



PATIENT

Dexter Windley

SPECIES

Canine

BREED

Shep X

SEX

M/N

AGE

12

WEIGHT

37.5 kg.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Alpine 24/7

REFERRING VET

Dr. Drohan

INVOICE

16645

DATE

4/19/23

PRESENTING CLINICAL SIGNS

Previous scan diag gastritis, hepatic remodeling and inspissated gallbladder sludge. Previous scan don Mar 13 2023. Inv 13155ag. Case summary attached
Abnormal PE/Chem/CBC/UA Results: Urine SG 1005 ph 5

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Mild asymmetrical luminal surface to micropolypliod changes were present likely associated with age-related mural changes. 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.

No overt pathology was noted in the area of the residual prostate.

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 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 or pyelectasia was present. Pinpoint to minor areas of medullary mineralization were noted. The left kidney measured 7.5 cm in length. The right kidney measured 7.2 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.65 cm width at the caudal pole and 0.63 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 0.49 cm width at the caudal pole.

Spleen

The spleen was normal in size and overall contour with mild generalized splenic parenchyma heterogeneity. Intermittent discrete hypoechoic splenic nodule was present. An example of a discrete splenic nodule measured 0.88 cm in diameter.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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, inspissated yet nonorganized gallbladder debris. Areas of emerging mineralization, consistent with emerging cholelithiasis, were noted within the inspissated gallbladder debris. Non-



PATIENT	thickened, mildly irregular to hyperechoic gallbladder wall was noted. No evidence of peripheral gallbladder inflammation was noted. The cystic and common bile ducts were normal.
Dexter Windley	
SPECIES	<i>Gastrointestinal</i>
Canine	The stomach presented intact wall layering with no evidence of loss of intestinal wall layering or gastric mural masses. The stomach contained a moderate amount of retained variably echogenic yet nonshadowing ingesta / chyme. No evidence of mechanical pyloric outflow obstruction or obstructive pyloric mural pathology was noted. The pylorus wall width measured 0.4 cm. The ventral gastric body wall width measured 0.35 cm.
BREED	
Shep X	
SEX	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. Minor duodenal distention with nonshadowing duodenal chyme was noted.
M/N	
AGE	Normal visible colon wall layers were present with apparent formed feces in lumen.
12	<i>Pancreas</i>
WEIGHT	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.
37.5 kg.	
INTERPRETED BY	<i>Free Abdomen</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	No evidence of omental masses, previous perigastric lymphadenopathy, or peritoneal effusion was noted.
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Dr. Belan	<ul style="list-style-type: none"> • Mild chronic renal changes with pinpoint to minor medullary mineral • Intact gastric wall layering with moderate retained ingesta / chyme • Suspect duodenitis • Sonographically unremarkable pancreas • Static discrete splenic nodules • Moderate inspissated to mineralizing gallbladder debris, possible low-grade to chronic cholecystitis (non-mucocele)
HOSPITAL NAME	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
Alpine 24/7	Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.
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DATE	Sonographically, no overt or significant gastrointestinal mural pathology without sonographic evidence of gastrointestinal neoplastic criteria. Metabolic / functional gastric and potential duodenal ileus owing to gastroduodenal inflammatory process is suspected.
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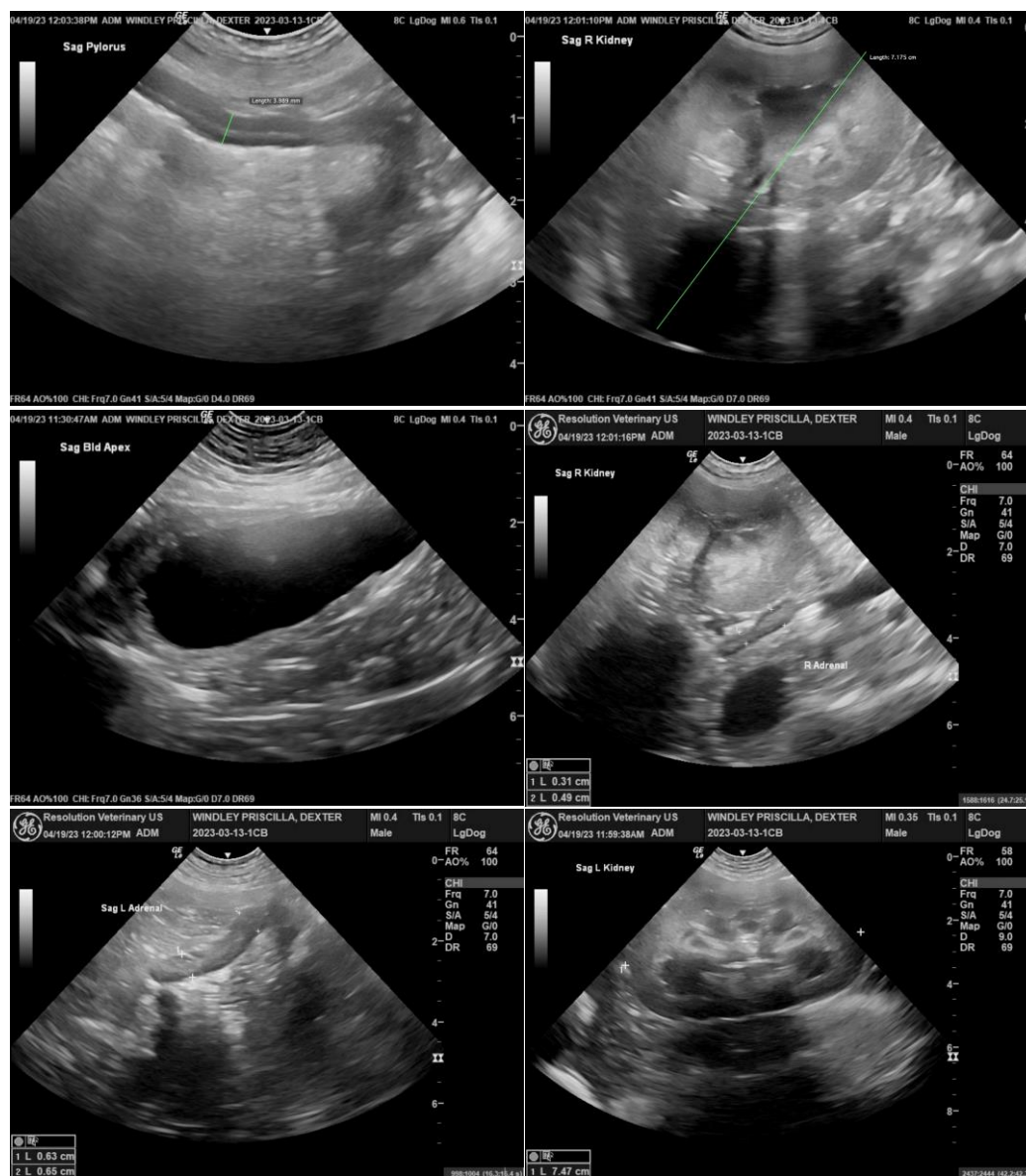
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No evidence of adrenal or hepatic pathology as an obvious contributing factor to the PU/PD. The gallbladder does not appear to be a clinical issue at this stage, given the lack of hepatic enzyme elevations or cholestasis.





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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