



PATIENT	PRESENTING CLINICAL SIGNS
Remy Romo	History or fever of unknown origin for last 2 weeks since dental procedure performed
SPECIES	Abnormal PE/Chem/CBC/UA Results: Stress neutrophilia moderate elevation of ALPK
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Shepherd Mix	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.
SEX	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 6.2 cm in length. The right kidney measured 6.3 cm in length.
M	
AGE	The area of the aortic trifurcation was free of pathology.
NA	The area of the prostate appeared normal and free of pathology.
WEIGHT	Adrenal Glands
22	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 cm width at the caudal pole and 0.42 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 0.67 cm width at the caudal pole and 0.72 cm width at the cranial pole.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Liver/Gallbladder
Dr Belan	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. Normal hepatic vascular volume was present. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild to moderate inspissated non-organized sediment in the caudal lumen and gallbladder neck. Subtly prominent to hyperechoic gallbladder wall was present. Proximal to mid common bile duct dilation was present with subtle evidence of surrounding hyperechoic omentum. No pericholecystic free fluid.
HOSPITAL NAME	Gastrointestinal
Fish Creek Veterinary Hosp	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	DATE
Dr. Smith	06/22/2023
INVOICE	
14181ag	



PATIENT

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

Remy Romo

Pancreas

SPECIES

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

Canine

Free Abdomen

BREED

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

Shepherd Mix

ULTRASONOGRAPHIC FINDINGS

SEX

- Suspect mild cholangitis with gallbladder sediment (non-mucocele)
- Vacuolar hepatopathy pattern.
- Heterogenous pancreas-possible low grade or resolving pancreatitis.

M

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

No evidence of intra-abdominal neoplastic criteria or post hepatic obstruction. Empirical therapy for cholangitis including antibiotic therapy given fever and hepatosupportive medications including Ursodiol if tolerated is recommended.

NA

Assessment for evidence of cranial abdominal/subxiphoid discomfort on palpation and for abnormal spec cPL which may allude to low grade pancreatitis is recommended.

WEIGHT

22

Sonographic reassessment of the gallbladder and pancreas recommended if evidence of progressive clinical signs/fever despite empirical therapy.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Belan

HOSPITAL NAME

Fish Creek Veterinary
Hosp

REFERRING VET

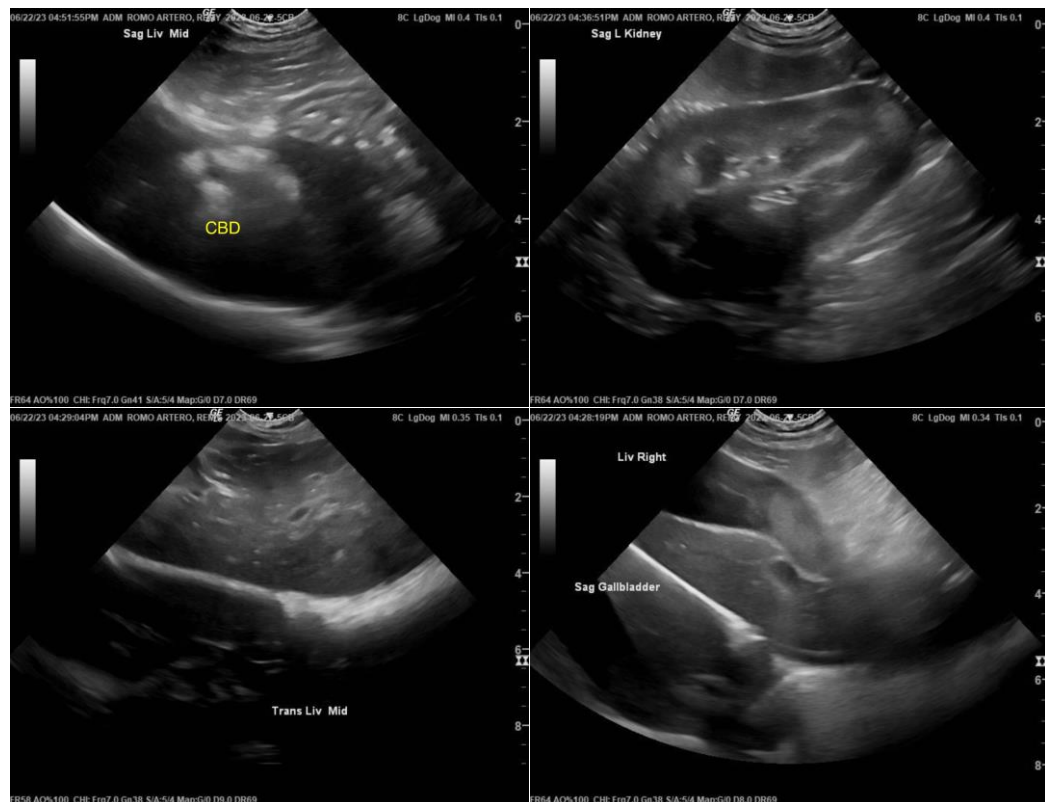
Dr. Smith

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DATE

06/22/2023





PATIENT

Remy Romo

SPECIES

Canine

BREED

Shepherd Mix

SEX

M

AGE

NA

WEIGHT

22

INTERPRETED BY

R. McKenzie Daniel,
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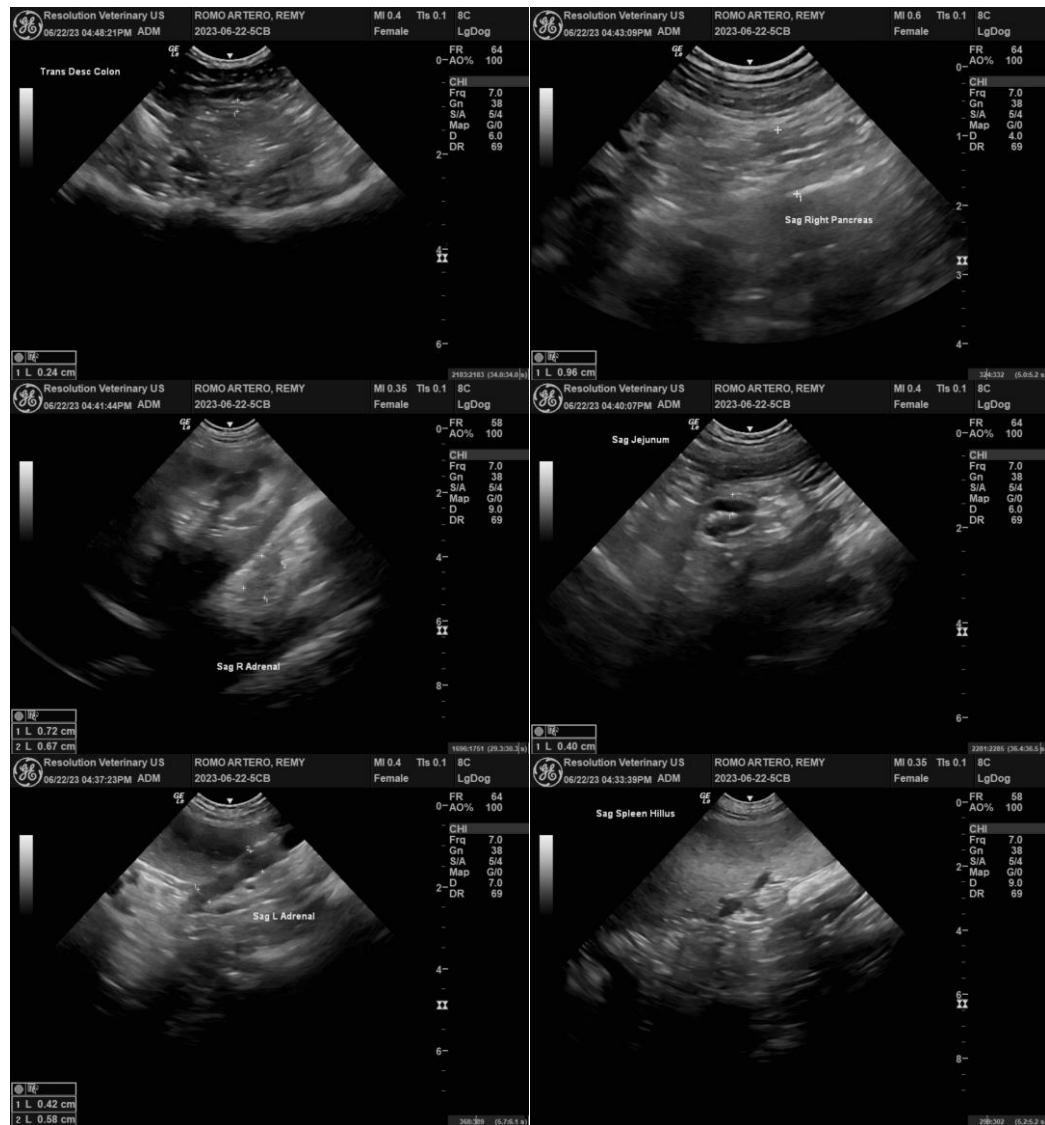
Dr. Smith

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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)
info@sonopath.com