



PATIENT PRESENTING CLINICAL SIGNS

Riley Dodge Seen for bad breath and hyporexia in March. BW: ALT 177; ALP 477; GGTP 16; BIN 49. Recently seen for intermittent vomiting and diarrhea. On Metronidazole 250 mg, 1/2 daily

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

BREED

Pomeranian

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

SEX

MN

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Pinpoint to focal areas of medullary mineral with minor pyelectasia present in both kidneys. The left kidney measured 4.0 cm in length. The right kidney measured 4.4 cm in length.

AGE

17yr

The area of the aortic trifurcation was free of pathology.

The residual prostate was free of pathology measuring 0.80 cm in diameter.

WEIGHT

13.5lb

Adrenal Glands

The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.53 cm width in the cranial pole and 0.48 cm width in the caudal pole. No overt pathology in the area of the right adrenal gland.

INTERPRETED BY

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

Spleen

The spleen exhibited normal size and generalized parenchyma heterogeneity including small areas of hyperechoic medial parenchyma adjacent to the medial capsule. Minor areas of medial capsule asymmetry were present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Liver

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. Focal to intermittent discrete intraparenchymal nodules were present an example measuring 1.8 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion.

HOSPITAL NAME

VCA Palmer Animal Hospital

REFERRING VET

Dr. Haroules

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with moderate non-dependent to mildly congealed hyperechoic debris. The cystic and common bile ducts were normal.

INVOICE

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Gastrointestinal

The stomach presented intact wall layering in the area of the fundus and gastric body with mildly prominent wall layering exhibiting indistinct wall layer detail present in the area of the pylorus. No signs of ileus, obstruction or foreign material. The pylorus wall measured 0.56 cm in width.

DATE

08/15/2022



PATIENT

Riley Dodge

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. The duodenum wall measured 0.49 cm in width. The jejunum wall measured 0.29 cm in width.

SPECIES

Canine

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 was evident.

BREED

Pomeranian

Free Abdomen

No omental masses, lymphadenopathy or peritoneal effusion was present.

SEX

MN

ULTRASONOGRAPHIC FINDINGS

AGE

17yr

- Hepatopathy with intermittent discrete intraparenchymal nodules
- Moderate mildly congealed gallbladder debris
- Mildly prominent pylorus walls with retained pyloric chyme
- Minor pancreatic remodeling
- Probable benign splenic myelolipomas and medial capsule fibrosis-benign
- Bilateral chronic renal changes exhibiting minor medullary mineral and pyelectasia

WEIGHT

13.5lb

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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Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

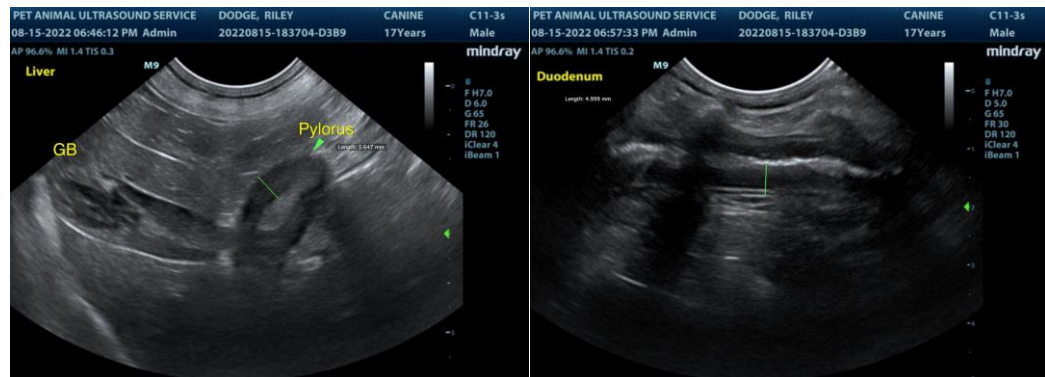
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Empirically, a limited antigen or hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Provable or Visbiome), antibiotic trial and as needed gastrointestinal support with assessment of clinical response may prove beneficial.

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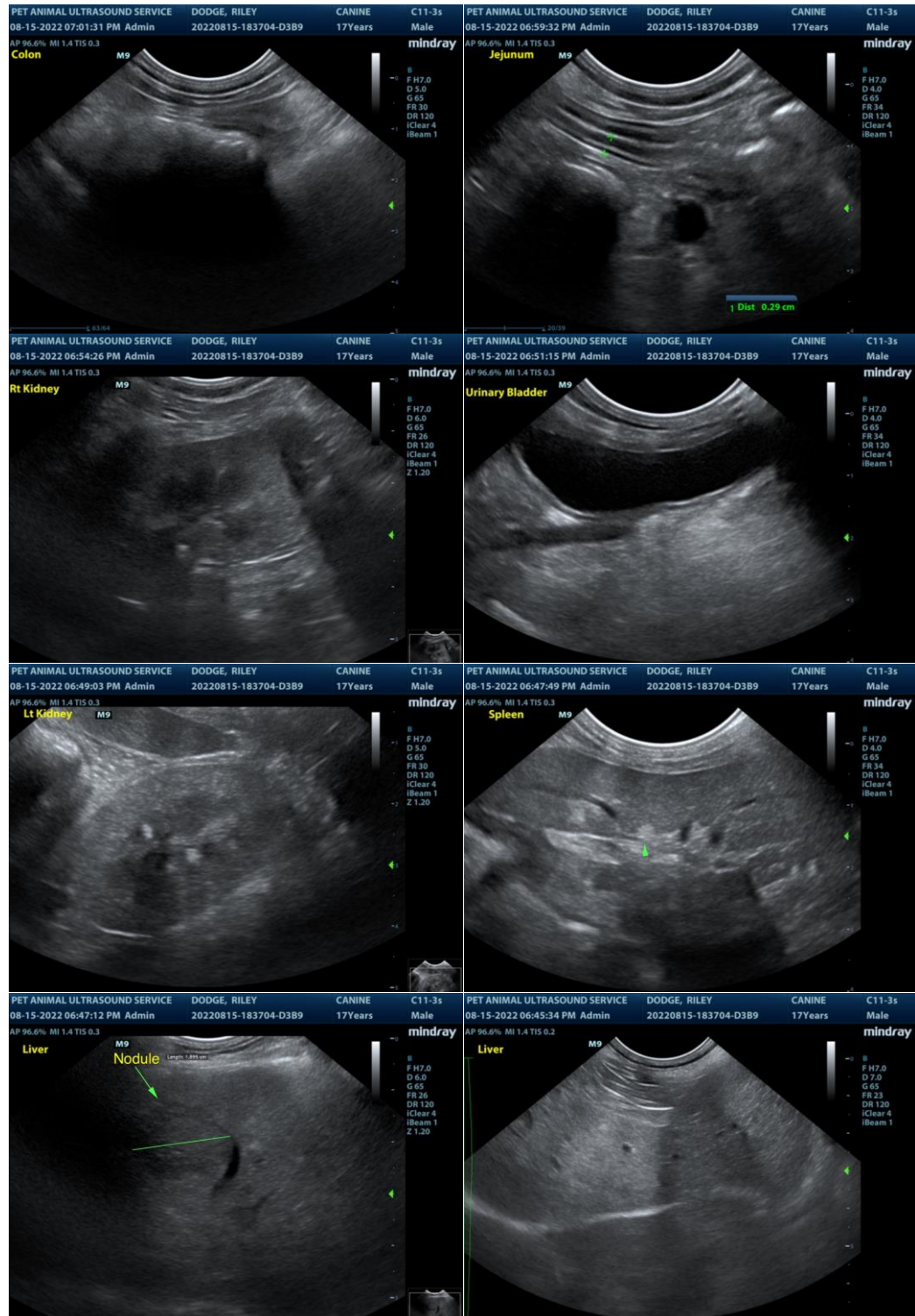
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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