



**PATIENT PRESENTING CLINICAL SIGNS**

Tarzan Paul History: PU/PD, inappropriate urination, polyphagia

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

MN

**AGE**

2016

**WEIGHT**

23

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Lehigh Valley Animal  
Hospital Bath

**REFERRING VET**

Dr. Tan

**INVOICE**

11102ag

**DATE**  
07/11/2022

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4 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.

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 4.3 cm in length. The right kidney measured 4.7 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate was free of pathology measuring 0.89 cm in diameter.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm width at the caudal pole and 1.5 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.36 cm width at the caudal pole and 2.3 cm length.

**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 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.

**Liver**

The liver presented mildly 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 margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and minor particulate debris. The cystic and common bile ducts were normal.

**Gastrointestinal**

The stomach presented intact yet mildly prominent wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

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.



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

Tarzan Paul

**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.

**SPECIES**

Canine

**Free Abdomen**

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

Poodle Mix

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

MN

**AGE**

2016

**WEIGHT**

23

- Sonographically unremarkable urinary bladder and residual prostate
- Normal bilateral kidneys
- Normal bilateral adrenal glands-no evidence of adrenal pathology or enlargement
- Mild vacuolar hepatopathy pattern
- Mildly prominent gastric walls-likely incidental or patient variant
- Minor heterogeneous pancreas-likely minor pancreatic remodeling, incidental

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overall no overt evidence of significant visceral pathology. The bilateral adrenal glands were not consistent with pituitary dependent Cushing's syndrome and were without evidence of adrenal tumors. Correlation with pending ACTH stim is recommended.

Further assessment of the PU/PD may include a urine C/S +/-baseline UPC and leptospirosis if endemic to the area as well as a GI panel to include PLI/TLI/Cobalamin/Folate is recommended.

**INTERPRETED BY**

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

Hepatosupportive medications including Denamarin +/- Ursodiol could be considered.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Lehigh Valley Animal  
Hospital Bath

**REFERRING VET**

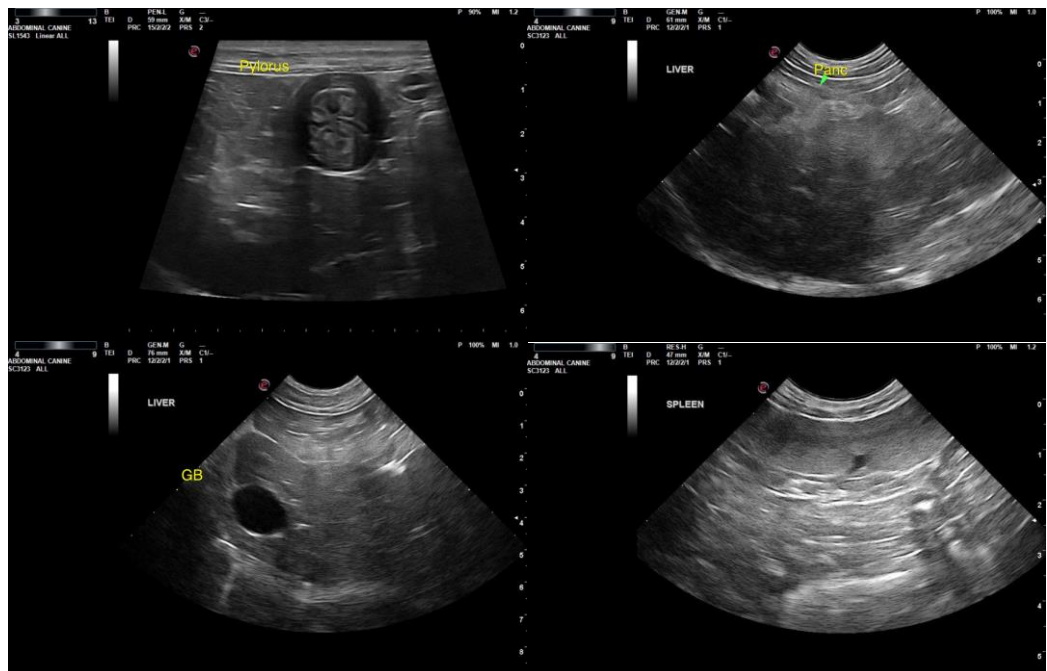
Dr. Tan

**INVOICE**

11102ag

**DATE**

07/11/2022





**PATIENT**

Tarzan Paul

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

MN

**AGE**

2016

**WEIGHT**

23

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Lehigh Valley Animal  
Hospital Bath

**REFERRING VET**

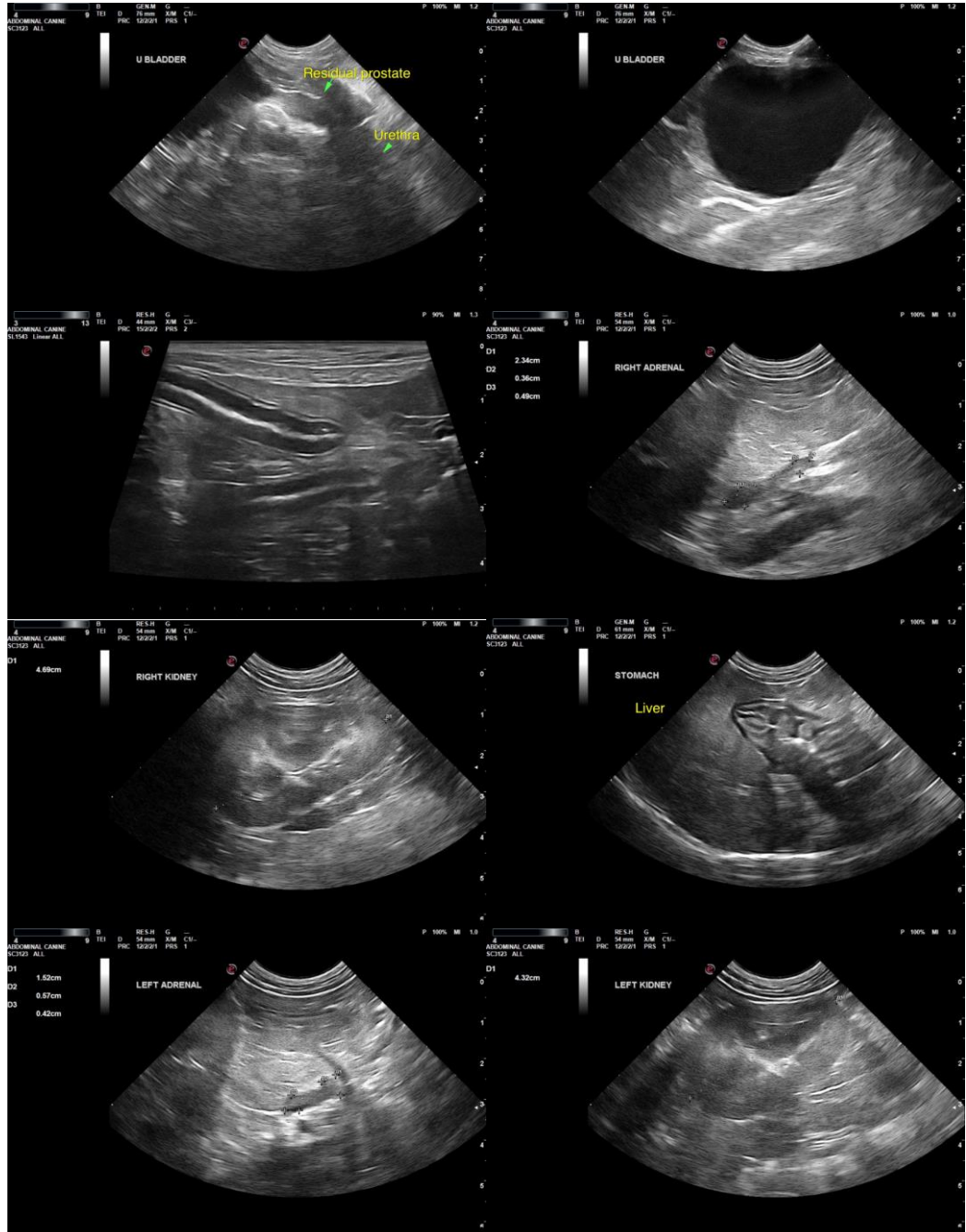
Dr. Tan

**INVOICE**

11102ag

**DATE**

07/11/2022



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)  
[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)



**PATIENT**

Tarzan Paul

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

MN

**AGE**

2016

**WEIGHT**

23

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Lehigh Valley Animal  
Hospital Bath

**REFERRING VET**

Dr. Tan

**INVOICE**

11102ag

**DATE**

07/11/2022