



PATIENT

Bilbo Polchinski

PRESENTING CLINICAL SIGNS

History: Recheck abdomen , anemia present, increased lethargy

SPECIES

Canine

ULTRASONOGRAPHIC RECHECK EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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 were noted.

BREED

Basset Hound

Normal size and margination was 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 corticomodullary symmetry and definition expected for the age of the patient. Mild pyelectasia noted in the left kidney. The left kidney measured 6.0 cm in length. The right kidney measured 6.3 cm in length.

SEX

MN

AGE

9 yr

The area of the aortic trifurcation was free of pathology.

The residual prostate was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.53 cm width at the caudal pole and 1.9 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.51 cm width at the caudal pole and 2.2 cm length.

WEIGHT

42 lb

INTERPRETED BY

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

Spleen

The spleen exhibited subjective mild enlargement with generalized splenic parenchyma heterogeneity exhibiting potential for very subtle micronodular changes. The capsule was smooth and regular without apparent expansion. A solitary mildly hypoechoic nodule was present measuring 0.9 cm in diameter adjacent to the hilus. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Shari Reffi CVT

Liver

The liver exhibited potential for mild enlargement. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Mild increased portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. The gallbladder was normal to mildly distended in size with primarily anechoic luminal content and mild non organized luminal debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

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.

INVOICE

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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.

DATE

07/08/2022

Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Bilbo Polchinski

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

SPECIES

Free Abdomen

Canine

A solitary mildly prominent nonhomogeneous to cystic hepatic lymph node was present adjacent to the portal vein measuring 1.6 cm in diameter. No peritoneal free fluid.

BREED

ULTRASONOGRAPHIC FINDINGS

Basset Hound

- Mild age-related kidney changes with left kidney pyelectasia
- Mild splenomegaly exhibiting heterogenous parenchyma-nonspecific
- Potential mild hepatomegaly exhibiting mild parenchyma hypoechogenicity
- Mildly prominent nonhomogeneous to cystic hepatic lymph node-not overtly consistent with neoplastic criteria
- Static chronic cholecystitis pattern

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AGE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein: creatinine ratio on sterile urine sample is recommended.

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Assuming normal clotting status a hepatosplenic FNA using a 25g needle is warranted for screening cytology. A CBC pathology review +/- infectious disease serology if clinically indicated could be considered. Assessment of hepatic enzymes is recommended if not already or recently done. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

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Three view chest radiographs suggested if not done.

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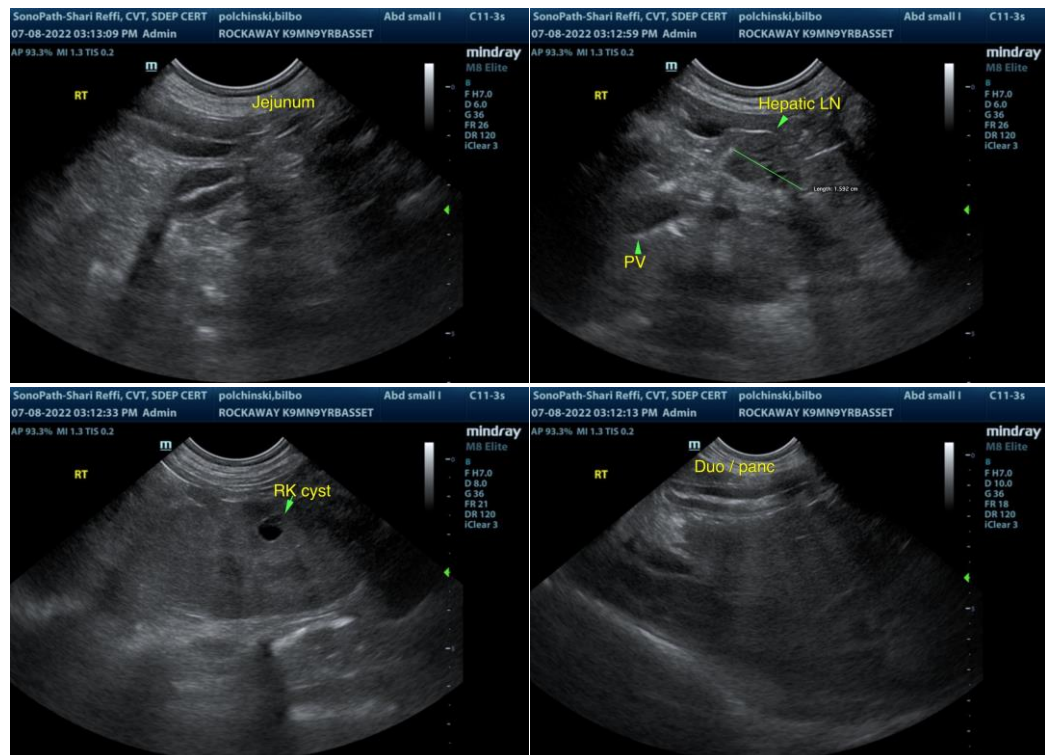
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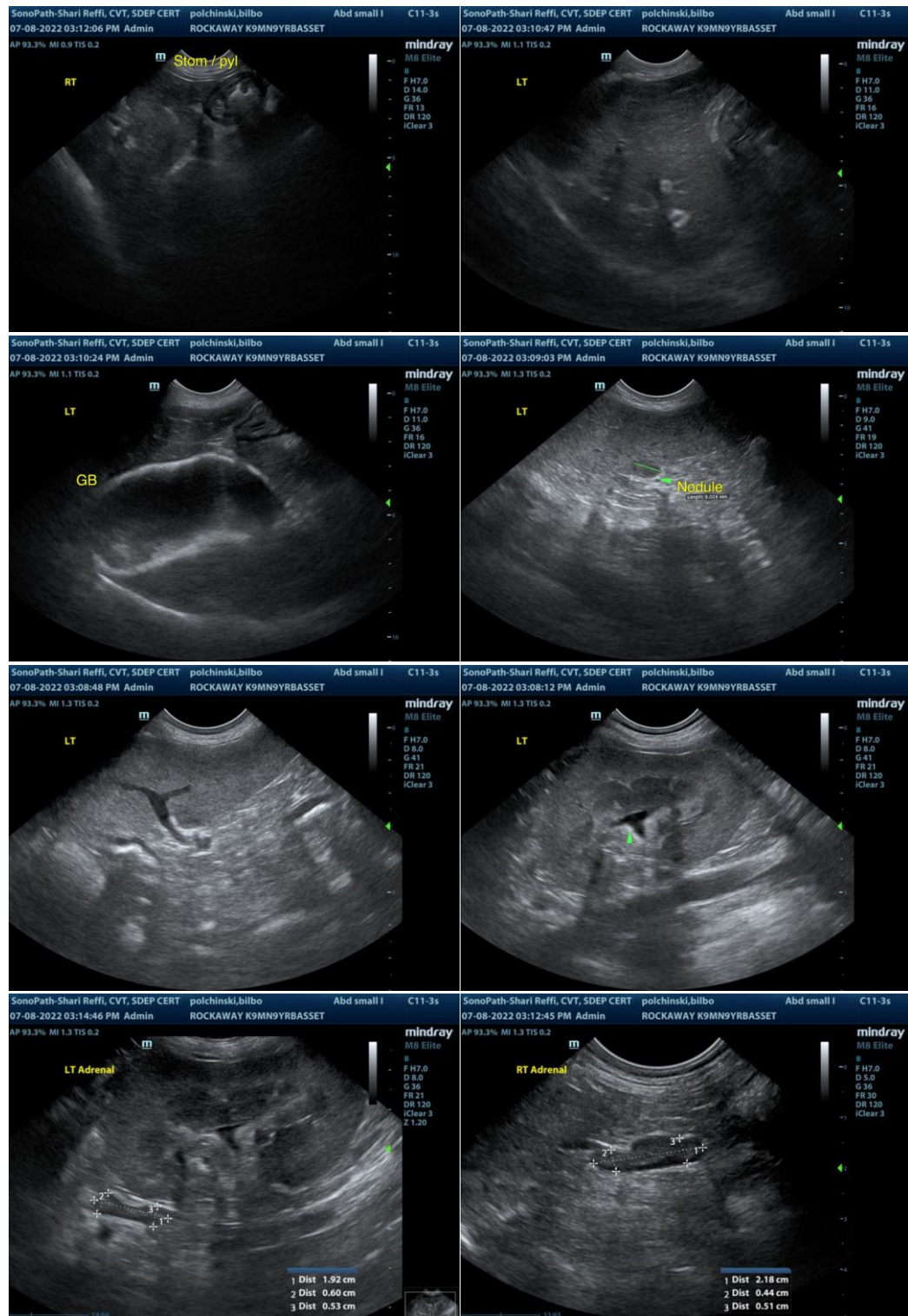
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

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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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info@SonoPath.com

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