



PATIENT PRESENTING CLINICAL SIGNS

Baya Newton Polyphagia, 'huffing' breathing pattern, 1/6 systolic murmur, sire had DCM.
 ALP 730

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED 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.

SEX The area of the aortic trifurcation was free of pathology.

FS 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 minor loss of corticomedullary border demarcation. No evidence of pelvic dilation was present. The left kidney measured 7.2 cm in length. The right kidney measured 6.8 cm in length.

AGE Adrenal Glands

2013 The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.0 cm length x 0.65 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.9 cm length x 0.65 cm width at the caudal pole.

WEIGHT Spleen

80.9 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.

INTERPRETED BY Liver/ Gallbladder

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) The liver exhibited subjective borderline to possible mild enlargement. 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. The cystic and common bile ducts were normal.

HOSPITAL NAME Gastrointestinal

Alburtis AH 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. Smith

INVOICE

17277

DATE

7/18/23



PATIENT

Baya Newton

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.

SPECIES

Canine

Pancreas

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 were evident.

BREED

Weimaraner

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

2013

- Minor age-related renal changes
- Benign hepatopathy
- Sonographically unremarkable gastrointestinal tract

WEIGHT

80.9

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no sonographic evidence of significant visceral pathology was noted. There was no evidence of structural hepatic pathology with the liver appearance suggestive of a vacuolar hepatopathy pattern.

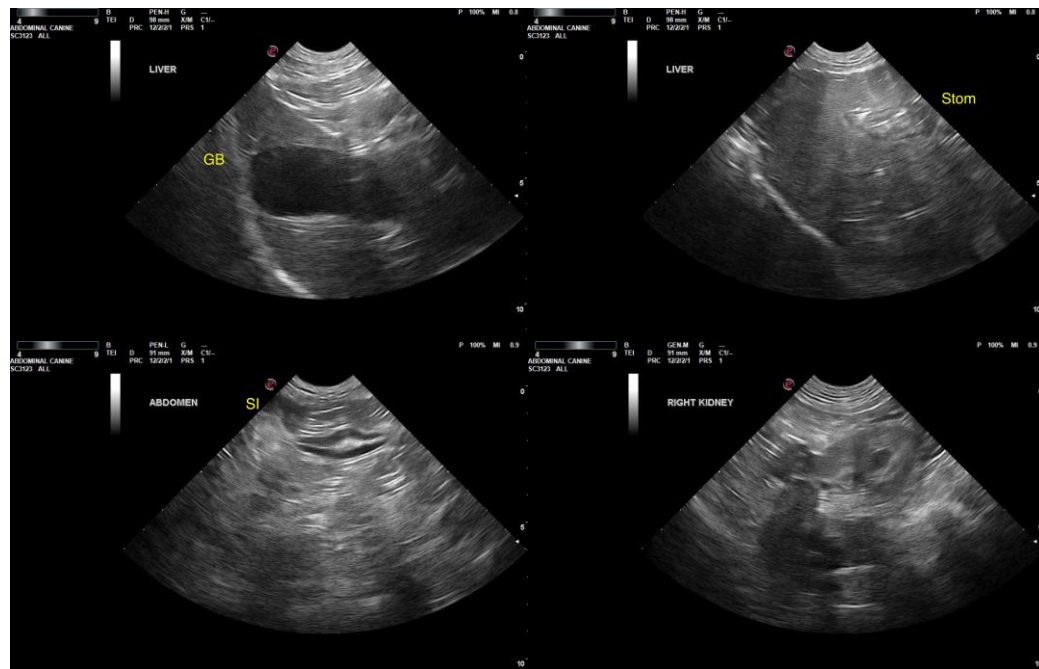
INTERPRETED BY

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

A definitive cause of the reported polyphagia was not evident. If persistent polyphagia or if gastrointestinal signs or weight loss develop, a GI panel to include PLI/TLI/Cobalamin/Folate could be considered. Hepatosupportive medications including Denamarin may prove beneficial.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT



HOSPITAL NAME

Alburtis AH

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SPECIES

Canine

BREED

Weimaraner

SEX

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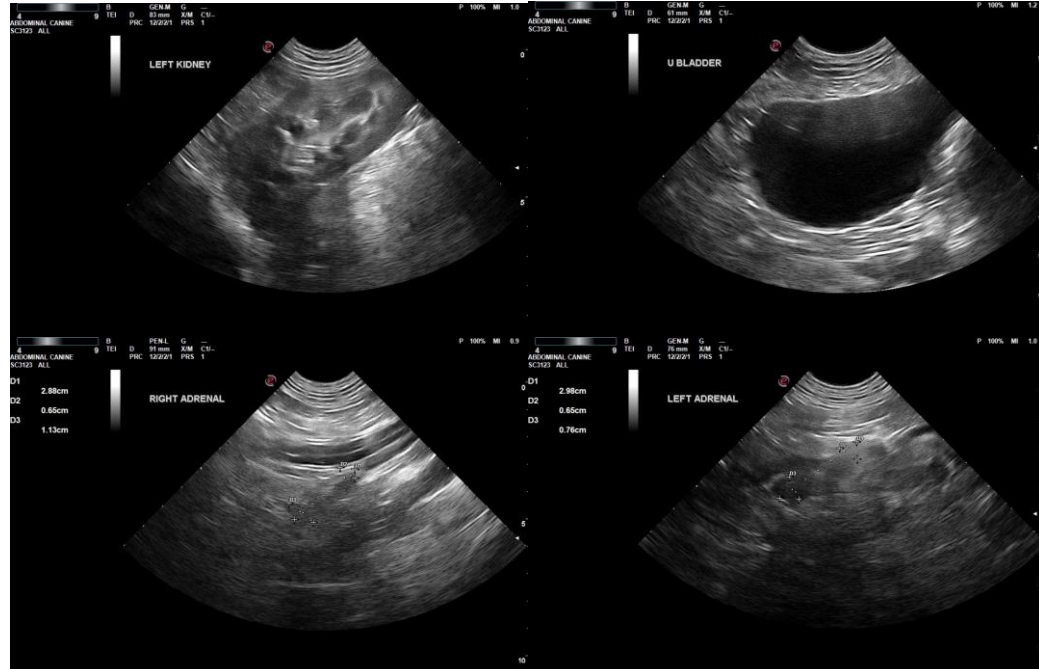
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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