

PATIENT

Bailey Whitcomb

SPECIES

Canine

BREED

Boxer

SEX

FS

AGE

10 years

WEIGHT

63 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Albany AH

REFERRING VET

Dr. Spangler

INVOICE

16711

DATE

4/28/23

PRESENTING CLINICAL SIGNS

Weight gain without change in diet PU with mild PD Lethargy Pain on palpation of abdomen per O - patient too tense to palpate on PE Primary Question/Differential to Be Answered in This Exam Examine urinary system, adrenal glands, pancreas to better assess possible etiology of clinical signs

Abnormal PE/Chem/CBC/UA Results: CBC - WNL Chem - cholesterol 360, NOSF - renal values including SDMA WNL, ALP WNL TT4, fT4 WNL Snap4DX test neg for all UA - WNL, USG 1.031, no proteinuria, no hematuria, no bacteriuria appreciated

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

There was no evidence of pathology in the area of the uterine remnant.

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 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 6.7 cm in length. The right kidney measured 6.2 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 2.4 cm length x 0.46 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.9 cm length x 0.7 cm width at the caudal pole. There was no adrenomegaly or tumors.

Spleen

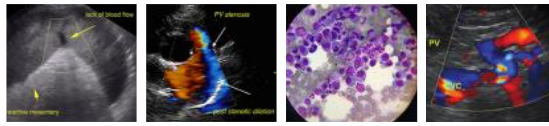
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were



PATIENT	normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild, nonorganized, hyperechoic gallbladder debris. No evidence of inflammatory criteria was noted. The cystic and common bile ducts were normal.
Bailey Whitcomb	
SPECIES	Gastrointestinal
Canine	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.
BREED	
Boxer	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.
SEX	Normal visible colon wall layers were present with apparent formed feces in lumen.
FS	Pancreas
AGE	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.
10 years	
WEIGHT	Free Abdomen
63 lbs	No omental masses, lymphadenopathy, or evidence of peritoneal effusion were noted.
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none">• Normal bilateral kidneys / adrenal glands• Sonographically unremarkable pancreas• Sonographically unremarkable urinary bladder and visible proximal urethra• Normal liver with mild gallbladder debris (non-mucocele)
IMAGING PERFORMED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Jenna Walsh, CVT	Sonographically unremarkable abdomen without evidence of significant visceral pathology as an obvious cause of the patient's clinical signs.
HOSPITAL NAME	
Albany AH	The mild gallbladder debris is considered essentially incidental, given the lack of hepatic enzyme elevations or cholestasis and without mucocele criteria. Ursodiol therapy may be considered if evidence of cholestasis arises.
REFERRING VET	
Dr. Spangler	No evidence of intraabdominal neoplastic criteria or a definitive cause of potential intraabdominal pain or discomfort.
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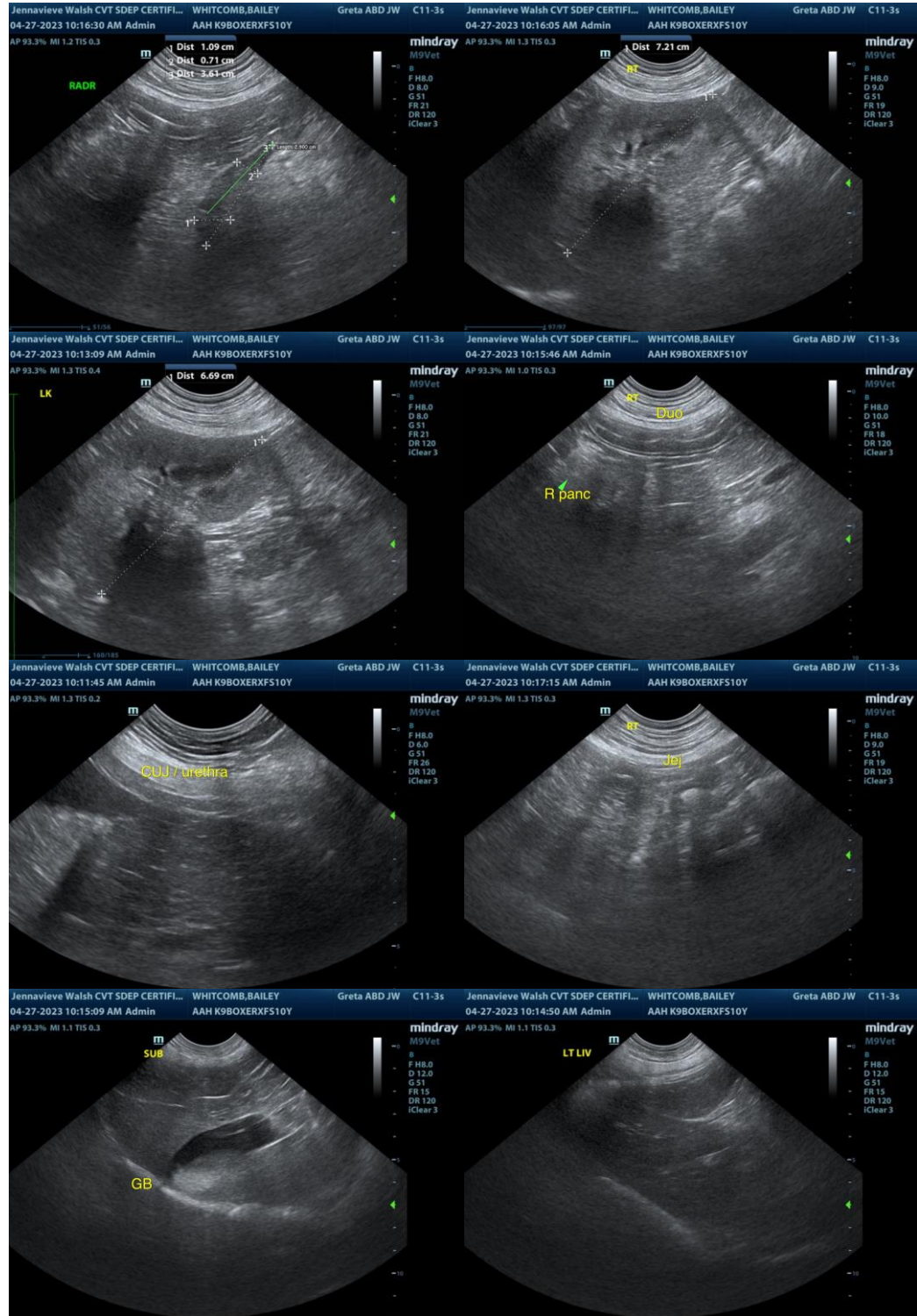
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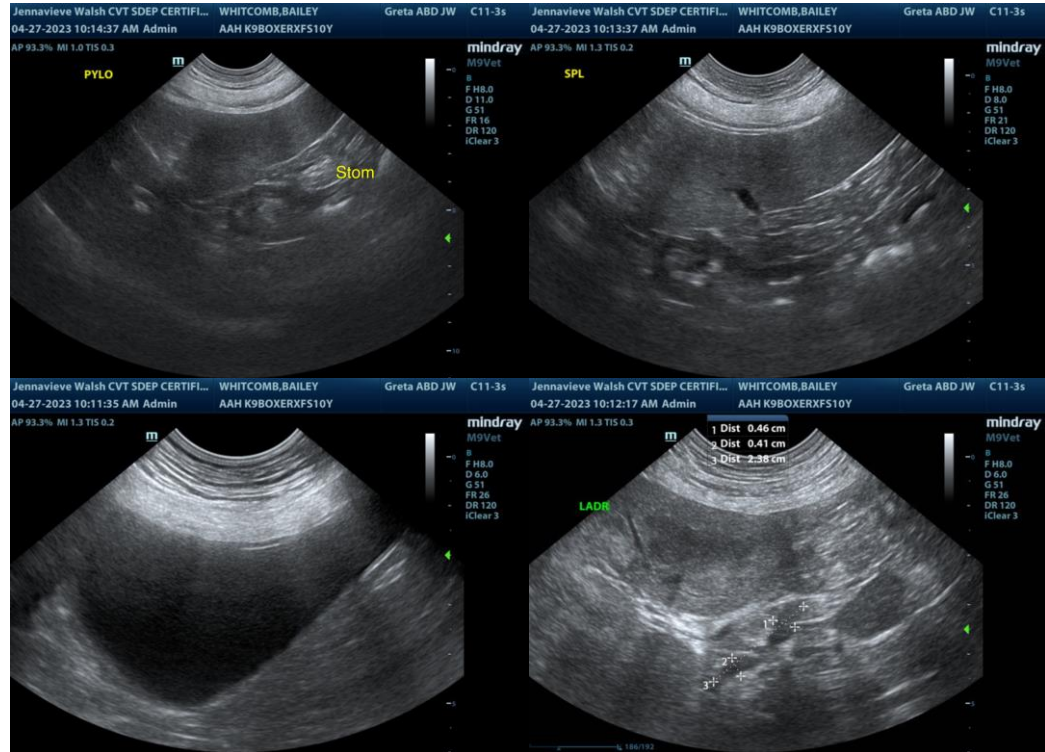
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com