



PATIENT

Daisy Louie

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spay

AGE

8

WEIGHT

2.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Sanctuary VC

REFERRING VET

Dr. Warnakulasooriya

INVOICE

14088

DATE

6/14/22

PRESENTING CLINICAL SIGNS

Not eating last 5 days some int vomiting hiding and possible tender abdomen. Patient given short term GA for scan

Abnormal PE/Chem/CBC/UA Results: Mild elevation of ALP and cPL

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.

The area of the aortic trifurcation was free of pathology.

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 3.6 cm in length. The right kidney measured 3.5 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 0.43 cm width at the caudal pole and 0.45 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 0.38 cm width at the caudal pole and 0.38 cm width at the cranial pole.

Spleen

The spleen was normal in size and contour exhibiting a finely textured homogeneous parenchyma with a solitary, nondisruptive, subtly hypoechoic nodule in the subjective mid to caudal spleen, measuring 0.42 cm in diameter.

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 and primarily anechoic luminal content with minor debris, which is nonspecific and incidental potentially owing to fasting. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented wall mild to moderate thickening secondary to echogenic mild to moderate mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild to moderate retained primarily anechoic fluid was present. No overt evidence of mechanical pyloric outflow obstruction was



PATIENT

Daisy Louie

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spay

AGE

8

WEIGHT

2.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Sanctuary VC

REFERRING VET

Dr. Warnakulasooriya

INVOICE

14088

DATE

6/14/22

noted. The dorsal gastric body wall width measured 0.40 cm. The pylorus wall width measured 0.31 cm.

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 mechanical / metabolic small intestinal ileus pattern, obstruction, or foreign material. The duodenum wall width measured 0.39 cm. The jejunum wall width measured 0.32 cm.

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

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

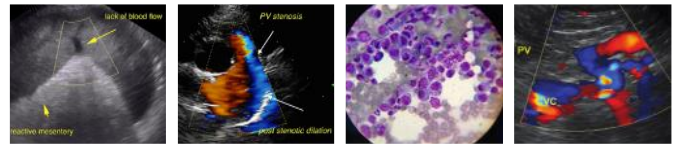
- Hypomotile gastritis, overtly normal small bowel
- Sonographically unremarkable pancreas
- Low-grade hepatopathy - benign
- Minor gallbladder debris

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the stomach is consistent with inflammatory criteria without overt evidence of infiltrative gastric neoplasia which is thought less likely. Dietary indiscretion, gastro-toxic Insult, and infectious gastritis could be considered.

Some or all of the following protocol or similar protocol with as-needed gastrointestinal support could be considered with assessment of clinical response. Potential for low-grade to chronic pancreatitis could be present yet sonographically normal. However, the sonographic appearance of the pancreas was not consistent with primary or significant pancreatitis as the primary underlying cause of the patient's clinical signs.

A clinical trial of **Zithromax (Dogs: 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), Metronidazole (10-20 mg/kg p.o. b.i.d.), Pepcid (0.5-1 mg/kg s.i.d.) and Sucralfate (0.5-2 g/dog PO) or Omeprazole (1 mg/kg p.o. s.i.d.)** over the next 3 weeks along with a **novel-protein or hydrolyzed diet** with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.



PATIENT

Daisy Louie

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spay

AGE

8

WEIGHT

2.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Sanctuary VC

REFERRING VET

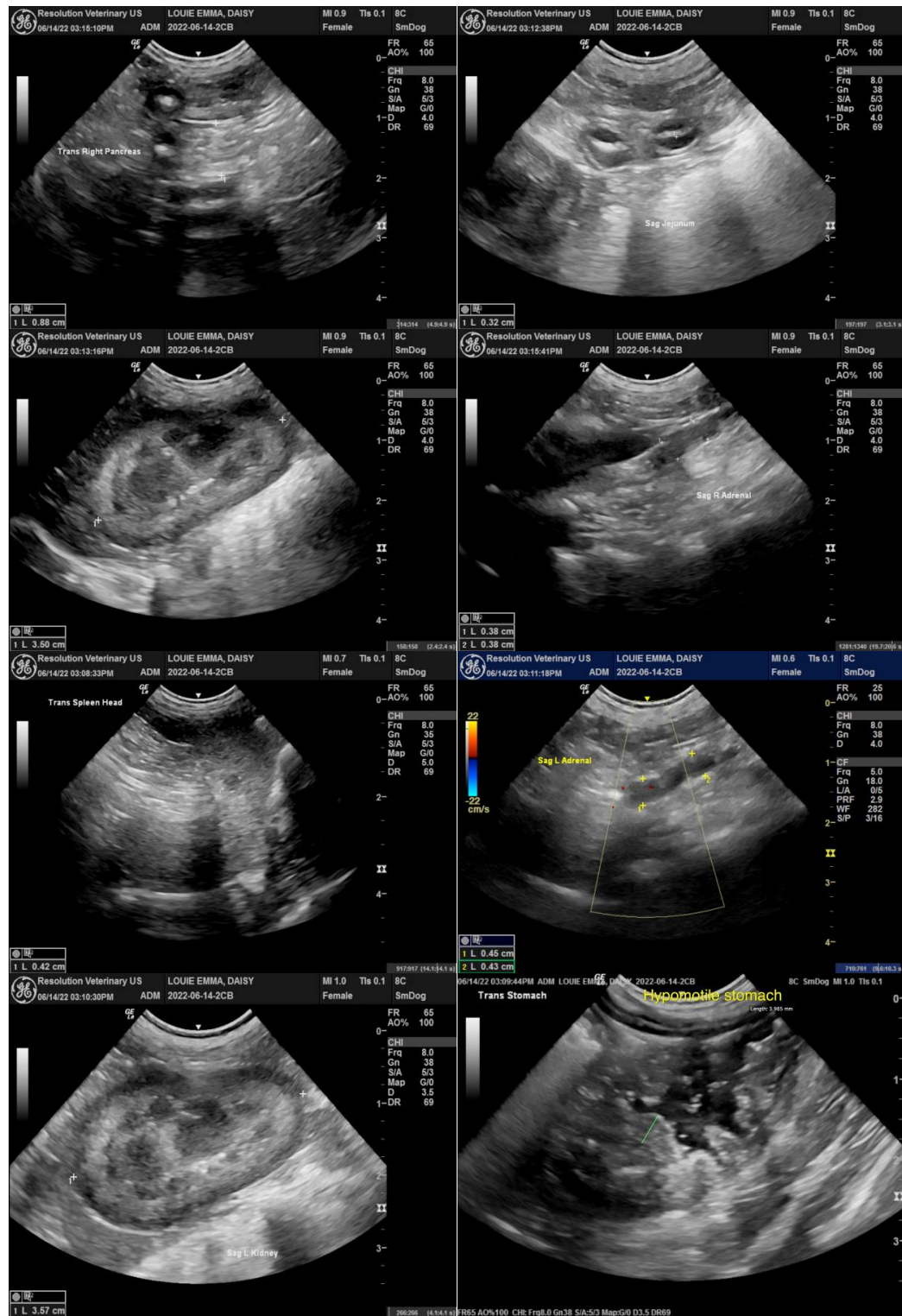
Dr. Warnakulasooriya

INVOICE

14088

DATE

6/14/22





PATIENT

Daisy Louie

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spay

AGE

8

WEIGHT

2.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Sanctuary VC

REFERRING VET

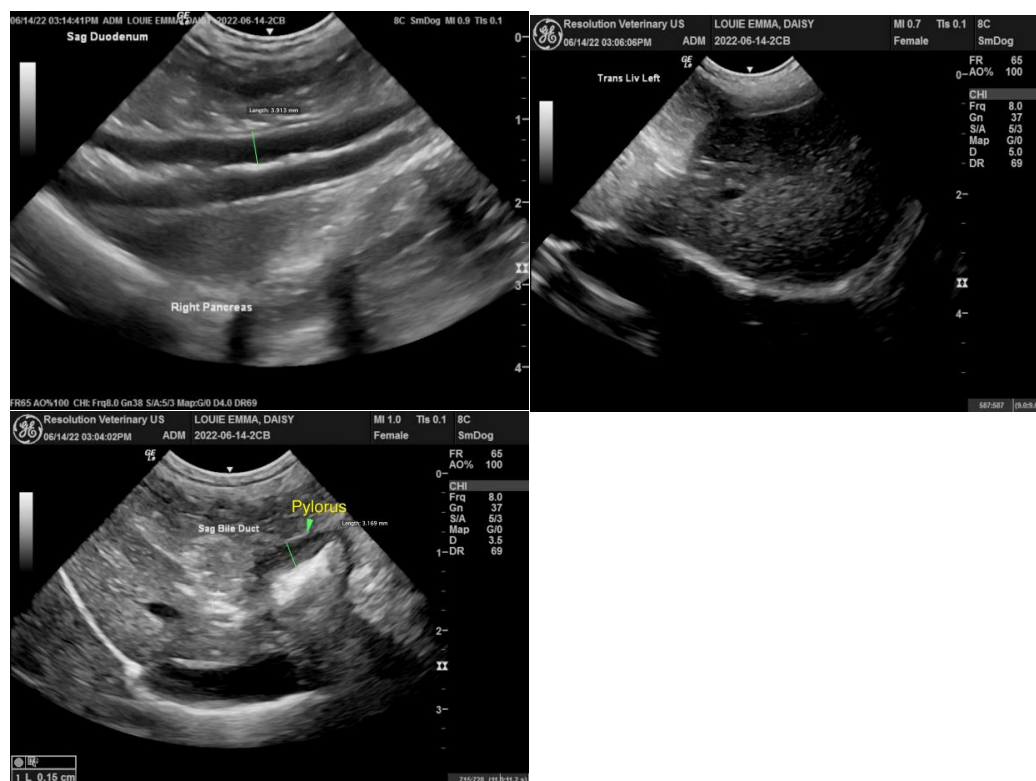
Dr. Warnakulasooriya

INVOICE

14088

DATE

6/14/22



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