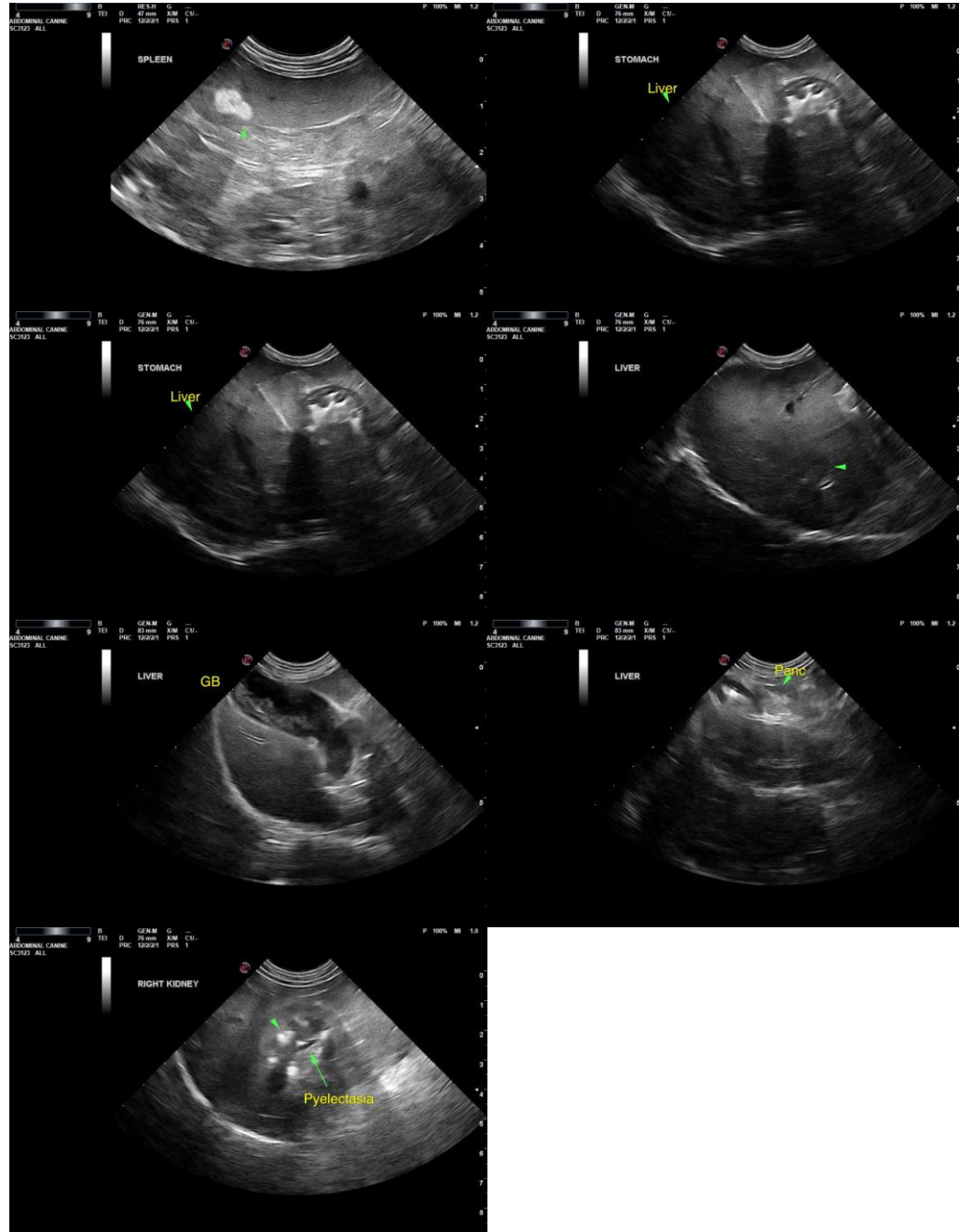
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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



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