



PATIENT

Winnie Neuman

SPECIES

Canine

BREED

English Bulldog

SEX

Spayed Female

AGE

5 Years

WEIGHT

60 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Ho Ho Kus VH

REFERRING VET

Dr. Eisenberg

INVOICE

15243

DATE

5/18/22

PRESENTING CLINICAL SIGNS

History: Patient presents for recent history of vomiting and inappetence. Improved appetite, but still very lethargic and having diarrhea. Abdominal radiographs WNL. Current med: metronidazole. Bloods pending.

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 were noted. Aortic trifurcation was normal.

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 5.0 cm in length. The right kidney measured 5.8 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 1.8 cm in length x 0.59 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 1.9 cm x 0.76 cm width at the caudal pole.

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

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 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 exhibited intact yet prominent wall layering. A mild to moderate amount of retained non-shadowing yet variably echogenic ingesta was present in the stomach. No overt evidence of mechanical pyloric outflow obstruction. Potential for gastric hyperperistalsis possible. Ventral gastric body wall measured 0.62 cm.

The small intestine presented intact wall layering and primarily maintained 1:3 muscularis/mucosa ratio with segmental areas of jejunal spasming to mild corrugation, along with areas of retained non-shadowing chyme. The duodenum wall measured 0.47 cm. The jejunum wall measured 0.48 cm.



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

Winnie Neuman **Pancreas**

SPECIES 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.

Canine

Free Abdomen

BREED

English Bulldog

Mildly prominent to enlarged medial iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum and maintaining a normal width: length ratio (<0.5). The lymph node measured 1.4 cm x 0.57cm. This lymph node was not consistent with inflammatory or neoplastic criteria and considered incidental. No evidence of omental lymphadenopathy or peritoneal free fluid.

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed Female

- Gastroenteritis pattern with mild gastric and segmental intestinal ingesta/chyme- suspect inflammatory bowel

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

5 Years

No evidence of mechanical gastrointestinal obstruction or overt foreign material. Supportive care for gastroenteritis/IBD should prove beneficial. A GI panel to include PLI/TLI/Cobalamin/Folate may be considered for further assessment given the persistent diarrhea. Fresh fecal analysis to rule out parasitic ova/Giardia is suggested, if not done. Although considered unlikely, resting cortisol level to rule out occult Addisons disease could be considered yet the bilateral adrenal glands appeared to be sonographically normal.

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Empirically, a limited antigen or hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Provable or Visbiome), antibiotic trial and as needed gastrointestinal support with assessment of clinical response may prove beneficial. Intestinal biopsies may be indicated if GI signs continue despite empirical therapy.

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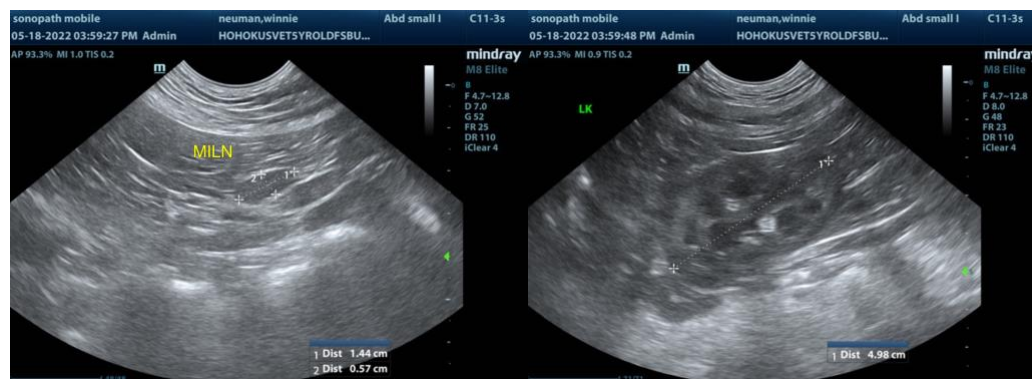
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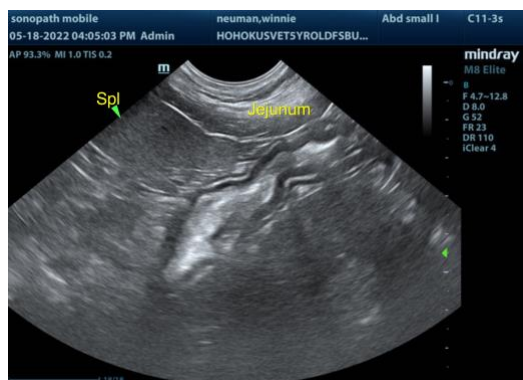
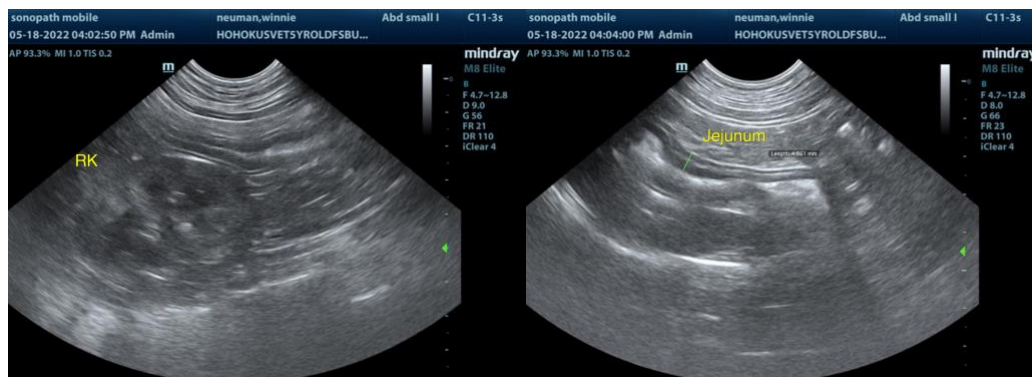
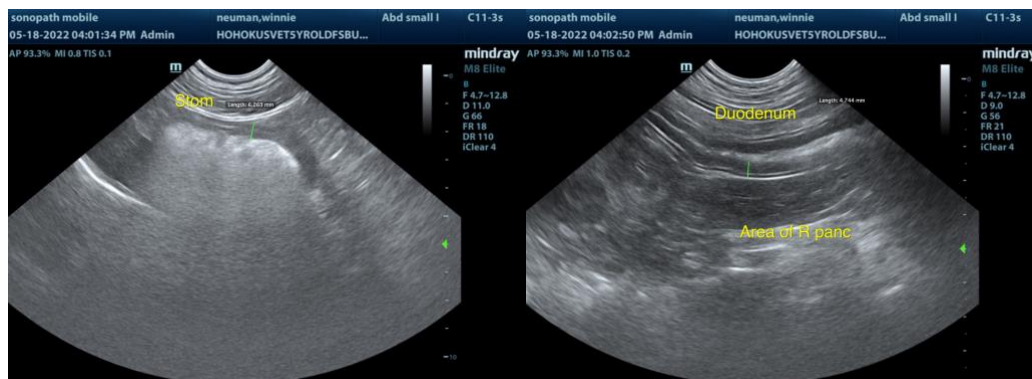
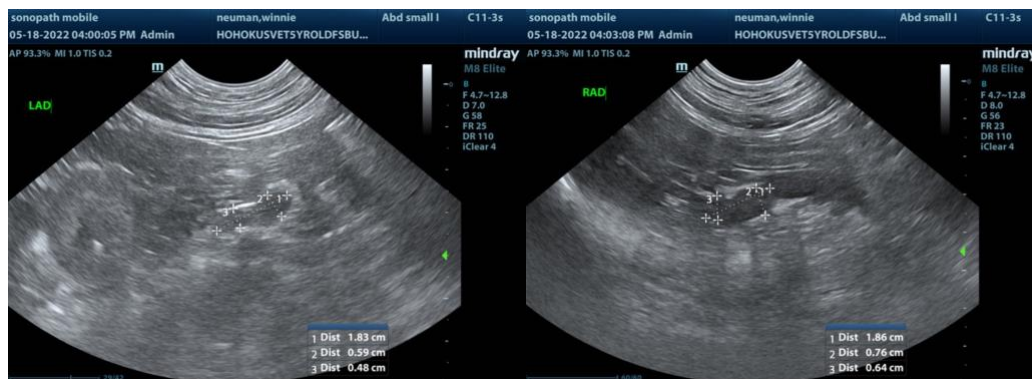
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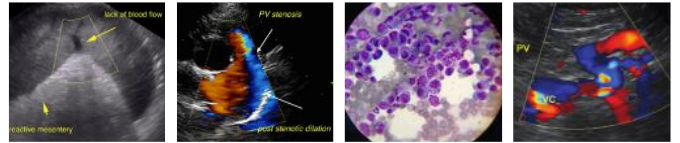
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referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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