

**PATIENT PRESENTING CLINICAL SIGNS**

Gracie Duncan

Poss perianal gland tumor or anal sac disease. Has noted blood in stools for about 10 days but lives out in the country and does a lot of free roaming so unsure if could be longer and what stools have been like ongoing. Was not fasted for the scan. Eats a raw diet.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: ALK PHOS elevated, triglycerides high, Precision PSL elevated, platelets high. Fecal negative.

**BREED**

Field Sapsnel

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**SEX**

FS

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

**AGE**

12yr

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 left kidney measured 5.5 cm in length. The right kidney measured 5.7 cm in length.

**WEIGHT**

46.3lb

The area of the aortic trifurcation was free of pathology.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.69 cm width at the caudal pole and 2.4 cm length. The right adrenal gland was indistinctly visualized with no overt pathology.

**INTERPRETED BY**

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

**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.

**IMAGING PERFORMED BY**

Crystal Hill

**HOSPITAL NAME**

The Maples AH

**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. Evidence of mild parenchymal remodeling was present. 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**

Kazienko

**INVOICE**

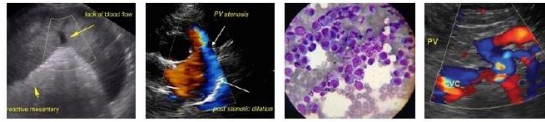
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**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate progressively shadowing ingesta with no signs of ileus, obstruction or foreign material.

**DATE**

03/30/2023



**PATIENT**

Gracie Duncan

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental non-shadowing ingesta/chyme with no signs of ileus, obstruction or foreign material.

**SPECIES**

Canine

The colon exhibited normal genderized size without evidence of distension or constipation criteria. The visualized colon walls were sonographically unremarkable extending into the distal descending colon. Formed fecal matter was present. Visualization of the colorectum distal and deep to the level of the cystourethral junction was limited owing to overlying pelvic shadowing.

**BREED**

Field Spaniel

**Pancreas**

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. A thinly walled left limb pancreatic cyst was present measuring 3.3 cm in diameter. The cyst was directly caudal to the gastric body.

**SEX**

FS

**Free Abdomen**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**AGE**

12yr

**ULTRASONOGRAPHIC FINDINGS**

- Non-distended colon to the level of the visualized colorectum.
- Normal GI tract with GI ingesta-ingesta consistent with post prandial presentation.
- Left pancreatic cyst- benign.
- Mild age related renal changes.
- Mild hepatic parenchymal remodeling- benign hepatopathy sonographically suggestive of vacuolar hepatopathy pattern.

**WEIGHT**

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(Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Largely a geriatric abdomen with no overt evidence of significant abdominal visceral pathology as a definitive cause of the patient's clinical signs. Hematochezia consistent with large bowel origin and potential low grade colitis is possible. No overt evidence of visualized distal colon/colorectal or anal sac disease. If evidence of a non-visualized peri-anal or anal sac tumor, sampling would be required for further assessment.

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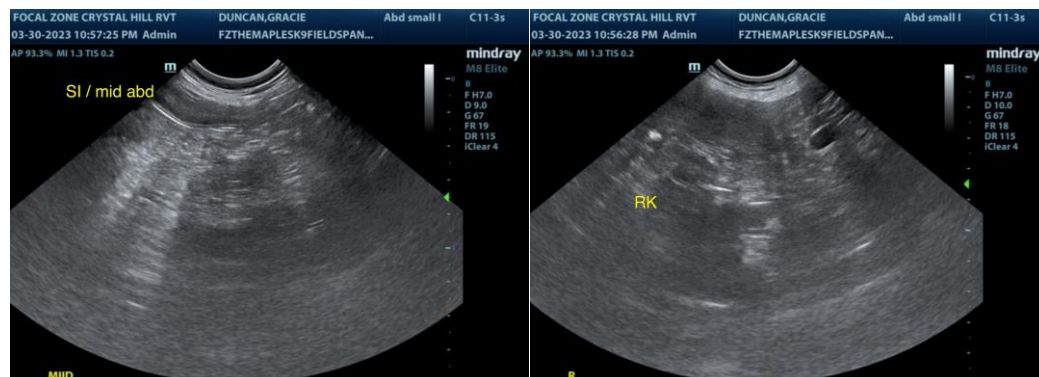
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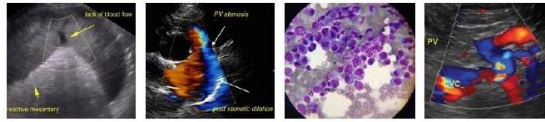
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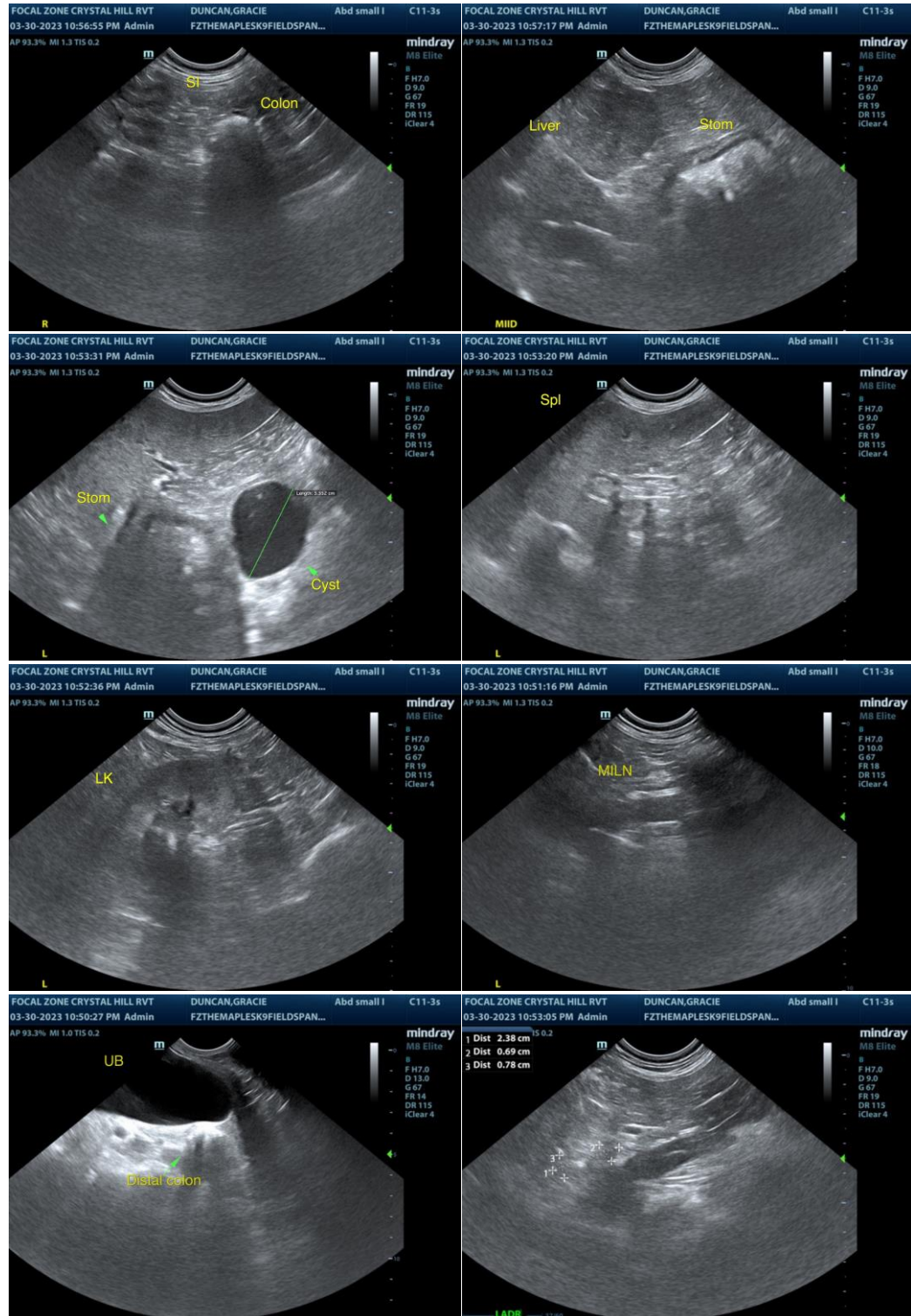
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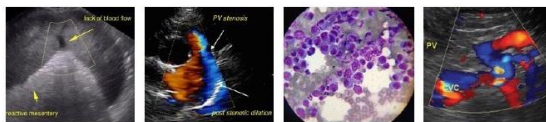
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



**PATIENT**

Gracie Duncan

can be of any further assistance please contact me.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com

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