



PATIENT	PRESENTING CLINICAL SIGNS
Enzo Albulesco	Ascites, suspect PLE.
SPECIES	Current meds: Metro 500mg bid, Clavamox 500mg bid, z/d diet. Will be starting Prednisone today.
Canine	Abnormal PE/Chem/CBC/UA Results: ALB 1.3, GLOB 1.5, TP 2.8, K+ 3.9, Ca 6.1, AST 94, CK 333, U/A-USG 1.013, protein-neg
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Labrador Retriever	Urinary System
SEX	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.
MN	
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. The left kidney measured 5.9 cm in length. The right kidney measured 6.6 cm in length.
3yr	
WEIGHT	The area of the aortic trifurcation was free of pathology.
94.2lb	The residual prostate exhibited subtle prominent size with symmetrical capsule contour and non-homogenous to subtly nodular parenchyma. No evidence of mineralization. The residual prostate measured 2.9 cm x 1.9 cm. This finding is considered incidental and is not consistent with inflammatory or neoplastic criteria.
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.45 cm width at the caudal pole and 2.5 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.65 cm width at the caudal pole.
IMAGING PERFORMED BY	Spleen
Shari Reffi CVT	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.
HOSPITAL NAME	Liver/Gallbladder
Animal Hospital of Sussex County	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.
REFERRING VET	Gastrointestinal
Dr. Ackernelcht	
INVOICE	
13741ag	
DATE	
05/08/2023	



PATIENT	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably echogenic non-shadowing ingesta with no signs of ileus, obstruction or foreign material.
Enzo Albulesco	
SPECIES	The small intestine presented intact generalized prominent wall layering with prominent mucosa along with generalized mucosal fogging to increased mucosal echogenicity. Mild segmental non-obstructive duodenojejunal ileus was present. The lumen of the small intestine was empty with no signs of obstruction or foreign material.
Canine	
BREED	Normal visible colon wall layers were present with generalized colon distention and non-formed feces in lumen.
Labrador Retriever	
	Pancreas
SEX	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.
MN	
	Free Abdomen
AGE	No omental masses or overt lymphadenopathy was present.
3yr	Subjective moderate volume anechoic peritoneal effusion. Peri intestinal to generalized mild uniform hyperechoic omentum was present.
WEIGHT	
94.2lb	
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none"> • Intact yet prominent small intestine walls with generalized increased mucosal echogenicity/mucosal fogging. • Distended colon with non-formed feces. • Anechoic peritoneal effusion. • Normal liver.
	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
IMAGING PERFORMED BY	The small intestine presentation is consistent with PLE criteria given no evidence of hepatic congestion or proteinuria. Inflammatory bowel disease or other inflammatory enteropathy, lymphangiectasia or infiltrative neoplasia (less likely) are all potentials. A small intestinal surgical biopsy is required for a definitive diagnosis yet is contraindicated with current ALB level >2.0.
Shari Reffi CVT	
HOSPITAL NAME	Part or all of this protocol may be considered based on your clinical impression of the patient:
Animal Hospital of Sussex County	OBJECTIVE: keep albumin levels > 2 g/dl, avoid thromboembolism and cavitory effusions, monitor concurrent PLN (Wheaton Terrier PLE/PLN) and liver disease:
REFERRING VET	Plasma 10 mL / kilogram IV over 4 hours Or Human albumin 2 ml/kg/h over 10 hours. Total daily volume 20.l/kg/day And Colloids/Hetastarch
Dr. Ackernelcht	10 to 20 mL per kilogram per day and dogs 10 to 15 mL per kilogram per day cats (Can bolus first 1/3 of dose over 15 minutes) & maintain on LRS maintenance otherwise.
INVOICE	Metronidazole (10-20 mg/kg po bid) Famotidine 1 mg/kg lv lm po dc Sid /bid Sucralfate 0.5-1 g po tid dogs, 0.5 g bid cats in slurry Or Misoprostol 1-5 ug/kg po tid
13741ag	Diet: Highly digestible high quality protein, low fiber, low fat diet (< 15% of dry matter). Hydrolyzed protein or novel protein. Purina HA or Royal Canine HP or similar.
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PATIENT

Enzo Albulesco

Prednisone or prednisolone 2 mg/kg bid x 3-5 days then 2 mg/kg sid. **Chlorambucil** in refractive severe IBD/alimentary lymphoma cases (monitor cbc for rare bone marrow suppression) 4 mg/m² Q 24-48 hours.

SPECIES

Canine

Cobalamine (B12) 250-1500 ug/dog weekly x 6 weeks.

Calcium supplementation if necessary.

Aspirin 0.5-1 mg/kg/day or **Clopidrel (Plavix)** 1-5 mg/kg/day.

BREED

Labrador Retriever

SEX

MN

AGE

3yr

WEIGHT

94.2lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

Animal Hospital of
Sussex County

REFERRING VET

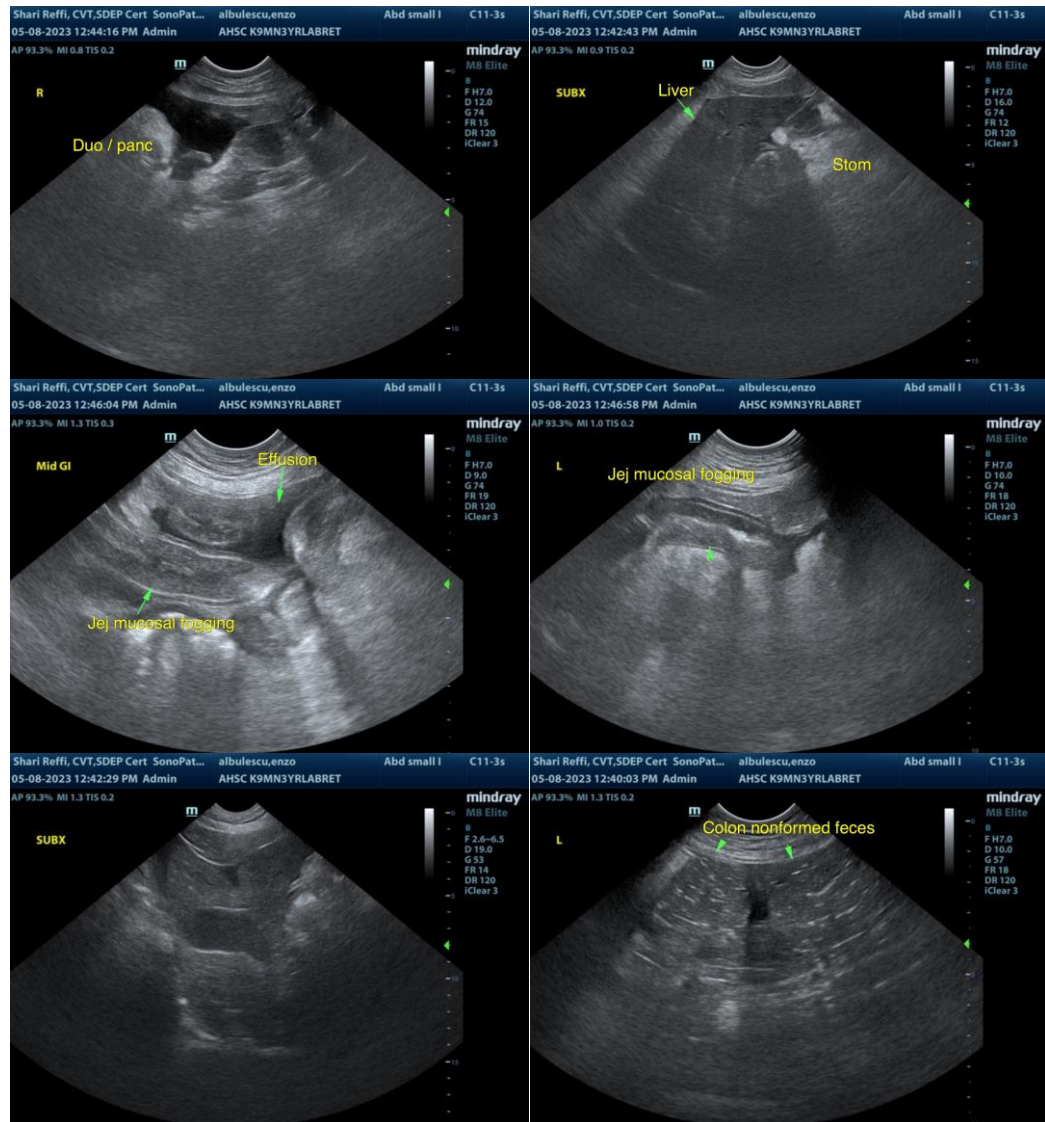
Dr. Ackernecht

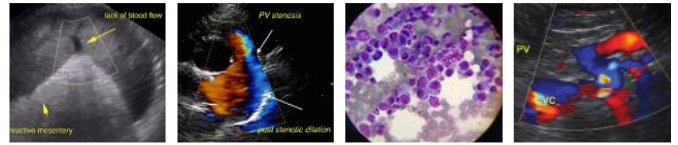
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SPECIES

Canine

BREED

Labrador Retriever

SEX

MN

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3yr

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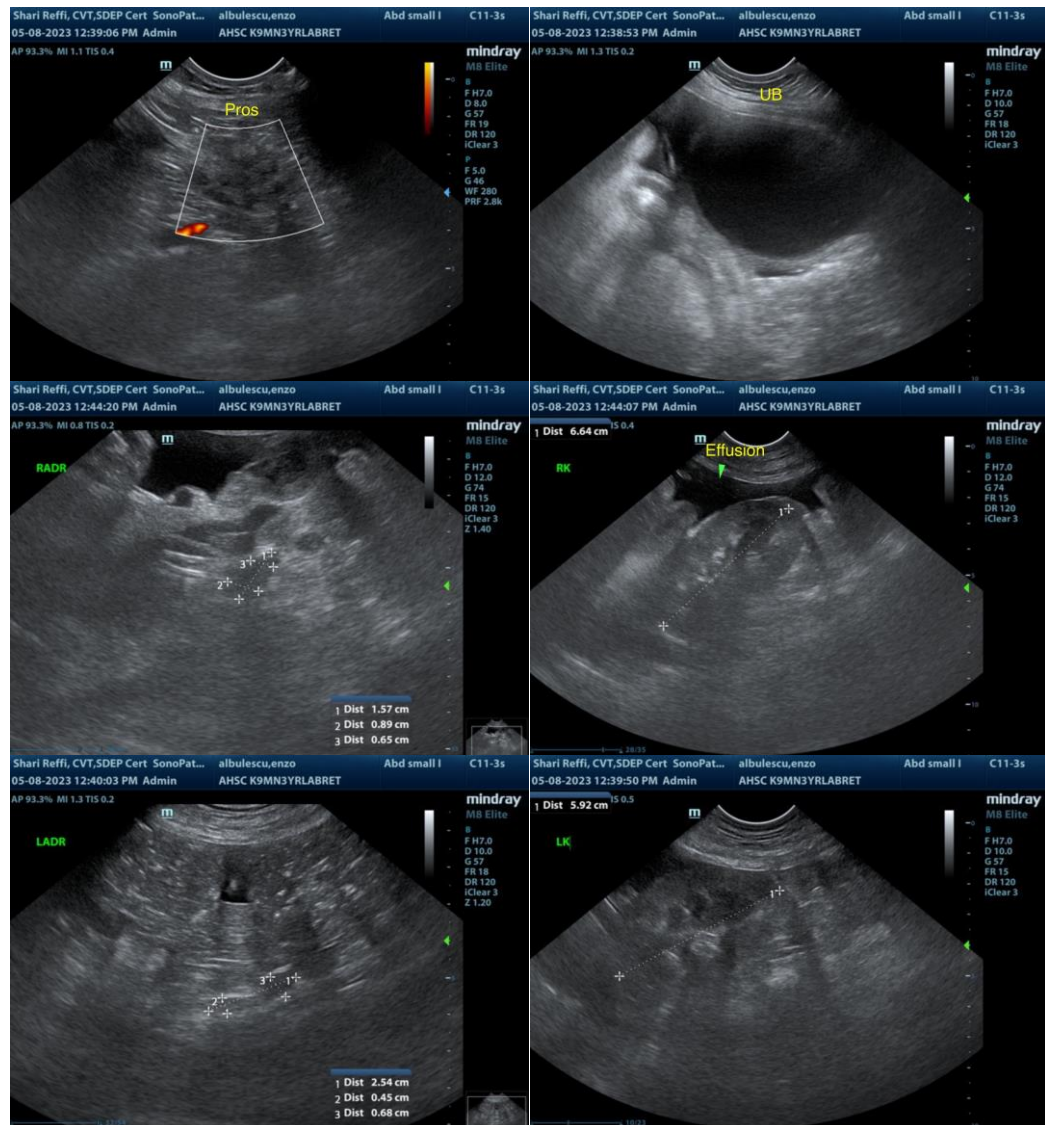
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
mac.daniel@sonopath.com