

PATIENT 06/14/2022

Prince Ramjit

DENTAL CALCULUS SKIN ALLERGY

Abnormal PE/Chem/CBC/UA Results: CHEM. -ELEVATED ALT, CREATININE LEPTOSPIROSIS -

SPECIES

NEG SDMA-11 UA- PENDING

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Urinary System

Yorkie

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.

SEX

Male/Neutered

No overt pathology in the area of the residual prostate.

AGE

10

The area of the aortic trifurcation was free of pathology.

WEIGHT

12

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Pinpoint areas of medullary mineral were present in both kidneys. The right kidney contained a thinly walled cyst with anechoic fluid measuring 1.5 cm in diameter. No evidence of pelvic dilation was present. The left kidney measured 4.3 cm in length. The right kidney measured 4.4 cm in length.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was indistinctly visualized yet without overt pathology subjectively measuring 0.5 cm at the caudal pole. A possible mass exhibiting potential for parenchymal mineralization in the area of the right adrenal gland was present, measuring 2.3 cm x 2.0 cm.

IMAGING PERFORMED BY

Dr. Sharkaway

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, small echogenic nodules were present throughout the medial parenchyma adjacent to the hilus. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

HOSPITAL NAME

Kew Gardens AH

REFERRING VET

Dr. Sharkaway

Liver/ Gallbladder

The liver was subjectively enlarged in size with areas of mild capsule asymmetry. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.

INVOICE

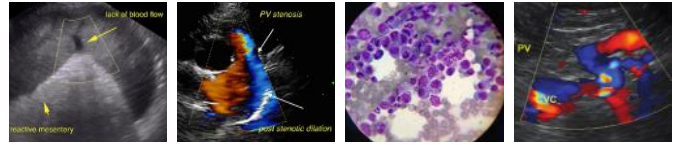
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Gastrointestinal

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.



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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.

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

SPECIES

Canine

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

BREED

Yorkie

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

SEX

Male/Neutered

ULTRASONOGRAPHIC FINDINGS

AGE

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- Bilateral nonspecific chronic renal changes with right kidney cyst
- Suspect possible right adrenal mass
- Hepatopathy exhibiting generalized nonuniform to remodeled parenchyma
- Benign splenic nodules-consistent with benign myelolipomas

WEIGHT

12

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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(Canine and Feline)

Overall the liver findings were nonspecific yet is consistent with chronic and likely benign hepatopathy considerations including chronic inflammatory parenchymal disease i.e. hepatitis/cholangiohepatitis given the ALT elevation, reactive hepatopathy, immune mediate disease or other hepatopathy. No overt evidence of hepatic neoplastic or metastatic criteria was observed. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

IMAGING PERFORMED BY

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Although not definitive, a potential lesion in the area of the right adrenal gland exhibiting possible parenchymal mineralization was present however this lesion was ill visualized and adrenal origin or definitive confirmation cannot be confirmed. Sonographic reassessment in the area of the right adrenal gland along with potential full adrenal workup if clinical signs consistent with adrenal hyperfunctionality are present is recommended. Screening BP to assess for evidence of hypertension which may allude to the presence of adrenal neoplasia is warranted.

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Correlation with pending UA is warranted. Additional renal staging to include a baseline UPC and C/S on a sterile urine sample is suggested.

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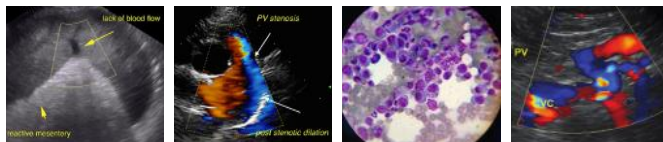
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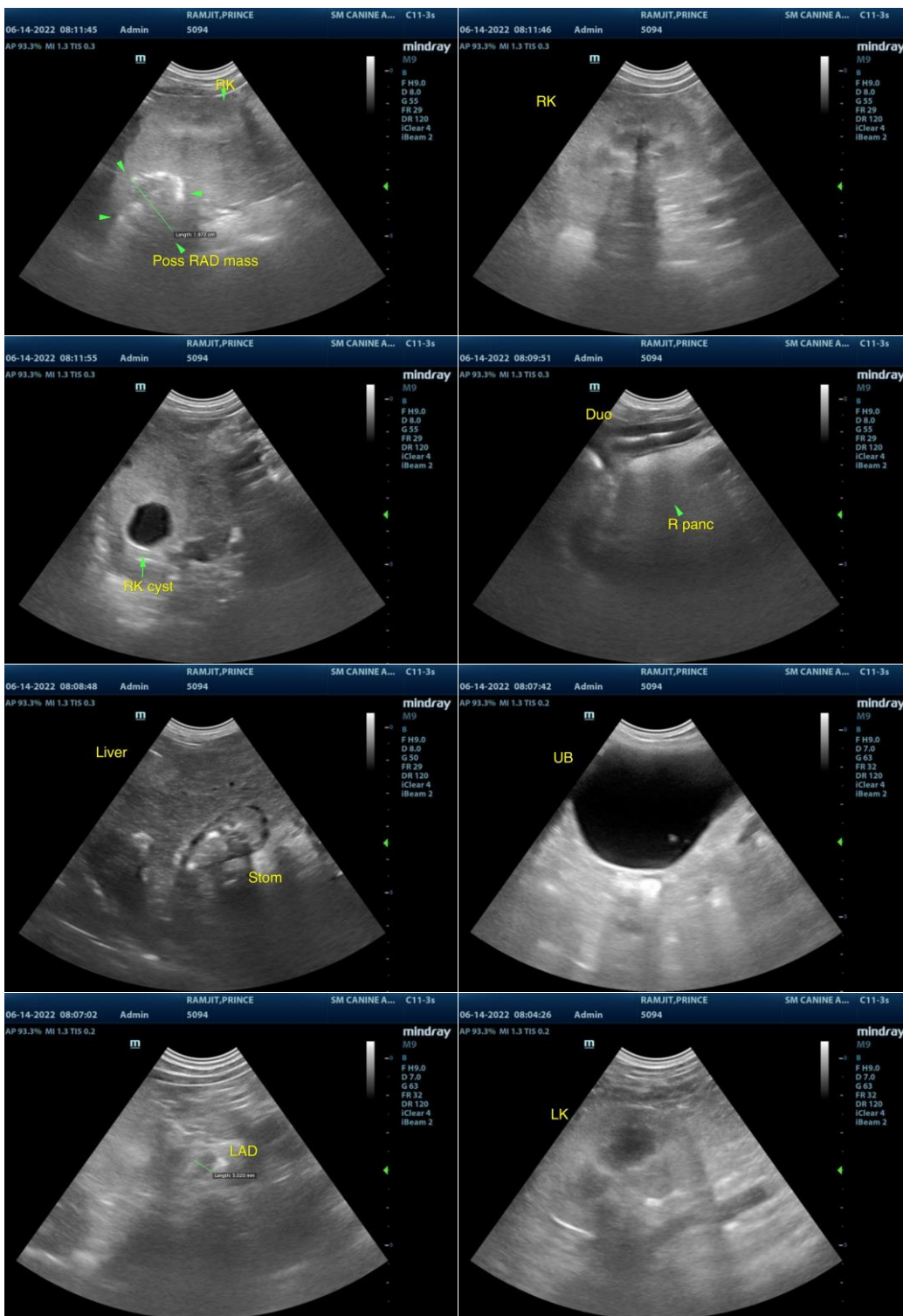
Dr. Sharkaway

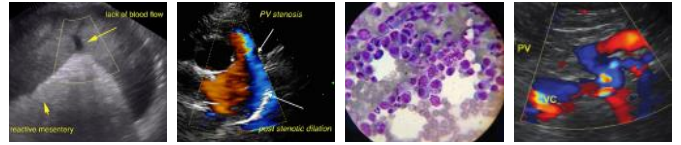
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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