



PATIENT PRESENTING CLINICAL SIGNS

Sammy Dunlap Presented to ER 6/18 for decreased appetite and lethargy Current Medications Just started liver support, entyce, cerenia, amoxi Primary Question/Differential to Be Answered in This Exam Want to assess liver/gb and all internal organs

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: rbc-9.26 h hemoglobin21.4 h wbc- 21.17 h neu-16.07 h mono-2.04 h BUN-6 I Sodium-143 I Glob-4.7 h alt-582 h alp2000h ggt 18h bili total-3.6 h chol-386 h

BREED

Pug

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

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.

MN

AGE

11yr

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 4.0 cm in length. The right kidney measured 3.9 cm in length.

WEIGHT

15lb

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

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

Adrenal Glands

IMAGING PERFORMED BY

Jenna Walsh CVT

The bilateral adrenal glands were borderline prominent in size based on caudal pole measurement and body weight with normal contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.55 cm width at the caudal pole and 1.5 cm length. The right adrenal gland measured 0.55 cm width at the caudal pole and 1.3 cm length.

Spleen

HOSPITAL NAME

Pawsitive Wellness
Veterinary care

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.

REFERRING VET

Dr. Hardy

Liver/Gallbladder

INVOICE

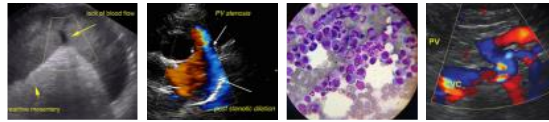
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The liver exhibited subjective mild enlargement with symmetrical rounded capsule contour and normal to mildly decreased parenchymal echogenicity. Uniform mildly coarse echotexture was present. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion.

DATE

06/22/2023

The gallbladder was mildly distended in size with thickened walls. The lumen was filled with congealed variably hyperechoic mildly organized debris and mucus. Peripheral gallbladder hyperechoic omentum



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was present extending into the cranial abdomen. Scant perihepatic free fluid was present in the right cranial abdomen around the caudate liver lobe. The cystic and common bile ducts were normal.

Gastrointestinal

SPECIES

Canine

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained minor retained anechoic fluid 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.

SEX

MN

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.

AGE

11yr

Free Abdomen

No omental masses or overt lymphadenopathy was present.

WEIGHT

15lb

Scant perihepatic free fluid was present in the right cranial abdomen around the caudate liver lobe.

ULTRASONOGRAPHIC FINDINGS

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(Canine and Feline)

- Hepatopathy-acute or acute on chronic.
- Inflamed gallbladder mucocele with pericholecystic inflammation.
- Scant perihepatic free fluid.
- Mild gastritis and potential concurrent low grade pancreatitis.
- Mild chronic renal changes.
- Borderline prominent bilateral adrenal glands- nonspecific.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cholecystectomy with hepatic biopsies assuming normal clotting status and with aggressive broad spectrum perioperative antibiotics is recommended. Strong concern for emerging bile peritonitis.

HOSPITAL NAME

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Veterinary care

This case may be considered of surgical urgency given the time frame of clinical signs, gallbladder presentation and strong concern for emerging bile peritonitis.

Assessment of T4 levels and if clinically indicated, adrenal work up may be considered.

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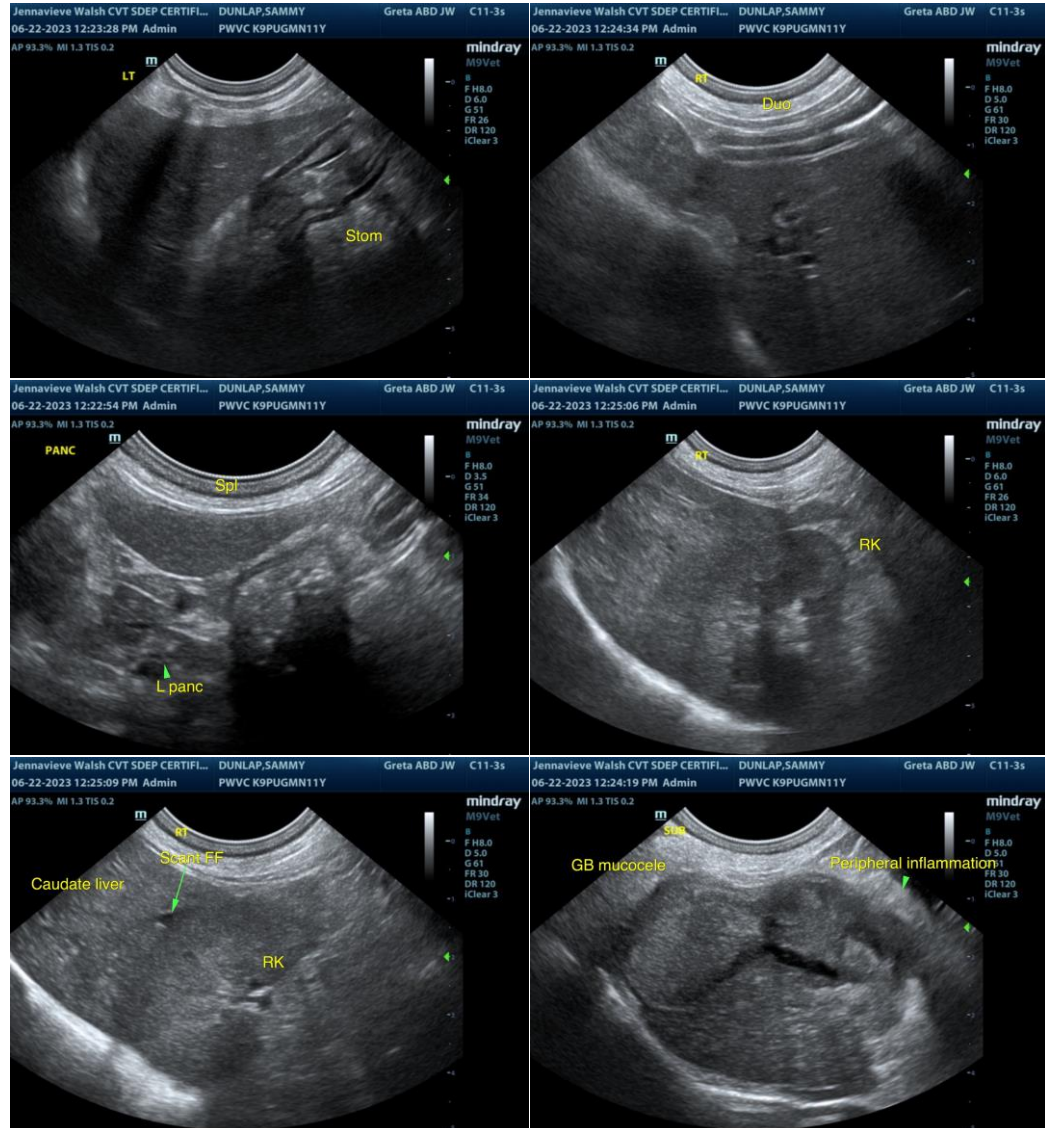
Dr. Hardy

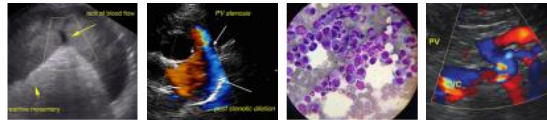
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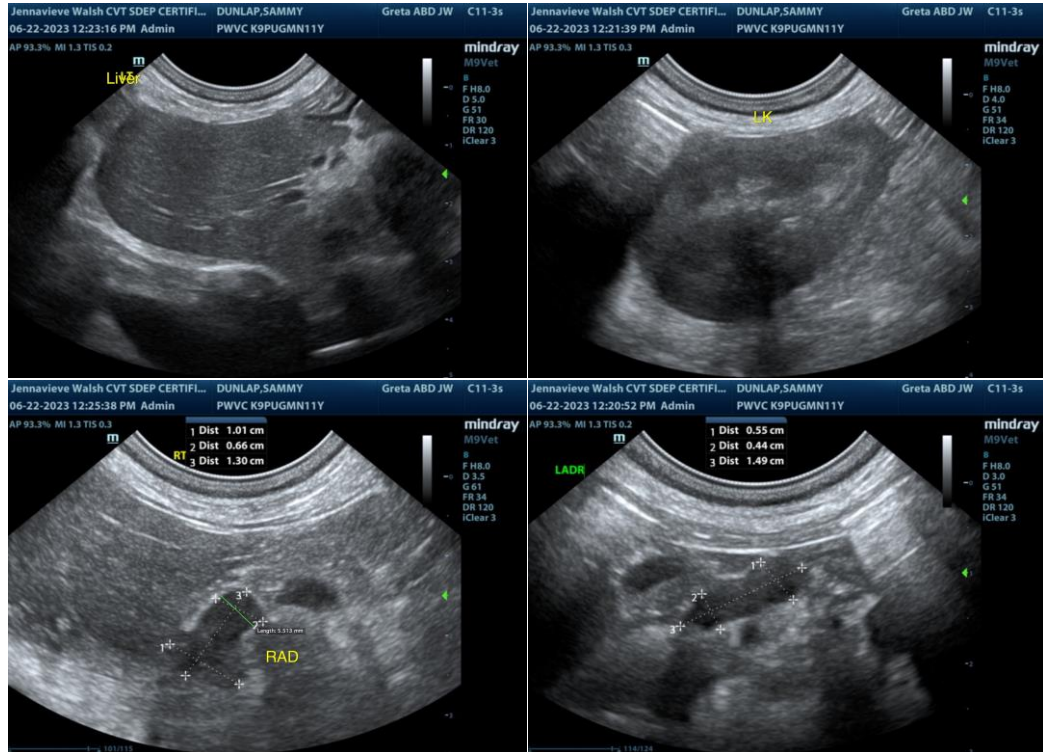
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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