



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Karma Peirce
SPECIES Canine
BREED Mixed
SEX FS
AGE 8 y
WEIGHT 39 lb

History of ALP elevations on labwork and inconsistent proteinuria. Dog has been asymptomatic/currently no concerns at home. Most recent UA/UPC had 1+ protein, UPC was normal. Has previously had 3+ protein on previous UA. Elevated BP on last exam, but Karma was very nervous for measurement. Loose stool x 5 days. BP today BP 140 mmHg.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.

The area of the aortic trifurcation was free of pathology.

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. No evidence of pelvic dilation was present. The left kidney measured 5.9 cm in length. The right kidney measured 6.1 cm in length.

Adrenal Glands

Borderline to mild bilateral symmetrical adrenal gland enlargement, based on caudal pole width measurement in light of body weight, with uniformly hypoechoic parenchyma was present. The left adrenal gland measured 0.72 cm width at the caudal pole and 0.59 cm width at the cranial pole. The right adrenal gland measured 0.69 cm width at the caudal pole and 0.52 cm width at the cranial pole.

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.

Liver/ Gallbladder

The liver was subjectively mildly enlarged with symmetrical mildly rounded hepatic capsule contour. Uniform mild increased hepatic parenchyma echogenicity was noted exhibiting mild coarse echotexture. Hepatic vascular volume was normal with no hepatic masses or nodules noted.

The gallbladder was non-distended in size containing primarily anechoic content with mild nonorganized nondependent gallbladder sediment. The cystic and common bile ducts were normal.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

HOSPITAL NAME

Chase Veterinary Clinic

REFERRING VET

Hallie Lipinski, DVM

INVOICE

17426

DATE

7/27/23



PATIENT

Gastrointestinal

Karma Peirce

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.

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

Mixed

Normal visible colon wall layers were present. The descending colon exhibited an empty lumen with mild luminal gas.

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

8 y

Free Abdomen

Intermittent medial iliac and mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph nodes were not consistent with inflammatory or neoplastic criteria and considered incidental. There was no evidence of omental masses or peritoneal effusion.

WEIGHT

39 lb

ULTRASONOGRAPHIC FINDINGS

- Nonspecific mild chronic renal changes
- Bilateral borderline to mild adrenomegaly
- Hepatomegaly exhibiting mild uniform parenchyma hyperechogenicity - subjectively benign
- Mild gallbladder sediment (non mucocele)
- Sonographically unremarkable gastrointestinal tract and colon

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 DABVP (Canine and Feline)

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Chase Veterinary Clinic

Screening hepatic FNA cytology could be considered for further clarification primarily to assess for evidence of inflammatory criteria. Full adrenal workup with LDDST could be considered if clinical signs consistent with Cushing's Syndrome are present or arise. However, given the lack of reported clinical signs, the mild bilateral adrenomegaly is nonspecific and a potential patient variant.

REFERRING VET

Hallie Lipinski, DVM

Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial. As-needed gastrointestinal support, which may include dietary therapy, high colony count probiotic and empirical deworming is recommended. Continued monitoring of UA for evidence of recurrent proteinuria +/- recheck UPC is suggested.

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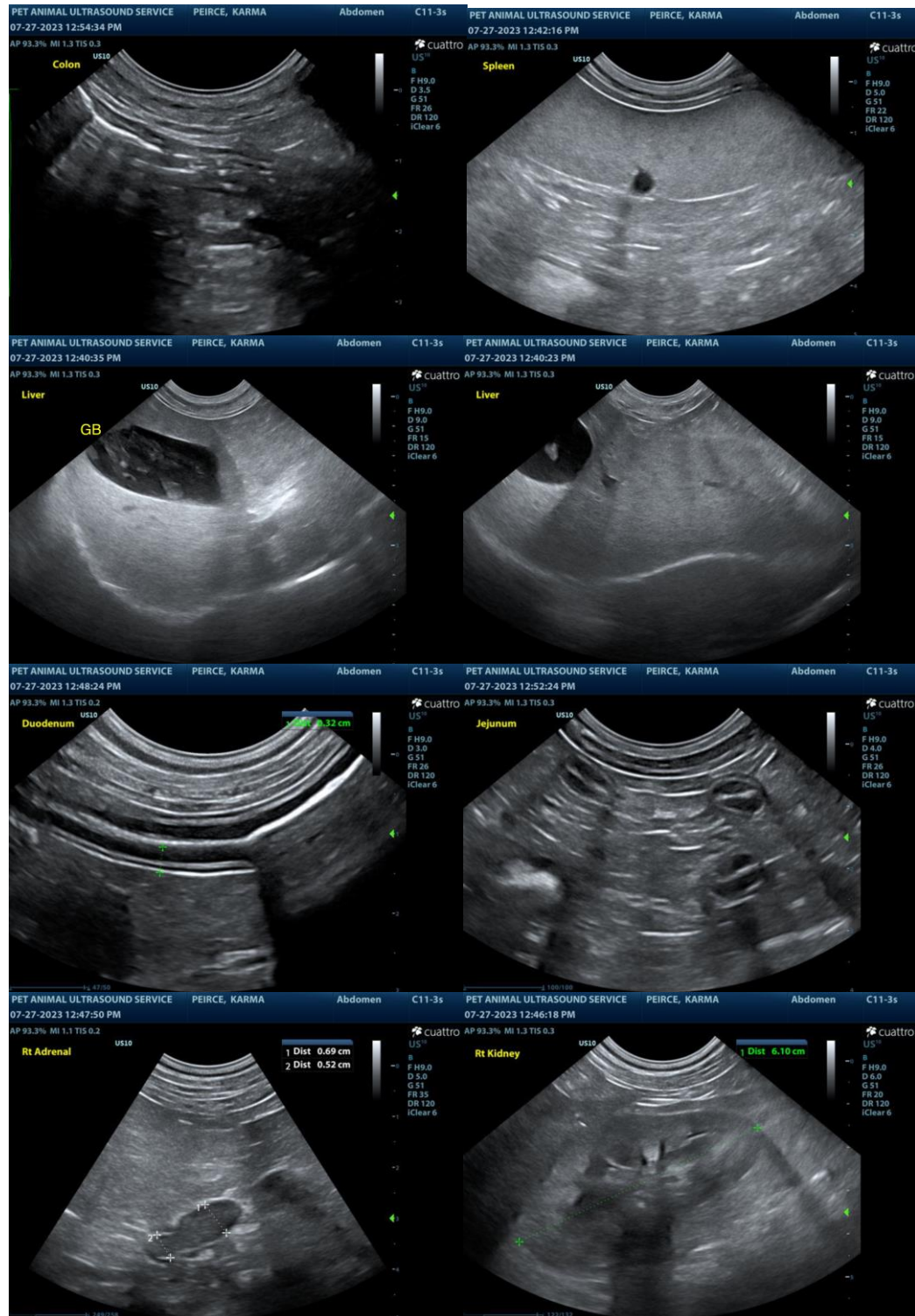
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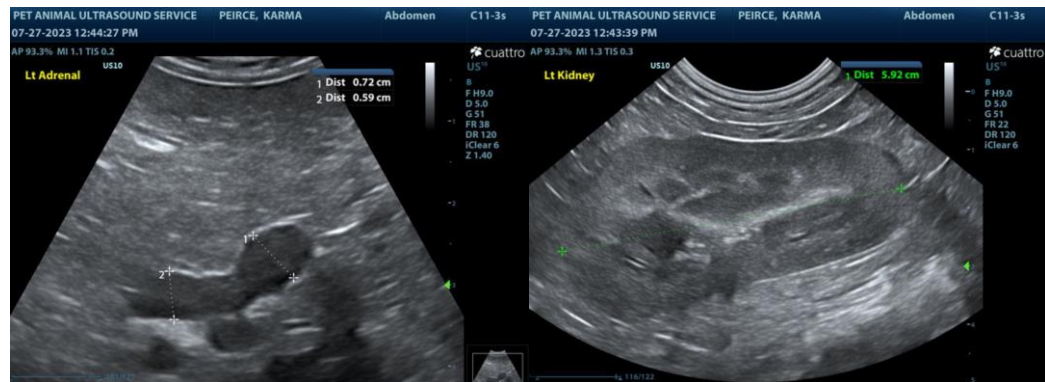
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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