



PATIENT PRESENTING CLINICAL SIGNS

Maggie Davis
History: P/U and P/D with elevated glucose on Bloodwork. Very recently started Caninsulin. Tense and mildly distended abdomen. Has been on Zeniquin and Metacam. Just had owner stop the Metacam. Normal BM, no vomiting, and normal appetite. Treating for Diabetes, concerned about possible organomegaly. Added Codeine and Convenia.

SPECIES

Canine

BREED

Poodle Mix

Abnormal PE/Chem/CBC/UA Results: Rads showed loss of serosal detail and tissue opacity cranioventral abdomen. U/A pH 5 and Cocci present. Bloodwork: RBC 4.28(5.65-8.87) HgB 32(37.3-61.7) non regenerative anemia and leukocytosis. WBCs 28.4(2.95-11.64), thrombocytosis and elevated glucose. Elevated ALKPHOS 979(23-212) and mild hypokalemia.

SEX

Female

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

4.5 yr

WEIGHT

7.6 kg

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 4.7 cm in length. The right kidney measured 5.2 cm in length.

INTERPRETED BY

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

The area of the aortic trifurcation was free of pathology.

No overt pathology in the area of the uterus or bilateral ovaries.

IMAGING PERFORMED BY

Crystall Hill

Adrenal Glands

Both adrenal glands presented mildly prominent in size without evidence of neoplastic criteria. The left adrenal gland measured 0.73 cm width at the caudal pole and 0.67 cm width at the cranial pole. The right adrenal gland measured 0.72 cm width at the caudal pole and 0.67 cm width at the cranial pole.

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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.

REFERRING VET

Dr. Chu

Liver

INVOICE

10612ag

The liver presented increased in size. The parenchyma of the liver was subjectively increased in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was uniform with a mild coarse echotexture. The capsule of the liver was symmetrical 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 with mildly congealed yet nonorganized debris. The cystic and common bile ducts were normal.

DATE

05/13/2022



PATIENT *Gastrointestinal*

Maggie Davis The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained minor ingesta with no signs of ileus, obstruction or foreign material.

SPECIES 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.

Canine

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

BREED *Pancreas*

Poodle Mix The pancreas exhibited mild prominent size with mild hypoechoic to nonhomogeneous parenchyma.

Free Abdomen

SEX

No overt lymphadenopathy or peritoneal effusion was present.

Female

ULTRASONOGRAPHIC FINDINGS

AGE

- Hepatomegaly exhibiting uniform parenchyma hyper echogenicity
- Mild congealed gallbladder debris (non-mucocele)
- Bilateral prominent adrenal glands-nonspecific
- Suspect mild to chronic active pancreatitis

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall the appearance of the liver was nonspecific yet consistent with benign hepatopathy, consideration for metabolic, reactive or vacuolar (diabetic) hepatopathy while the possibility of cholangiohepatitis, lipidosis or other hepatopathy possible. Full adrenal workup may be considered in this patient if strong clinical suspicion for hyperadrenocorticism if the presumed diabetes is difficult to regulate. Urine C/S on a sterile urine sample given likely glucosuria is recommended. If the diabetes is controlled and persistent/progressive herpetic enzyme elevations are noted an ultrasound guided FNA of the liver is recommended for screening cytology. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

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For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

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One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

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PATIENT

Maggie Davis

SPECIES

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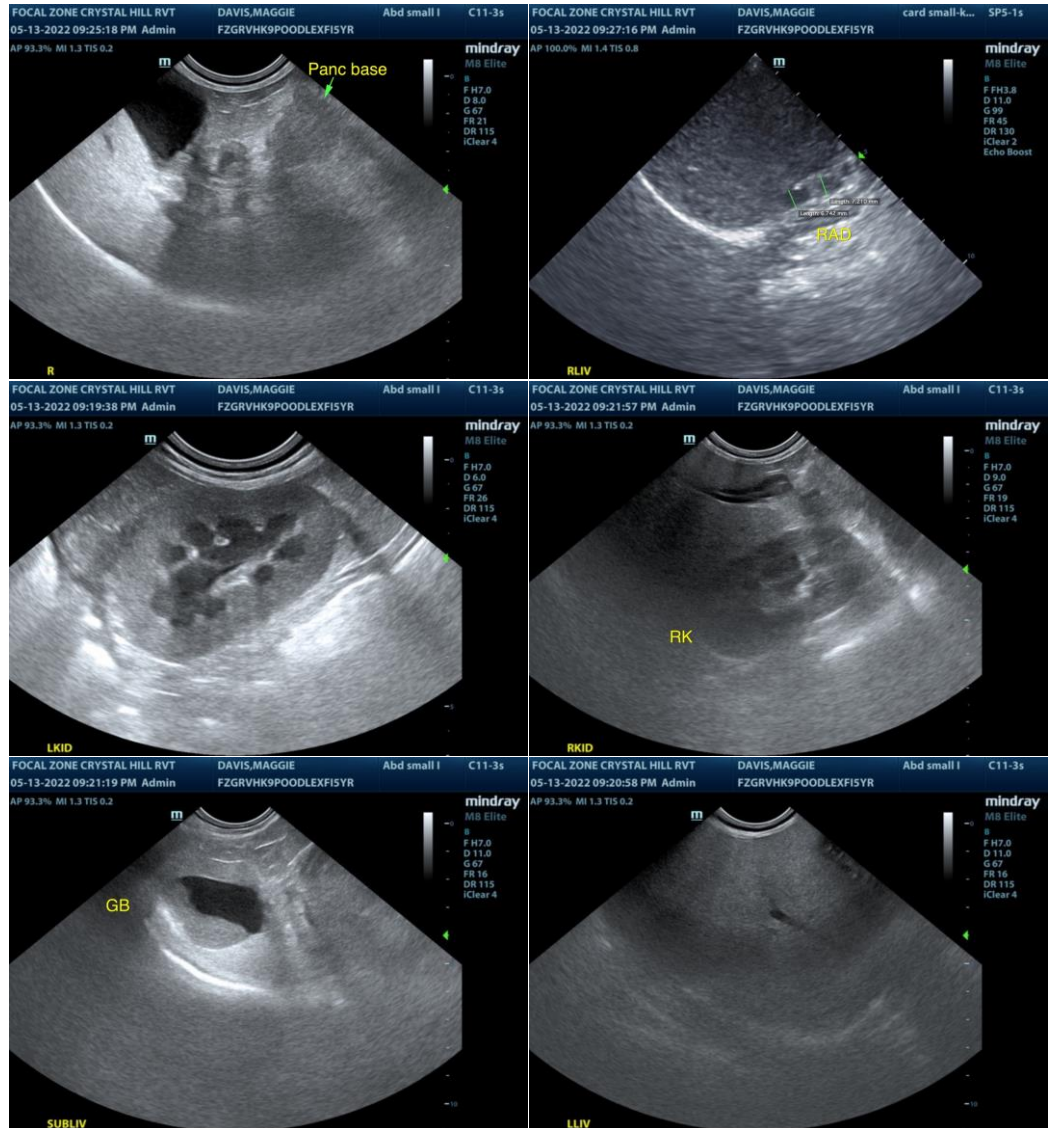
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PATIENT

Maggie Davis

SPECIES

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Poodle Mix

SEX

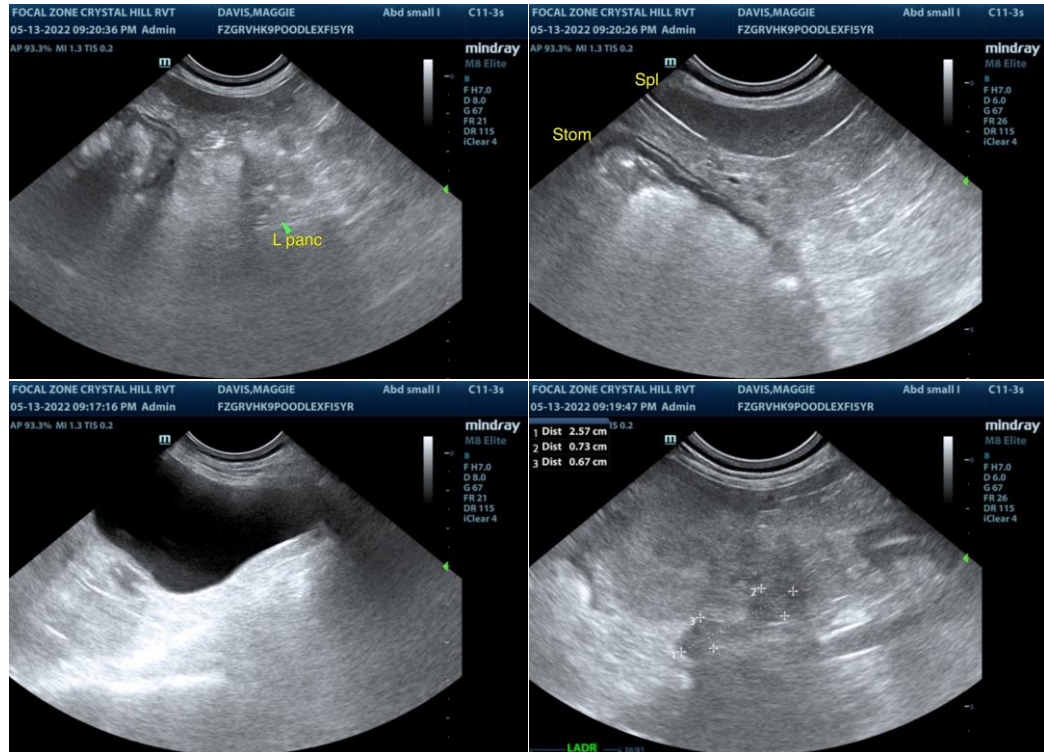
Female

AGE

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WEIGHT

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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.

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