

PATIENT PRESENTING CLINICAL SIGNS

Molly Hendricks History: Frank bloody stool, history of IBD, hypoalbuminemia Fortiflora, Metronidazole, z/d

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine 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 were noted.

The left kidney exhibited normal overall size and contour. 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 6.5 cm in length.

The right kidney exhibited previously noted subnormal size with moderate loss of corticomedullary demarcation and areas of medullary mineral. The right kidney measured 3.4 cm in length.

AGE Adrenal Glands

2011 The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.1 cm x 0.62 cm.

WEIGHT The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 3.0 cm x 0.50 cm.

77 Pounds

INTERPRETED BY Spleen

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) 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. Intermittent, subtle hyperechoic nondisruptive splenic nodules were present, consistent with probable benign small myelolipomas.

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

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REFERRING VET

Dr. Meyer

INVOICE

15216

DATE

5/16/22

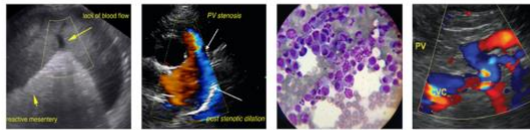
Liver

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 with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

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. The gastric body wall measured 0.46 cm.



PATIENT Molly Hendricks
 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 small intestinal wall measured 0.38 cm in width.

SPECIES Canine
 The descending colon exhibited variably thickened hypoechoic walls with indistinct to loss of discernable wall layer detail. The descending colon wall measured up to 0.86 cm in width. Non formed feces present, consistent with diarrhea present in the descending colon lumen, extending into the colorectum.

BREED *Pancreas*

Lab Mix
 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 was evident.

SEX Spayed Female

Free Abdomen

AGE 2011
 Suspect pericolic mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 0.9 cm.

ULTRASONOGRAPHIC FINDINGS

WEIGHT 77 Pounds

- Variably thickened descending colon, exhibiting decreased mural echogenicity and loss of discernable wall layering
- Sonographically unremarkable stomach and small bowel
- Previously noted subnormal right kidney, exhibiting nonspecific chronic changes
- Suspect associated pericolic mesenteric lymphadenopathy- hyperplasia, reactive lymphadenitis, potential for early neoplastic lymphadenopathy cannot be excluded.

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding in this study is the variably thickened descending colon, exhibiting loss of discernable all layering and decreased mural echogenicity. Considerations may include acute on chronic colitis, (i.e., infectious, ulcerative or other) or infiltrative colonic neoplasia (i.e., carcinoma, lymphoma or other), both of which may present in similar sonographic manner. The possibility of concurrent structurally insignificant inflammatory enteropathy, given the patients history, cannot be excluded, yet no overt evidence of structural gastric or small intestinal mural pathology was noted.

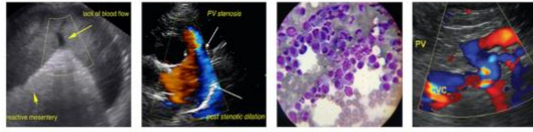
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Ideally, colonoscopy with biopsies for histopathology, tissue culture and sensitivity +/- FISH for further assessment is recommended. Empirical therapy for colitis, including enrofloxacin trial at 10 mg/kg PO SID with initial monitoring over 2 weeks for assessment of clinical improvement and ideally, sonographic reassessment with as needed gastrointestinal support would be reasonable.

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PATIENT

Molly Hendricks

SPECIES

Canine

BREED

Lab Mix

SEX

Spayed Female

AGE

2011

WEIGHT

77 Pounds

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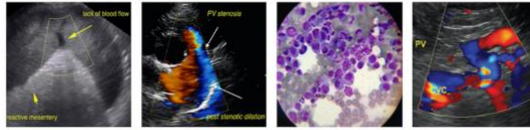
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



PATIENT

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Molly Hendricks

SPECIES

Canine

BREED

Lab Mix

SEX

Spayed Female

AGE

2011

WEIGHT

77 Pounds

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