



PATIENT PRESENTING CLINICAL SIGNS

Strudel Freeman-Vereblyi
bleeding gums, abd bruising, low platelets on BW
Abnormal PE/Chem/CBC/UA Results: Hct 0.258, Retics 17, WBC 19.8 w/neutrophilia and monocytosis, USG 1.026, trace protein. Chem not provided. 4dx neg.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Dachshund

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 were noted.

SEX

Spayed Female

No overt pathology in the area of the uterine stump or aortic trifurcation.

AGE

13 Years

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.4 cm. The right kidney measured 4.6 cm.

Adrenal Glands

WEIGHT

6.2 kg

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The right adrenal gland measured 2.0 cm length x 0.52 cm at the caudal pole. The left adrenal gland measured 1.7 cm length x 0.53 cm at the caudal pole.

INTERPRETED BY

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

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. A solitary, non-expansive heterogeneous nodule was noted in the caudal spleen without evidence of associated capsule distortion. The spleen measured 1.1 cm diameter. 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.

IMAGING PERFORMED BY

Kelly Reschny

Liver

HOSPITAL NAME

Wellington AH

The liver exhibited mild generalized enlargement. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Dr. Dennis

Gastrointestinal

INVOICE

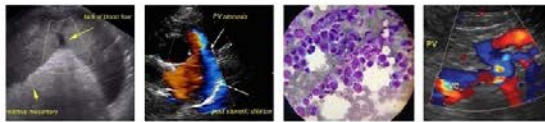
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The stomach presented intact yet subjective mild prominent wall layering. A mild amount of retained echogenic ingesta with non-specific solitary small shadowing echo noted primarily in the area of the gastric antrum and pylorus. The echo measured 1.3 cm diameter. Gastric body wall measured 0.54 cm.

DATE

8/20/21

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. Intermittent non-specific



PATIENT jejunal mucosal speckling was present. Jejunum wall measured 0.35 cm. Duodenum wall measured 0.40 cm.

Strudel Freeman-Vereblyi

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

SPECIES *Pancreas*

Canine

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

Dachshund

Free Abdomen

No evidence of intraabdominal masses, lymphadenopathy or effusion.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

- Moderate chronic renal changes
- Non-specific caudal splenic nodule – hyperplasia, hematopoiesis, or granuloma likely, potential for focal splenic neoplasia considered less likely.
- Mild subjective hepatomegaly with parenchymal remodeling – subjectively benign
- Mild to moderate gallbladder debris (non-mucocele)
- Mild retained gastric ingesta with focal non-specific luminal shadowing echo

AGE

13 Years

WEIGHT

6.2 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The presence of gastric ingesta may indicate recent meal ingestion. However, some degree of gastric hypomotility may be possible if documented NPO. The focal shadowing gastric echo is non-specific and may correlate with dense ingesta, treat or medication if clinically applicable. Potential for focal non-obstructive gastric foreign body cannot be definitively excluded.

Sonographic monitoring of the stomach would be ideal. Alternatively, radiographic monitoring of the stomach and assessment for potential metallic foreign body is suggested. Ultrasound guided FNA of the splenic nodule (assuming normal clotting status) may be considered for further clarification. Sonographic monitoring of the splenic nodule would be a more conservative approach. 3-view chest radiographs, CBC pathology review +/- comprehensive infectious disease serology may be considered.

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IMHA/Infectious Anemia/Thrombocytopenia/Evans Syndrome

(Note: ensure no underlying neoplasia as IMHA/Evans syndrome can occur as paraneoplastic manifestation especially in lymphoma/round cell neoplasia)

REFERRING VET

Dr. Dennis

Anemia +/- thrombocytopenia with spherocytes/autoagglutination in dogs and hyperbilirubinemia, bilirubinuria. (NOTE: cats do not get spherocytes in IMHA)
Consider Onion/Garlic derivative ingestion if Heinz bodies present.

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Prednisone (K9) Prednisolone (Feline): 2 mg/kg Sid/Bid initially x 3 weeks then attempt taper
Aspirin 0.5 mg/kg Sid owing to hypercoagulable state
Sucralfate 0.5-1 g po tid dogs, 0.5 g bid cats in slurry
Doxycycline if infectious suspected clinically or based on CBC path review:
Dogs, Cats: 10 mg/kg p.o. q24h with food or water bolus in cats

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Long-term management dogs: Azothiaprine 2 mg/kg Sid or Cyclosporine 10mg/kg po sid bid



PATIENT

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SPECIES

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BREED

Dachshund

SEX

Spayed Female

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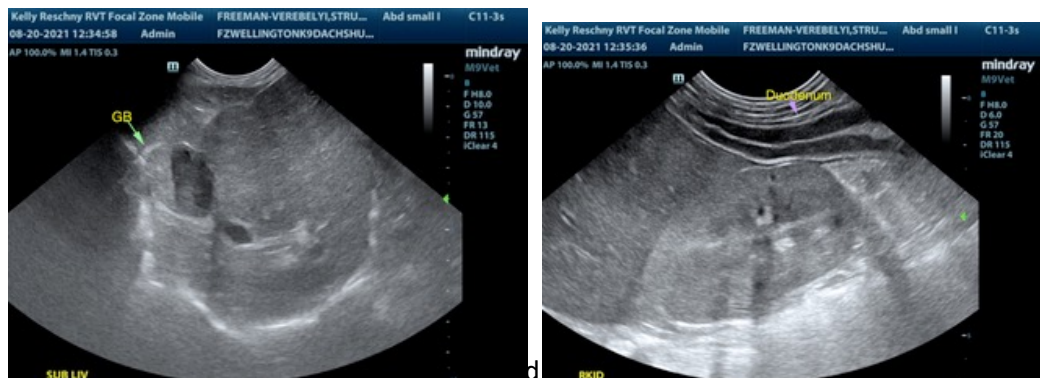
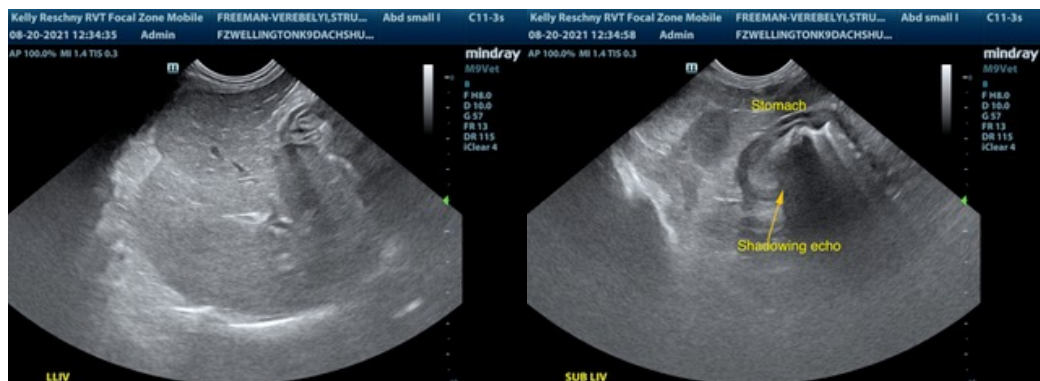
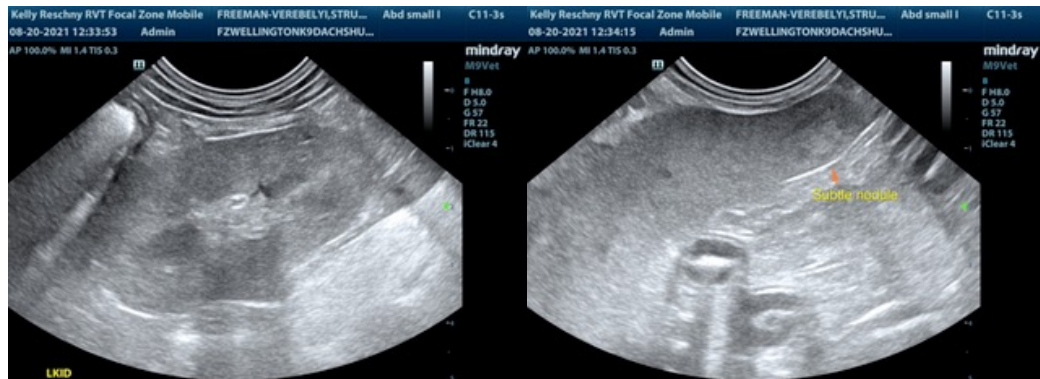
Dr. Dennis

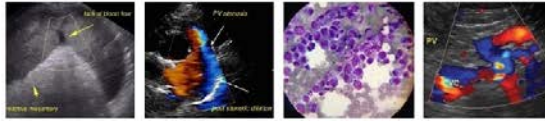
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PATIENT

Strudel Freeman-
Vereblyi

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.

SPECIES

Canine

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.

BREED

Dachshund

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

Spayed Female

AGE

13 Years

WEIGHT

6.2 kg

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