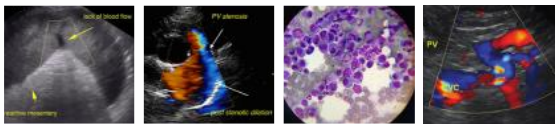


PATIENT
Sadie Brandy McKenna

SPECIES
Canine

BREED
Beagle

SEX
FS

AGE
-

WEIGHT
35 lbs.

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

IMAGING PERFORMED BY
Jenna Walsh, CVT

HOSPITAL NAME
The Veterinary Hospital

REFERRING VET
Dr. Johnson

INVOICE
14008

DATE
6/3/22

PRESENTING CLINICAL SIGNS

Wellness care 5/24 identified persistently elevated Alk Phos - patient is PU/PD and always very hungry , previous adrenal function (1/2020) test was negative for Cushings Atopy controlled well with Cytopoint Current Medications Cytopoint, Simparica TRIo
Abnormal PE/Chem/CBC/UA Results: CBC - very slight neutropenia Chem - elevated Alk Phos (775, was 672 in Oct 2021) chol (378) Triglycerides (>500) amylase (2200) Lipase (362) SDMA - 12 T4 - 1.3 UA - WNL HWT & Tick profile - All Neg

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 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 6.1 cm in length. The right kidney measured 6.6 cm in length.

Adrenal Glands

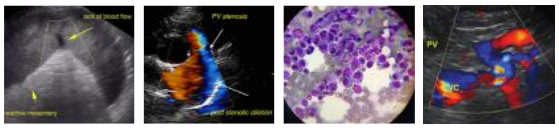
The bilateral adrenal glands exhibited subjective mild prominent size, yet without overt evidence of significant hyperplasia or overt neoplastic criteria. The bilateral adrenal glands exhibited nonhomogeneous to focal hyperechoic parenchyma with no evidence of mineralization. The left adrenal gland measured 1.9 cm x 0.49 cm width in the caudal pole. The right adrenal gland measured 1.9 cm x 0.64 cm width in the caudal pole.

Spleen

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 spleen exhibited indistinct hyperechoic medial parenchyma adjacent to the hilus, which may indicate emerging or mild coalescing myelolipomas or capsular fibrosis. This is incidental. 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.

Liver/ Gallbladder

The liver presented moderately enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in



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margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with minor gallbladder debris. The gallbladder was otherwise normal. No evidence of gallbladder or peripheral gallbladder inflammation was noted. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. No signs of ileus, obstruction, or foreign material were noted. Minor retained echogenic fluid was noted in the stomach.

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.

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Vacuolar hepatopathy pattern - subjectively benign
- Minor gallbladder debris - non-mucocele (incidental)
- Heterogeneous pancreas - suspect age-related pancreatic changes and incidental, minor potential for low-grade to chronic pancreatitis
- Subjective mildly prominent nonhomogeneous bilateral adrenal glands - no evidence of adrenal neoplastic criteria
- Mild chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient's current clinical signs, recheck adrenal test with LDDST is warranted. If Cushing's Syndrome Is ruled-out, further assessment may include urine culture and sensitivity and baseline UPC on a sterile urine sample for further renal staging, Leptospirosis titer/PCR if endemic to the area and potential exposure, and hepatic FNA for screening cytology assuming normal clotting status. Fasting triglyceride and cholesterol levels could also be considered if clinically indicated. Hepatosupportive medications may prove beneficial.

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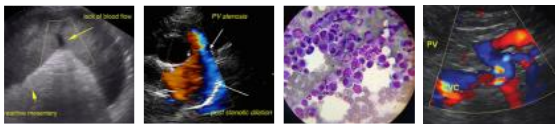

ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

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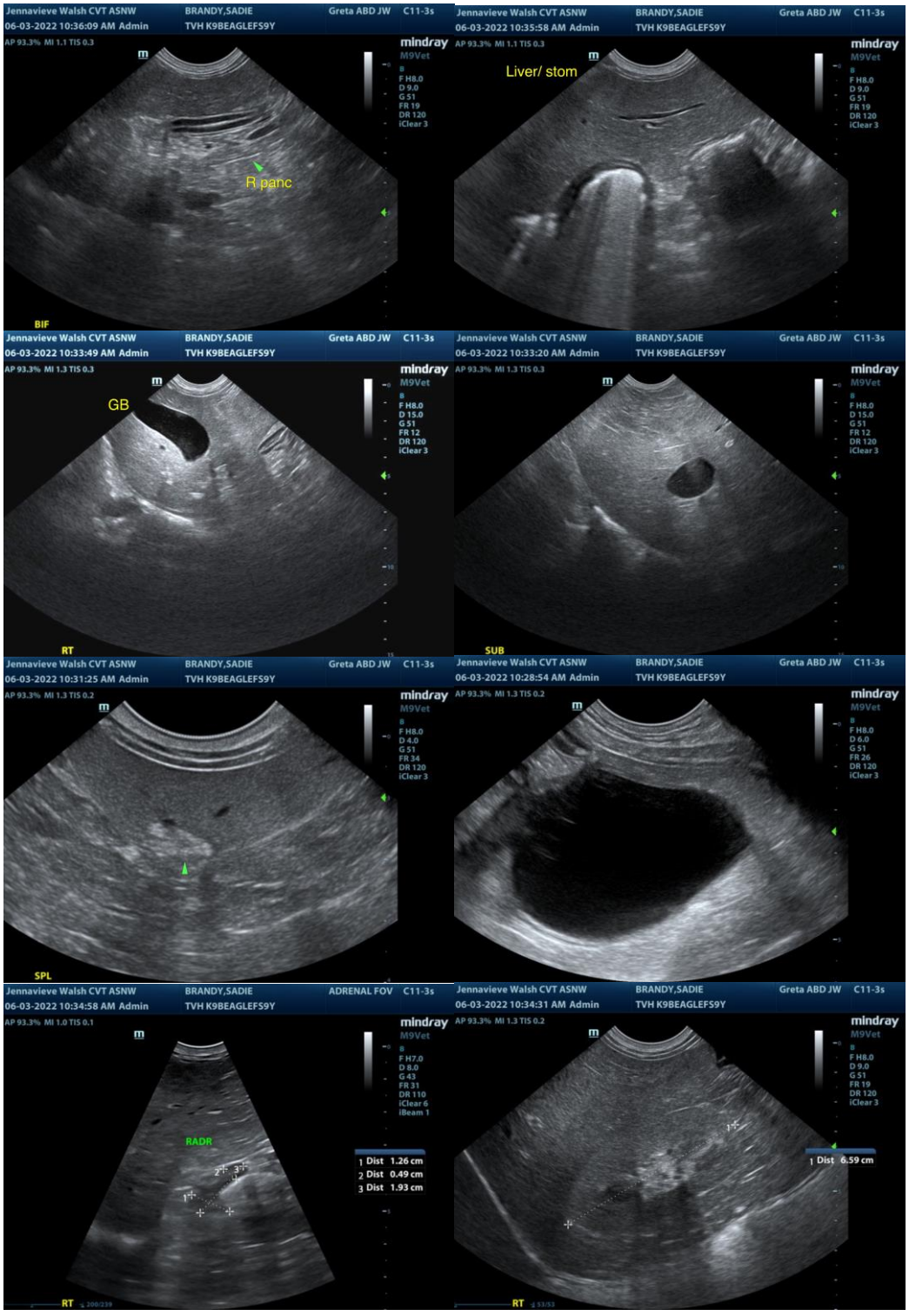

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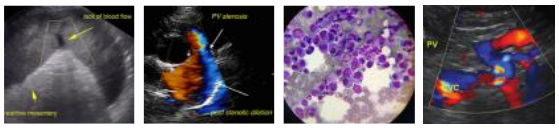

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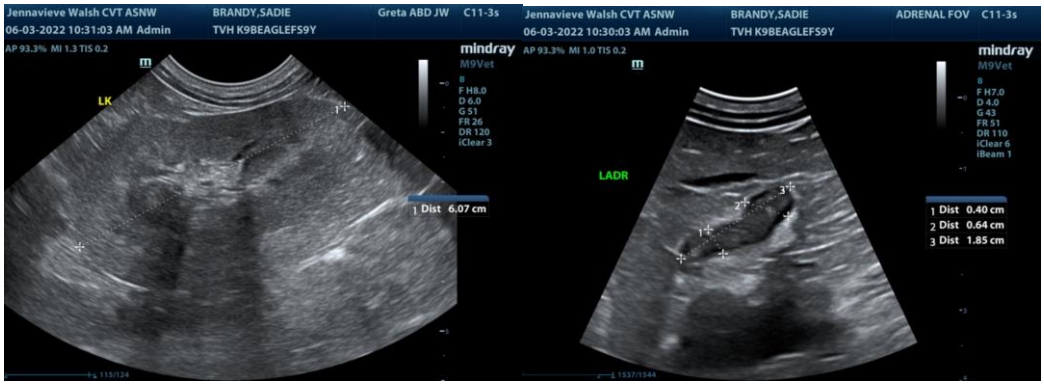

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com