



PATIENT PRESENTING CLINICAL SIGNS

Diesel Lesher PU/PD, panting, restless
 ALP 330, Albumin 4.2, Creatinine 2.0, Platelets 546

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Pitbull

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.

SEX

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The area of the residual prostate was free of pathology.

AGE

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The area of the aortic trifurcation was free of pathology.

WEIGHT

60

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. Bilateral pinpoint medullary mineral was noted. No evidence of pelvic dilation was present. The left kidney measured 6.6 cm in length. The right kidney measured 6.5 cm in length.

Adrenal Glands

INTERPRETED BY

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 2.4 cm length x 0.64 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 2.6 cm length x 0.64 cm width at the caudal pole.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

Spleen

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.

HOSPITAL NAME

Lehighton AH

REFERRING VET

Dr. Mriss

Liver/ Gallbladder

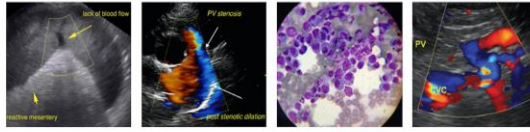
The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. Moderate, non-dependent yet nonorganized mildly hyperechoic gallbladder debris was present with the gallbladder otherwise normal. No evidence of peripheral gallbladder inflammation was noted. The common bile duct was normal.

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PATIENT

Diesel Leshner

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.

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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.

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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.

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Free Abdomen

AGE

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No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Vacuolar hepatopathy pattern - subjectively benign
- Moderate gallbladder debris (non mucocele)
- Mild age-related renal changes
- Normal bilateral adrenal glands
- Mild pancreatic remodeling

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, largely mild geriatric abdomen without evidence of significant visceral pathology.

IMAGING

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 ARDMS/RVT

Sonographically, the bilateral adrenal glands were not overtly consistent with Cushing's Syndrome. However, full adrenal work-up could be considered if clinically indicated or for a definitive rule-out.

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Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Leptospirosis titers / PCR could be considered if endemic to the area or potential exposure. Hepatosupportive medications including Denamarin and Ursodiol are recommended.

REFERRING VET

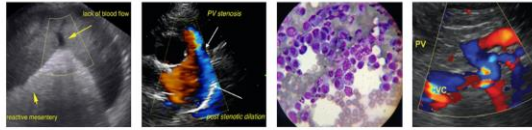
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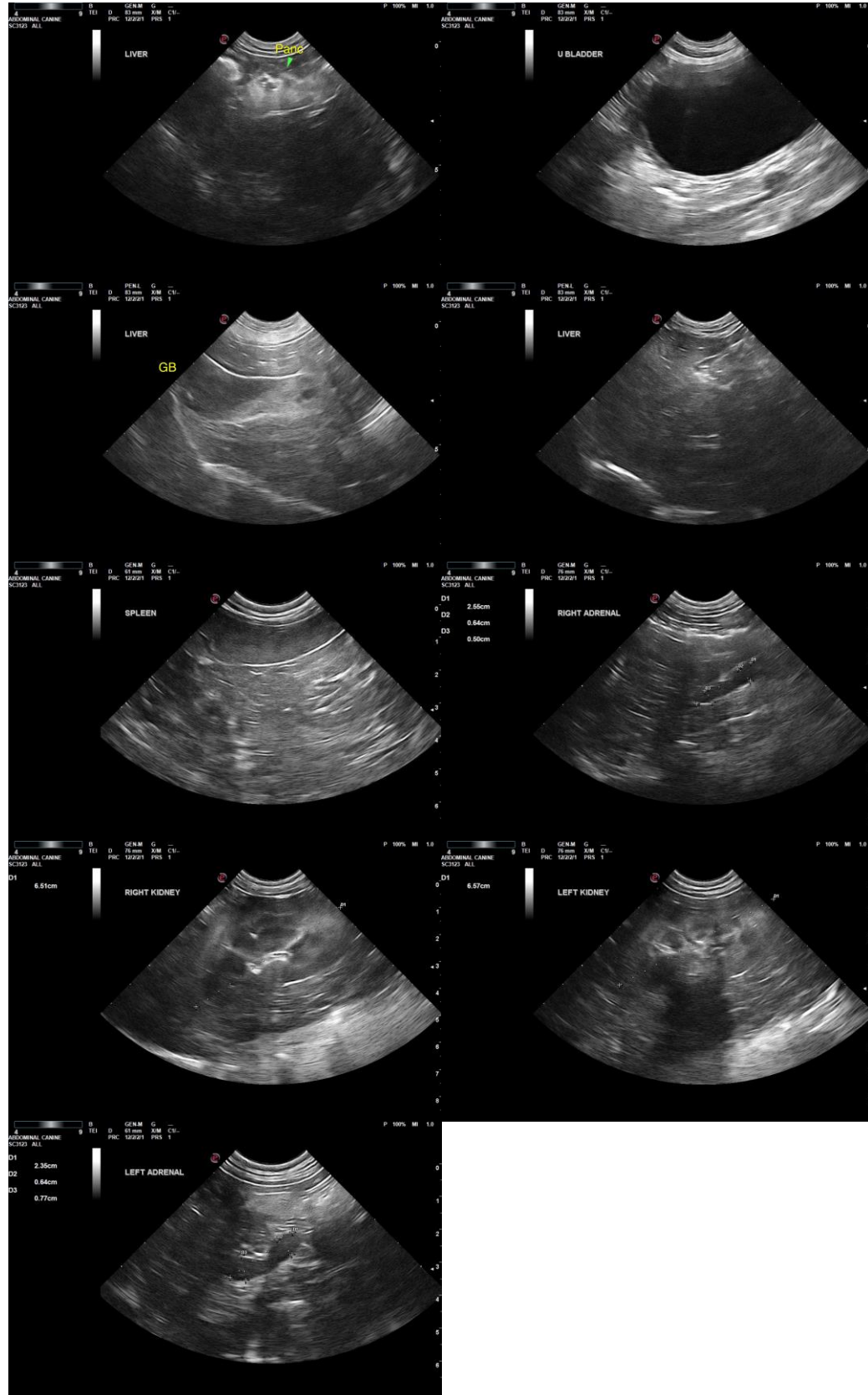
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

BREED

Pitbull

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.

SEX

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