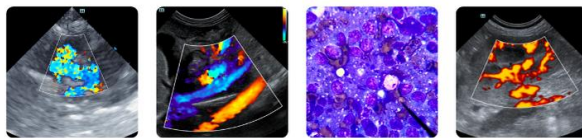




PATIENT	PRESENTING CLINICAL SIGNS
Ro Atempa	Bloody diarrhea Abnormal PE/Chem/CBC/UA Results: Lipase 340
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
K9	<i>Urinary System</i>
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. 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.
Chihuahua	
SEX	No evidence of pathology in the area of the aortic trifurcation.
FS	
AGE	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. A small lateral cortical cyst was present in the right kidney. The left kidney measured 2.9 cm in length. The right kidney measured 2.8 cm in length.
8	
WEIGHT	<i>Adrenal Glands</i>
4	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.35 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 0.41 cm width at the caudal pole.
INTERPRETED BY	<i>Spleen</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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	<i>Liver/ Gallbladder</i>
Jenn	The liver was subjectively normal in size, structure, and contour. Normal hepatic vascular volume was present. 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	<i>Gastrointestinal</i>
Rockaway Animal Hospital	The stomach presented intact mildly prominent wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, or foreign material.
REFERRING VET	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Subjective mild decreased mucosa echogenicity with mildly enhanced intestinal submucosa layer. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.
Dr. Maniar	
INVOICE	
75104	
DATE	
5-22-26	



PATIENT

Ro Atempa

SPECIES

K9

BREED

Chihuahua

SEX

FS

AGE

8

WEIGHT

4

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

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Hospital

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The colon walls presented intact yet thickened wall layering. Primarily empty colon lumen with mild nonformed descending colon fecal matter. The distal colon wall at the level of the urinary bladder measured 0.37 cm wall width.

Pancreas

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

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Colitis with possible concurrent nonspecific gastroenteritis.
- Normal adrenal glands.
- Small right kidney cortical cyst.
- Normal area of the pancreas.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary intolerance/indiscretion, infectious disease, enterotoxin, inflammatory bowel, mild pancreatitis, which may present sonographically normal, occult parasitism, and less likely occult Addison's disease or neoplasia are possible. Gastrointestinal support indicated.

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), and as needed gastroprotectants are suggested with clinical monitoring. Note that recent research has shown that indiscriminate use of antibiotics may actually cause harm.

Fresh fecal analysis and cortisol level may be considered.





PATIENT

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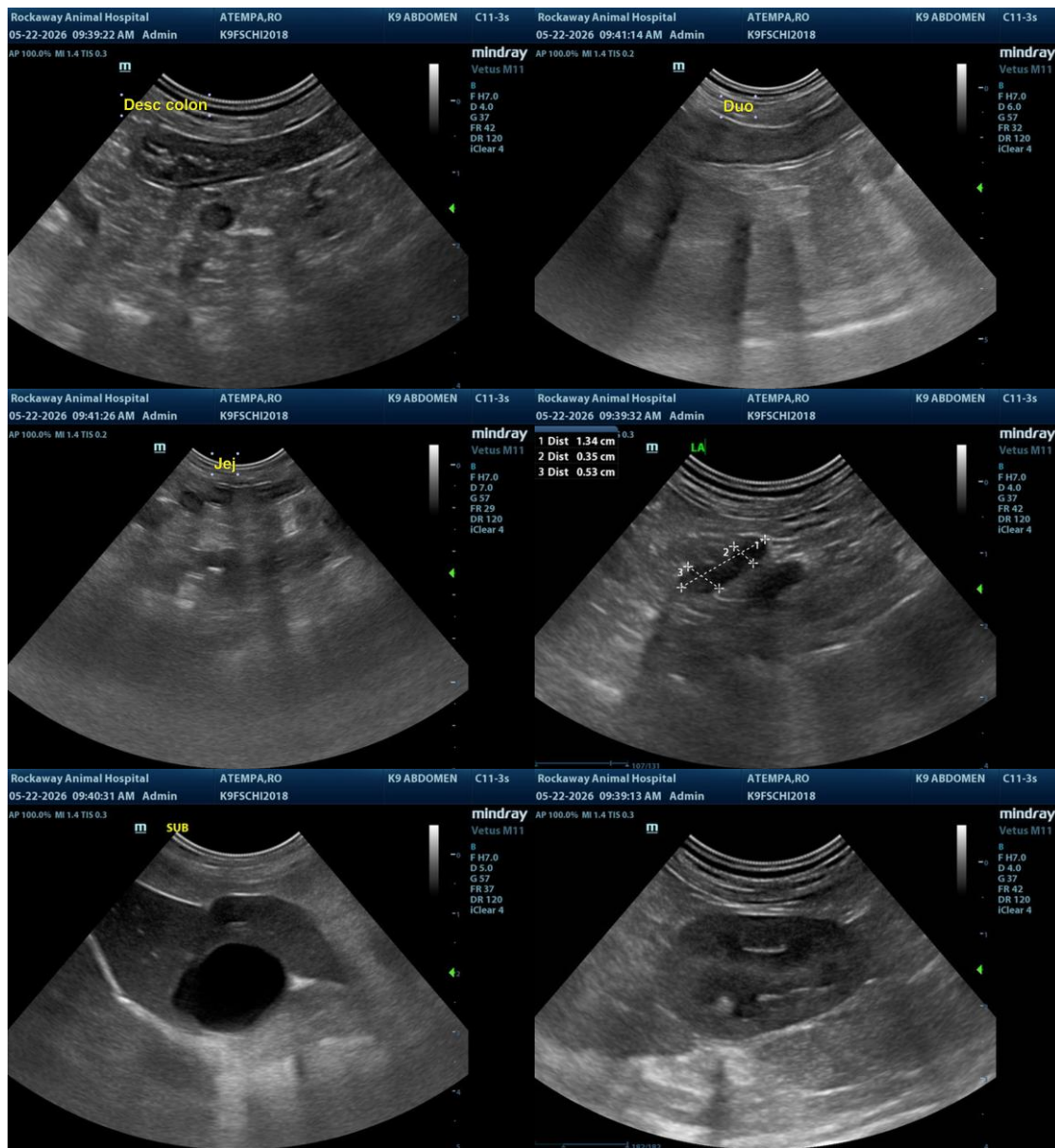
Dr. Maniar

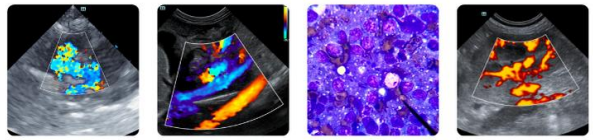
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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