

PATIENT

Blackie Dog Haverly

SPECIES

Canine

BREED

Labrador

SEX

FS

AGE

10 years

WEIGHT

30.5 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

La Paw AH

REFERRING VET

Stephanie Sur DVM

INVOICE

10824ag

DATE

6/14/22

PRESENTING CLINICAL SIGNS

Blackie Dog presented to BAESC for referral AUS due to increasing LE's. Patient has history of chronic GI issues; including V/D and occasional melena, which has been reported intermittently over the last 5-10 years. Patient has recently received Cerenia, hepatosupport, Provable. Several months ago, was receiving Carprofen.

Abnormal PE/Chem/CBC/UA Results: PE: EYES: Lenticular sclerosis OU ORAL: Moderate dental disease ABDO: NSF-- tense and non-painful INTEG: Several SQ lipomatous-like masses. Single, raised, pigmented, papillomatous-like lesion on the R dorsal scapula. MS: Overweight; BCS: 8/9; stiff hips Blood work: 3/25/2022: -- ALT; 140 U/L -- ALP: 1204 U/L 6/2/2022: -- ALT: 168 U/L -- ALP: 2379 U/L

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was 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 7.1 cm in length. The right kidney measured 7.5 cm in length.

Adrenal Glands

Both adrenal glands were enlarged in size exhibiting nonhomogeneous to nodular parenchymal changes. No overt evidence of parenchymal escape or vascular invasion was noted. The left adrenal gland measured 1.4 cm width at the caudal pole and 3.5 cm width at the cranial pole. The right adrenal gland measured 4 cm x 3.4 cm.

Spleen

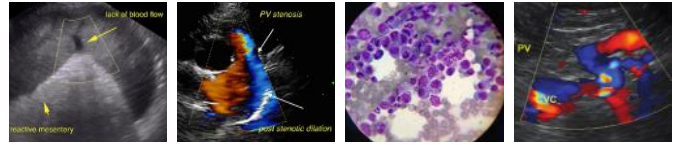
The spleen exhibited subtle generalized parenchymal heterogeneity with focal to intermittent subtle nondisruptive hypoechoic nodules, an example measuring 2.2 cm in diameter. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver/ Gallbladder

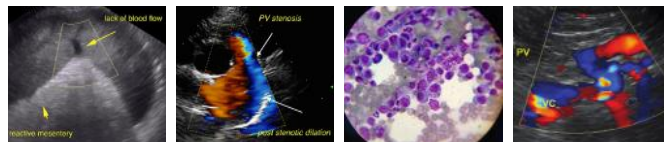
The liver exhibited mild generalized enlargement and maintained symmetrical to mildly rounded contour. Mild increased parenchyma echogenicity exhibiting moderate coarse echotexture and evidence of mild remodeling was observed. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with mild 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 was empty with no signs of ileus, obstruction, or foreign material.



PATIENT	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.
Blackie Dog Haverly	Normal visible colon wall layers were present with apparent formed feces in lumen.
SPECIES	Pancreas
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 were evident.
BREED	Free Abdomen
Labrador	No overt lymphadenopathy or peritoneal effusion was present.
SEX	ULTRASONOGRAPHIC FINDINGS
FS	<ul style="list-style-type: none"> • Bilateral asymmetrical to nodular nonhomogeneous adrenal glands • Vacuolar hepatopathy pattern • Minor gallbladder debris-non mucocele • Overtly normal GI tract/colon • Mild chronic renal changes • Mild heterogeneous spleen with intermittent nondisruptive subtle hypoechoic nodules
AGE	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
10 years	Considerations for the bilateral adrenal glands may include functional vs nonfunctional adenomatous change, benign hyperplasia while the possibility of left or right neoplastic criteria cannot be excluded. Potential for mixed adrenal pathology is possible. A full adrenal work up with LDDST and screening BP to assess for evidence of hypertension is recommended.
WEIGHT	Multiple etiologies for the splenic presentation include hyperplasia, hematopoiesis, small hematoma, mild splenitis, while potential emerging splenic neoplastic criteria while less likely cannot be definitively excluded. Sonographic monitoring of the spleen for evidence of progressive parenchymal changes at this stage would be reasonable. An ultrasound guided splenic FNA for screening cytology assuming normal clotting status and using a 25g needle could be considered primarily to ensure only benign changes are present.
30.5 kg	Dietary intolerance/food hypersensitivity, low grade to chronic pancreatitis, structurally insignificant inflammatory gastroenteropathy both of which may present sonographically normal could be possible given the patient's chronic GI signs. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Continued as needed supportive GI care which may include hydrolyzed diet trial in addition to current supportive care may prove beneficial.
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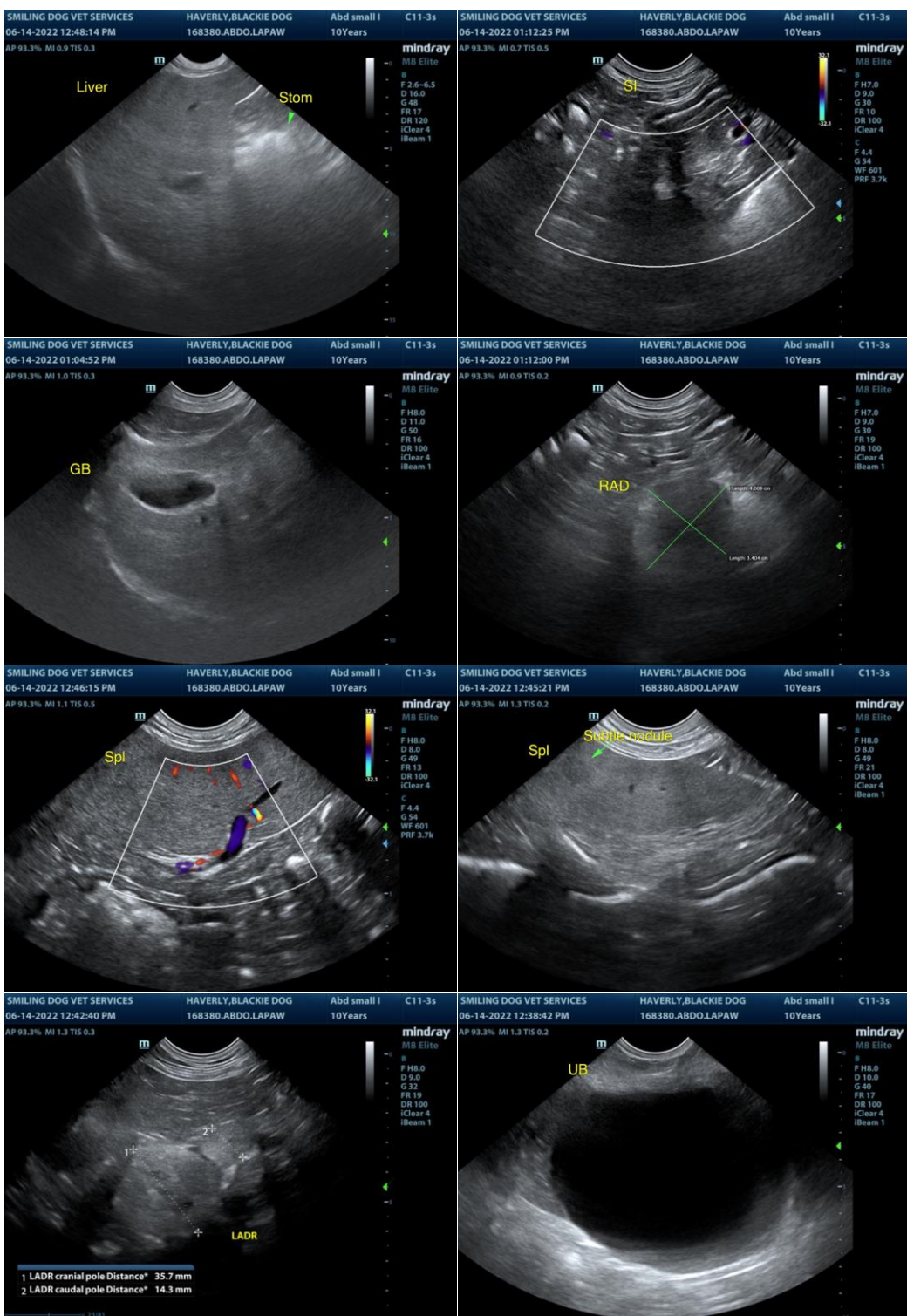
Stephanie Sur DVM

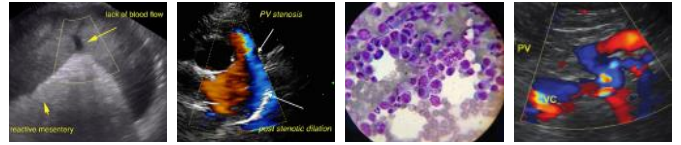
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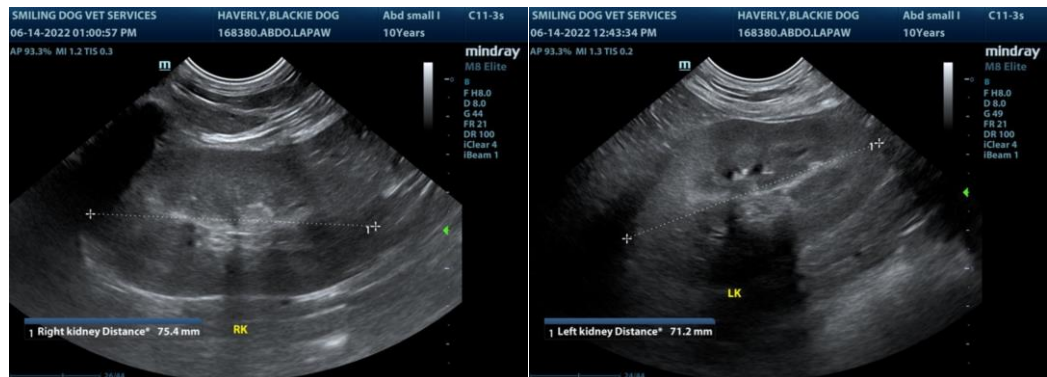
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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