



PATIENT PRESENTING CLINICAL SIGNS

Maisy Down Chronic Diarrhea ,Lethargic , walking with 2 supporting slings, moderate abdominal discomfort. Meds: MTZ, Sulcrate , Fortiflora

SPECIES Abnormal PE/Chem/CBC/UA Results: Anemia non-reg , moderate Azotemia &elevated Amylase , CPLI: abnormal, T4 : WNL. Rads unremarkable other than arthritis.

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Golden Retriever

Urinary System

SEX 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.

FS

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

15 years Normal size and asymmetrical margination owing to multiple cortical Infarcts were present in the kidneys. Mild nonuniform cortex and moderate to marked loss of corticomedullary border demarcation with mild reduced medullary volume were present. The left kidney measured 5.9 cm in length. The right kidney measured 6.3 cm in length.

WEIGHT

72.2 lbs

Adrenal Glands

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.64 cm width at the caudal pole and 0.45 cm width at the cranial pole.

The right adrenal gland was indistinctly visualized yet overtly normal in size position and shape subjectively measuring 0.47 cm width at the caudal pole.

IMAGING PERFORMED BY

Crystal Hill

Spleen

HOSPITAL NAME

Lakeshore Woods AH

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

REFERRING VET

Dr. Masaud

Liver/ Gallbladder

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The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

DATE

7/21/22



PATIENT

Gastrointestinal

Maisy Down

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, variably echogenic yet nonshadowing ingesta/chyme most consistent with post prandial presentation without signs of ileus, obstruction or foreign material.

SPECIES

Canine

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.

BREED

Golden Retriever

The visualized colon wall layers were normal with apparent formed feces in lumen.

SEX

FS

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.

AGE

15 years

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

72.2 lbs

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Moderate to marked chronic degenerative kidneys with multiple cortical infarcts
- Overtly normal gastrointestinal tract / colon
- Minor age-related hepatosplenic changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely geriatric abdomen without evidence of significant visceral, specifically gastroenterocolic or pancreatic, pathology.

IMAGING

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Crystal Hill

Considerations, given the chronic diarrhea, may include dietary intolerance/food allergy, structurally insignificant inflammatory gastroenterocolic process or low-grade to chronic pancreatitis, both of which may present as sonographically normal. Fresh fecal analysis to rule out parasitic ova/giardia is suggested if not recently done. Assessment of cobalamin / folate levels is recommended.

HOSPITAL NAME

Lakeshore Woods AH

REFERRING VET

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In addition to current gastrointestinal support, hydrolyzed diet trial with potential for long dietary therapy and empirical deworming, even if fecal testing is negative, with Panacur 50 mg/kg PO BID for at least 3-5 days may prove beneficial.

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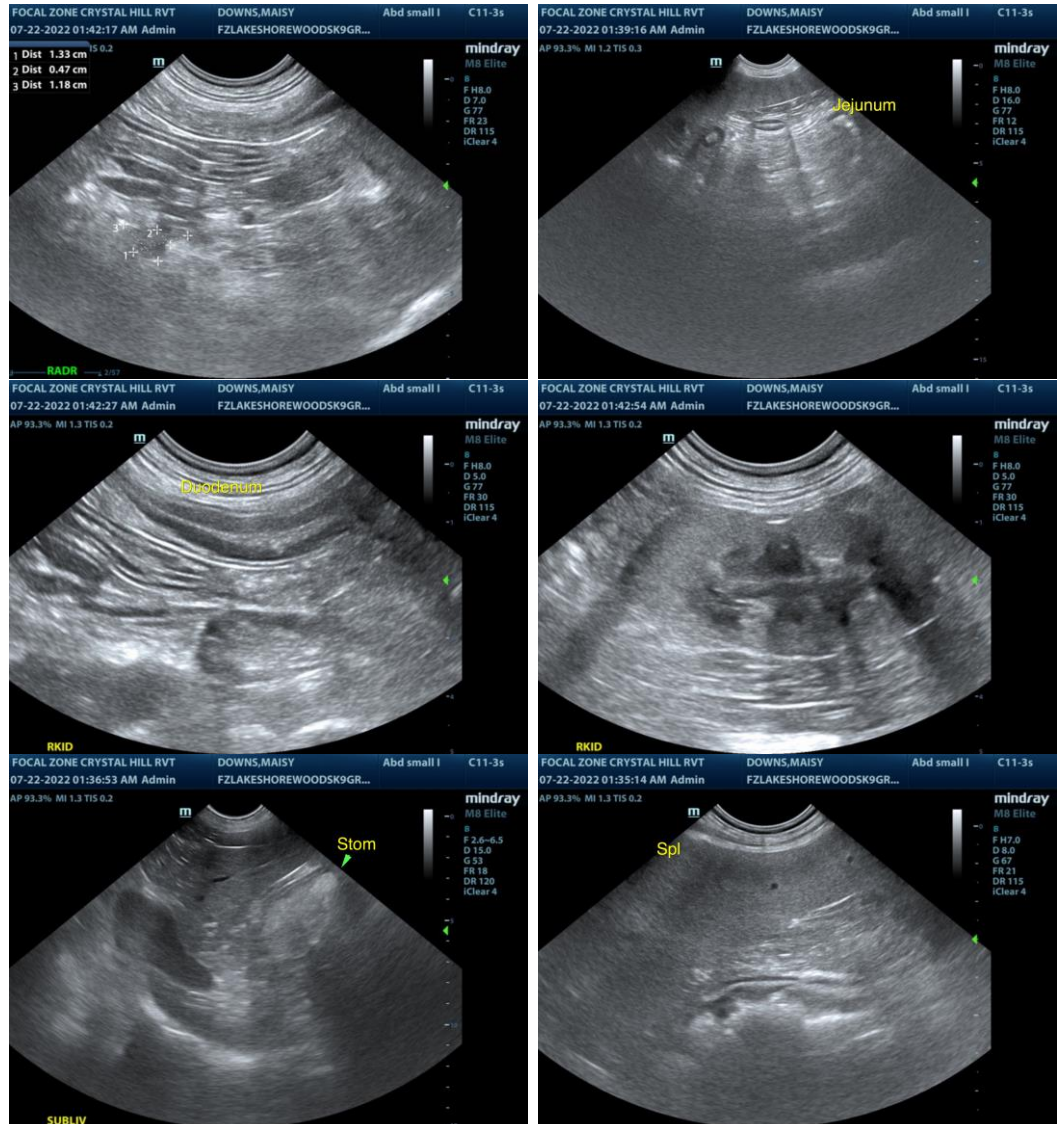
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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