



PATIENT PRESENTING CLINICAL SIGNS

Nino Cavicchi Presented for several days of vomiting, diarrhea and hypo to anorexia. No history of toxin exposure. Lepto vaccinated. SpecCPL WNL. Lepto PCR pending. ALT 1359; creat 1.6; AST 218; K+ 3.5. On Clavamox, Baytril, Metronidazole, Ondansetron *Sedated with butorphanol/alfaxalone

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Mixed The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.

SEX

MN

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.60 cm in diameter.

AGE

2.5 lbs.

The area of the aortic trifurcation was free of pathology.

WEIGHT

16 lbs.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary 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. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width at the caudal pole and 0.39 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 0.35 cm width at the caudal pole and 0.28 cm width at the cranial pole.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Spleen

HOSPITAL NAME

Norfolk County VS

The spleen exhibited generalized enlargement with mild medial folding of the caudal spleen. Finely textured and homogenous parenchyma noted, 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.

REFERRING VET

Emily McCabe, DVM

Liver/ Gallbladder

INVOICE

14939

The liver exhibited potential for mild subnormal size yet subjective normal vascular volume. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture.

DATE

4/28/22

The gallbladder was non distended in size with mild echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal



PATIENT

Nino Cavicchi

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was contained minor retained non-shadowing ingesta/chyme.

SPECIES

Canine

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. The duodenum wall measured 0.31 cm. The jejunum wall measured 0.29 cm.

BREED

Mixed

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

SEX

MN

Pancreas

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

AGE

2.5 lbs.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

16 lbs.

- Hepatopathy, exhibiting potential for mild subnormal hepatic size
- Mild splenomegaly-likely owing to sedation
- Overtly normal gastrointestinal tract with minor retained gastric ingesta/chyme

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

The overall appearance of the liver was nonspecific yet consistent with benign hepatopathy. Given the significantly elevated ALT/AST combination, considerations may include nonspecific hepatitis (viral, bacterial, leptospirosis, toxin). No overt evidence of a portosystemic vascular anomaly, which is thought less likely. Leptospirosis may be considered a less likely potential in this case, given history of vaccination. Correlation with pending Lepto PCR suggested.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Further assessment hepatic FNA, using a 25-gauge needle and assuming normal clotting status, is accessible and for screening cytology. No overt evidence of structural gastrointestinal pathology with suspected mild metabolic gastric stasis. Empirical, hepatosupportive medications and therapy for nonspecific hepatitis would be reasonable pending additional diagnostics. Bile acids may be considered if clinical concern for acute hepatic failure.

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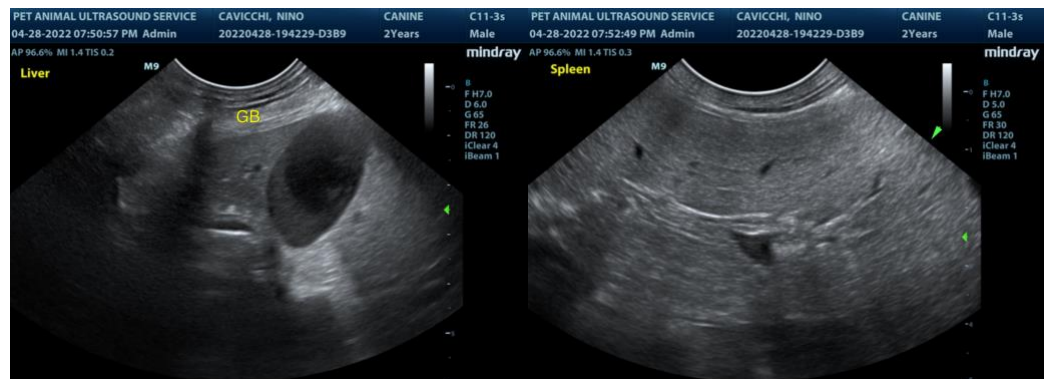
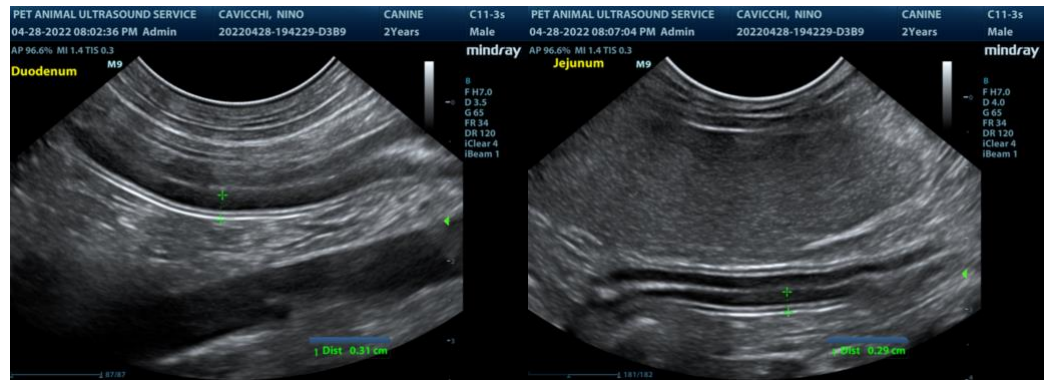
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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