



PATIENT

Jackson Parker

PRESENTING CLINICAL SIGNS

PP for collapsing today at home, unable to walk and no interest in food over the last 2 days

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 were noted.

BREED

Labrador

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 6.5 cm in length. The right kidney measured 6.0 cm in length.

SEX

MN

AGE

12yr

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

Adrenal Glands

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

WEIGHT

89lb

Spleen

The spleen exhibited potential mild enlargement with areas of capsule asymmetry and generalized heterogenous parenchyma. No visualized masses. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

INTERPRETED BY

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

Liver/Gallbladder

The liver presented mildly enlarged in size. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild to moderate coarse echotexture. Increased yet indistinct portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. The gallbladder was non-distended in size with primarily anechoic luminal content and mild to moderate non-organized hyperechoic sediment.

IMAGING PERFORMED BY

Dr. Arias

HOSPITAL NAME

Animal Emergency
Hospital Deland

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.

REFERRING VET

Dr. Arias

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.

INVOICE

14183ag

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

Pancreas

DATE

06/22/2023



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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.

SPECIES

Canine

Free Abdomen

Perisplenic to perihepatic hyperechoic omentum and mild volume perisplenic effusion was present.

BREED

Labrador

ULTRASONOGRAPHIC FINDINGS

- Acute hepatopathy.
- Gallbladder debris (non-mucocele).
- Mildly enlarged heterogenous to irregular spleen.
- Perihepatic/perisplenic hyperechoic omentum and mild volume effusion.

SEX

MN

Secondary findings

- Age related renal changes.

AGE

12yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the liver may include acute hepatitis (viral, bacterial, leptospirosis, toxin), given the ALT elevation with occult hepatic neoplasia possible. Splenic hyperplasia, hematopoiesis, splenitis or infiltrative neoplasia are all potentials.

WEIGHT

89lb

Assuming normal clotting status and using a 25g needle, a hepatosplenic FNA for screening cytology is warranted for further assessment. A leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area. Effusion analysis cytology +/- C/S could also be considered.

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Empirical therapy may include hospitalization with IVF, hepatosupportive medications, gastroprotectants +/- antibiotic protocol to cover for non-specific acute hepatitis +/- leptospirosis. Guarded prognosis pending recommended hepatosplenic sampling which is considered essential for further assessment.

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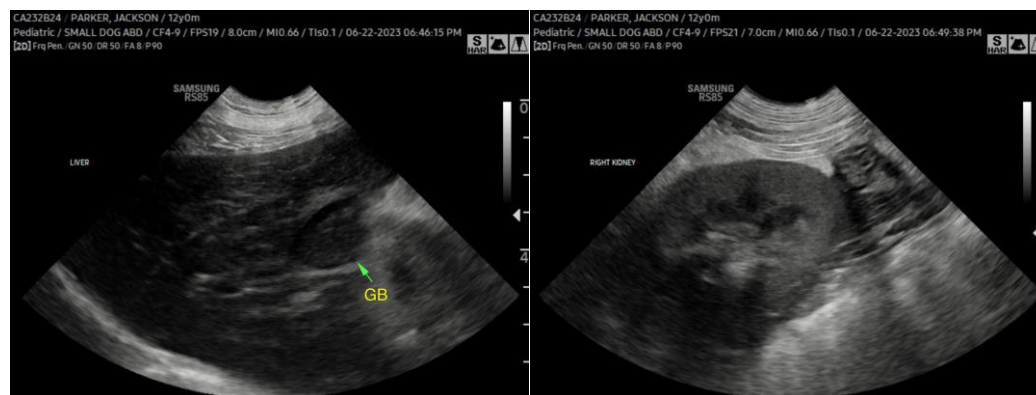
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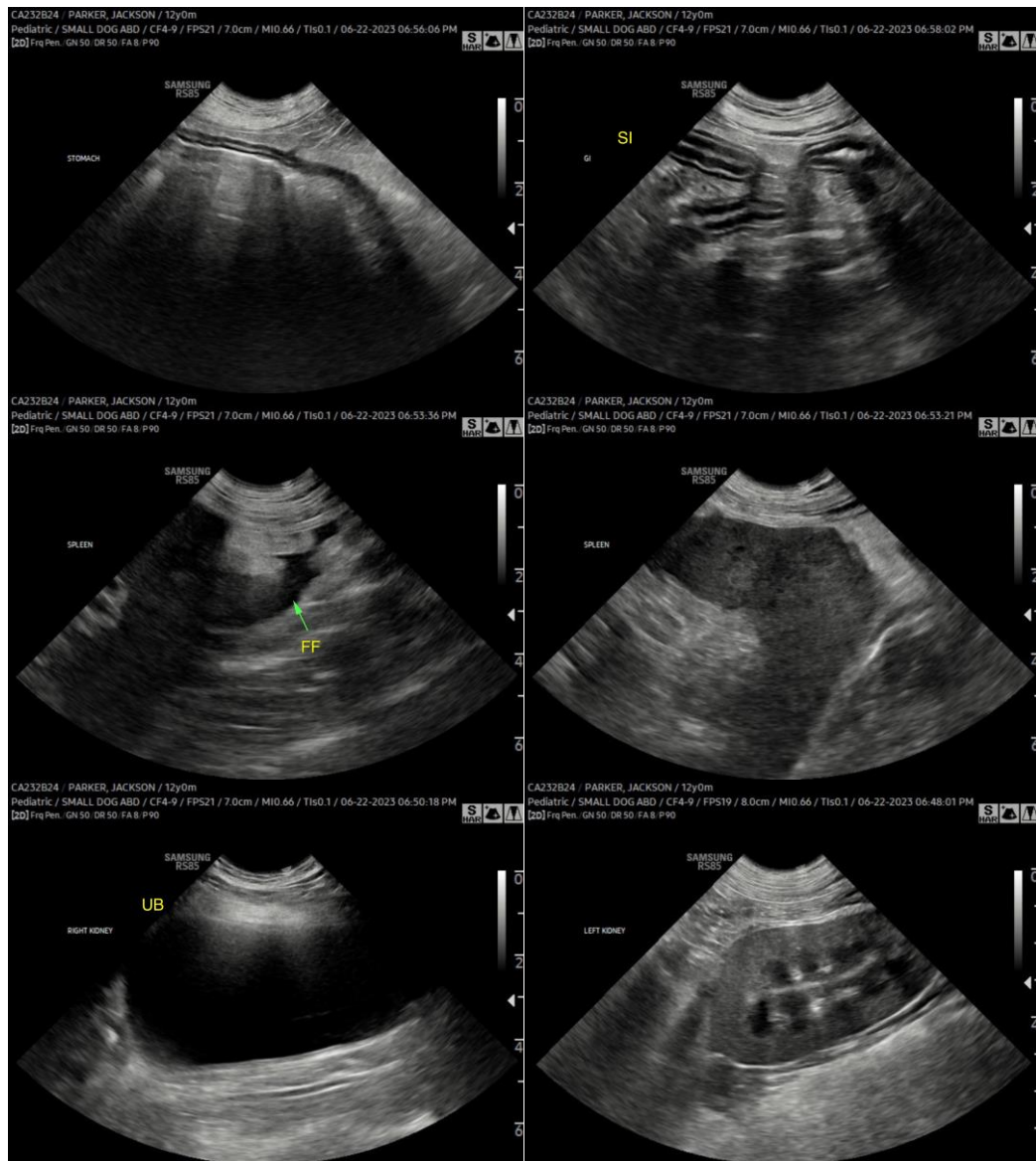
Dr. Arias

INVOICE

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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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