



PATIENT	PRESENTING CLINICAL SIGNS
PopEye Fosdick	Puppy: PU/PD. Primary Question/Differential to Be Answered in This Exam R/O congenital/acquired/behavioral Evaluate kidney morphology
SPECIES	Abnormal PE/Chem/CBC/UA Results: Idexx Bloodwork CBC- wnl, nsf CHEM- SDMA 17, mild hyperglycemia rest wnl consistent with age UA- dark yellow, 1.069 pH 7.5, 2+ protein
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Aussie	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no sediment, or calculi. No overt evidence was noted of congenital abnormalities such as urachal remnant or ectopic ureter. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.
Male Intact	
AGE	The residual prostate was normal in appearance measuring 0.75 cm in diameter.
Not provided	The area of the aortic trifurcation was free of pathology.
WEIGHT	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. No evidence of congenital renal pathology or pyelectasia was noted. The left kidney measured 6.0 cm in length. The right kidney measured 6.1 cm in length.
22 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.3 cm length x 0.26 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 2.1 cm length x 0.27 cm width at the caudal pole.
IMAGING PERFORMED BY	Spleen
Jenna Walsh, CVT	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.
HOSPITAL NAME	Liver/ Gallbladder
Sutherland VH	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. Normal hepatic vascular volume was noted. The visualized portal vein was sonographically normal. No evidence of portosystemic vascular anomaly
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14344	
DATE	
7/21/22	



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Aussie

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22 lbs.

INTERPRETED BY

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(Canine and Feline)

IMAGING PERFORMED BY

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HOSPITAL NAME

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was noted. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

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.

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 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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

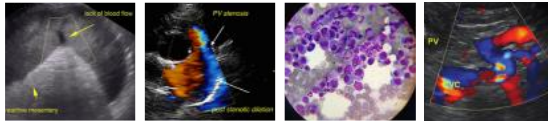
ULTRASONOGRAPHIC FINDINGS

- Sonographically normal urinary bladder and visible proximal urethra
- Sonographically normal bilateral kidneys
- Subjectively normal bilateral adrenal glands
- Normal liver exhibiting normal hepatic volume

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no evidence of upper or lower urinary tract, renal, adrenal, or hepatic pathology as a possible cause of the reported PU/PD. Urine C/S on sterile urine sample could be considered to rule out underlying infection, although no evidence of pyelonephritis or urinary bladder cellular debris was present.

Given that the reported urine specific gravity was adequate, measurement of water Intake could be considered for further clarification.



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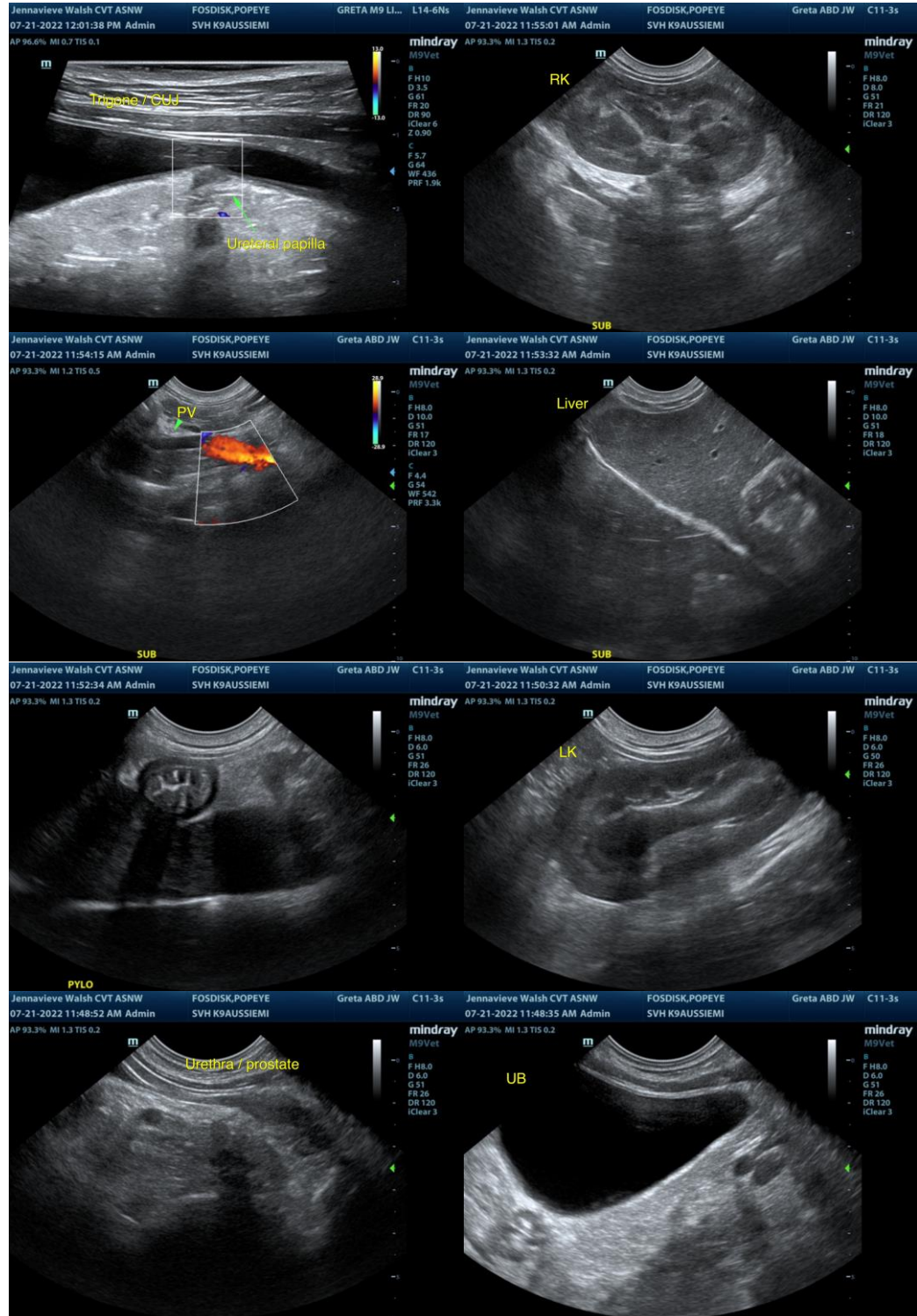
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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