



PATIENT

Michelle Macnado

SPECIES

Canine

BREED

Retriever Mix

SEX

FS

AGE

11 years

WEIGHT

37.2 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Summit Dog and Cat
Hospital

REFERRING VET

Dr. Benn Doyle

INVOICE

13785

DATE

5/4/22

PRESENTING CLINICAL SIGNS

Weight loss, Met search, suspect osteosarcoma Current meds: Apoquel tabs 16mg, Gabapentin 100mg
Abnormal PE/Chem/CBC/UA Results: WNL

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 was noted.

Visualized medial iliac lymph node exhibited normal size, shape, and echogenicity, measuring 2.6 cm x 1.1 cm, maintaining width: length ratio (<0.5). Respectively, the medial iliac and mesenteric lymph nodes are not consistent with inflammatory or neoplastic / metastatic criteria and are incidental.

Normal size and margination were present in the kidneys. 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 5.0 cm in length. The right kidney measured 6.0 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 0.39 cm width at the caudal pole and 0.68 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.31 cm width at the caudal pole and 0.74 cm width at the cranial 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/ Gallbladder

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 containing primarily anechoic content with mild nonorganized luminal debris. 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 contained mild, nonshadowing ingesta / chyme likely consistent with post prandial presentation without signs of ileus, obstruction or foreign material. The stomach was otherwise normal.



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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.

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

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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 were evident.

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Free Abdomen

Focal to intermittent mesenteric lymph node exhibited normal size, shape, and echogenicity, measuring 1.5 cm x 0.5 cm, maintaining width: length ratio (<0.5). No omental masses or peritoneal effusion were noted. Respectively, the medial iliac and mesenteric lymph nodes are not consistent with inflammatory or neoplastic / metastatic criteria and are incidental.

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ULTRASONOGRAPHIC FINDINGS

WEIGHT

37.2 lbs.

Primary Findings

- Mild age-related kidneys
- Minor gallbladder sludge
- Mild gastric ingesta - suspect post prandial presentation

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, mild geriatric abdomen without evidence of significant visceral pathology including no overt intra-abdominal neoplastic or metastatic criteria. An obvious cause of the patient's weight loss was not definitively evident within the abdominal cavity.

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If not done, three view chest radiographs are suggested. A GI panel to include PLI / TLI/Cobalamin/Folate may be considered to assess for or rule out occult gastrointestinal disease as a potential contributing factor to the patient's weight loss.

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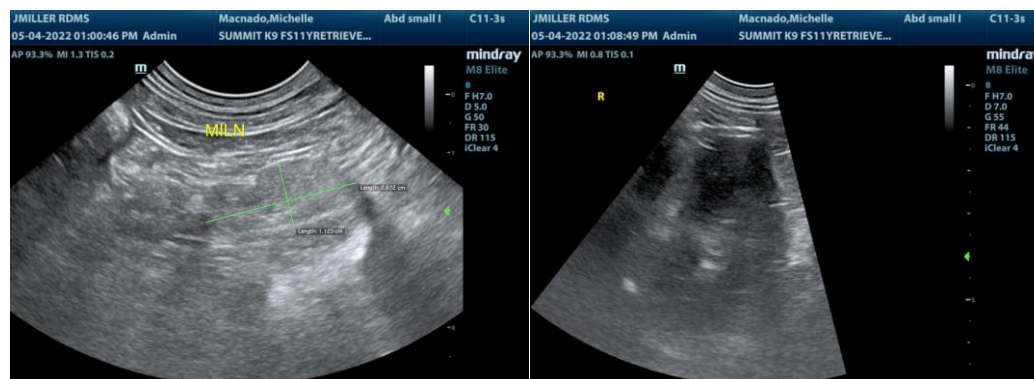
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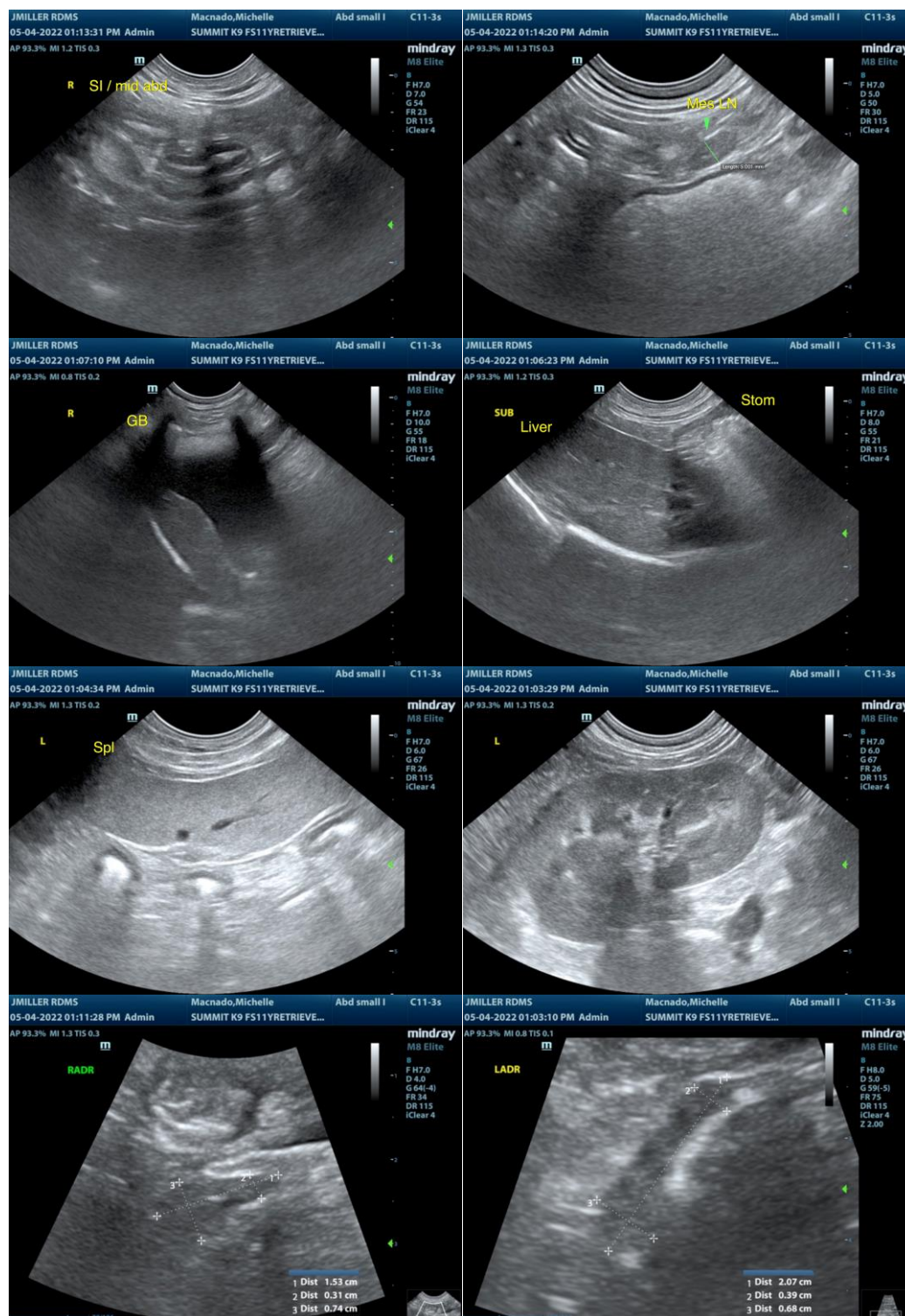
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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