



PATIENT

Walter NJSH

PRESENTING CLINICAL SIGNS

Hx of epilepsy, current home clusters. R/o other pathology and possible pre CT/MR scan

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder 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.

BREED

Shih Tzu

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 2.9 cm in diameter. Anechoic, thinly walled parenchyma cysts were present.

SEX

Male

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. Minor loss of corticomedullary border demarcation. Pinpoint areas of medullary mineral were noted. Mild left kidney pyelectasia present. The left kidney measured 4.2 cm. The right kidney measured 4.5 cm.

AGE

7 Years

The area of the aortic trifurcation was free of pathology.

WEIGHT

12 Pounds

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.4 cm length x 0.43 cm at the caudal pole. The right adrenal gland measured 1.6 cm length x 0.36 cm at the caudal pole.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Jessica Miller

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.

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

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.

INVOICE

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The small intestine exhibited intact wall layering, yet subjective propensity for mildly prominent duodenojejunal wall layering.

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

DATE

5/20/22



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Pancreas

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Canine

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.

Free Abdomen

BREED

Shih Tzu

The left and right testicles were sonographically unremarkable.

Possible subtle evidence of segmental peri intestinal mild reactive mesentery. No overt lymphadenopathy or obvious peritoneal free fluid.

SEX

Male

ULTRASONOGRAPHIC FINDINGS

- Cystic prostatic hyperplasia, minor potential for prostatitis.
- Early age related kidneys with minor left kidney pyelectasia.
- Normal volume liver.
- Subjective potential segmental duodenojejunal enteritis pattern.

AGE

7 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no overt evidence of significant abdominal visceral pathology as an obvious contributing factor to the patient's seizures. Although not definitive, the segmental intestinal tract exhibited potential for mild inflammatory mural changes. However, given the lack of reported gastrointestinal signs, this finding is non-specific with potential for normal patient variant. Correlation with clinical gastrointestinal history as well as monitoring for the possibility of emerging gastrointestinal signs recommended.

WEIGHT

12 Pounds

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

The pyelectasia of the left kidney may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein:creatinine ratio on sterile urine sample is recommended.

IMAGING PERFORMED BY

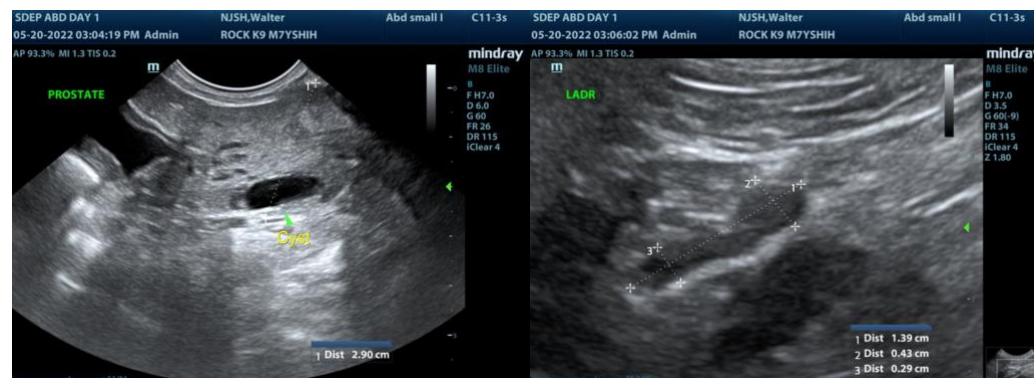
Jessica Miller

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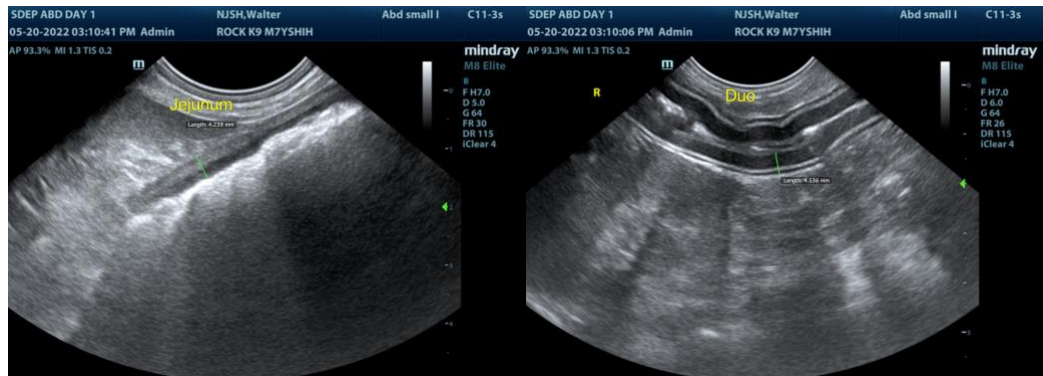
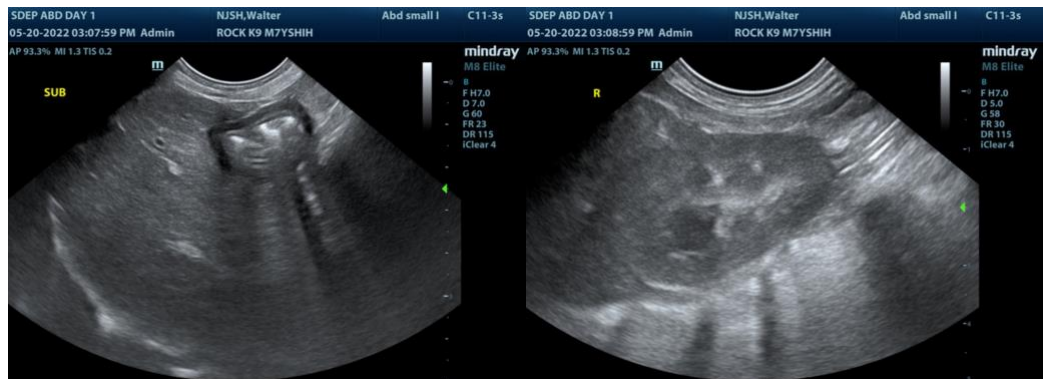
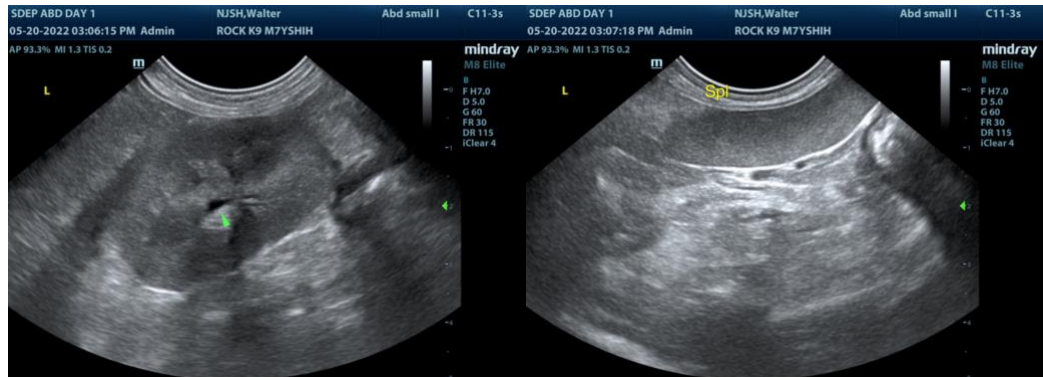
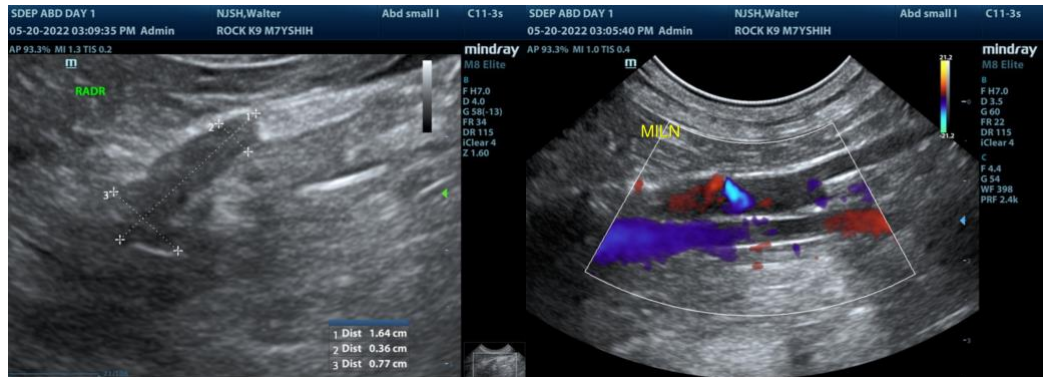
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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)

BREED

Shih Tzu

info@SonoPath.com

SEX

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AGE

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