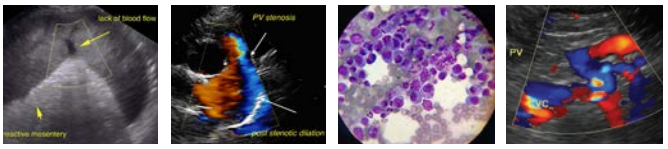
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Bernie Digiulio

SPECIES
Canine

BREED
Pug

SEX
Neutered Male

AGE
10 Years

WEIGHT
27.6 Pounds

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

IMAGING PERFORMED BY
Dr. Rodriguez

HOSPITAL NAME
Foxfield Vet Service

REFERRING VET
Dr. Rodriguez

INVOICE
24861

DATE
8/24/21

PRESENTING CLINICAL SIGNS

Hx of several FB sx with R and A. Diarrhea. Ate this am. No vomiting
Abnormal PE/Chem/CBC/UA Results: N/A

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

No overt pathology in the area of the prostate.

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 4.5 cm. The right kidney measured 4.3 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.8 cm length x 0.49 cm at the caudal pole. The left adrenal gland measured 1.9 cm length x 0.42 cm at the caudal pole.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. 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. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

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. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

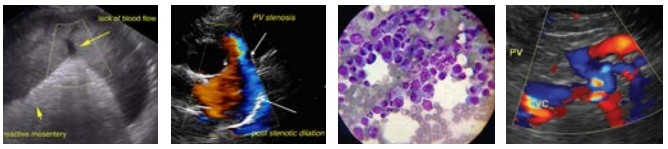
Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained echogenic, nonshadowing ingesta most consistent with post prandial presentation without signs of ileus, obstruction or foreign material.

The small intestine exhibited generally intact wall layering with maintained 1:3 muscularis/mucosa ratio with focal area of jejunal folding, which may indicate potential previous area of resection and anastomosis. Generalized small intestinal echogenic, non-shadowing digesta was present without evidence of mechanical small intestinal obstruction or foreign material. Duodenum wall measured 0.30 cm. Jejunum wall measured 0.30 cm. Segmental to generalized mild jejunal mucosal speckling was present.

Normal visible colon wall layers were present with generalized semiformed to soft feces present. Descending colon wall measured 0.23 cm.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bernie Digiulio

SPECIES

Canine

BREED

Pug

SEX

Neutered Male

AGE

10 Years

WEIGHT

27.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Rodriguez

HOSPITAL NAME

Foxfield Vet Service

REFERRING VET

Dr. Rodriguez

INVOICE

24861

DATE

8/24/21

Pancreas

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

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

PRIMARY FINDINGS

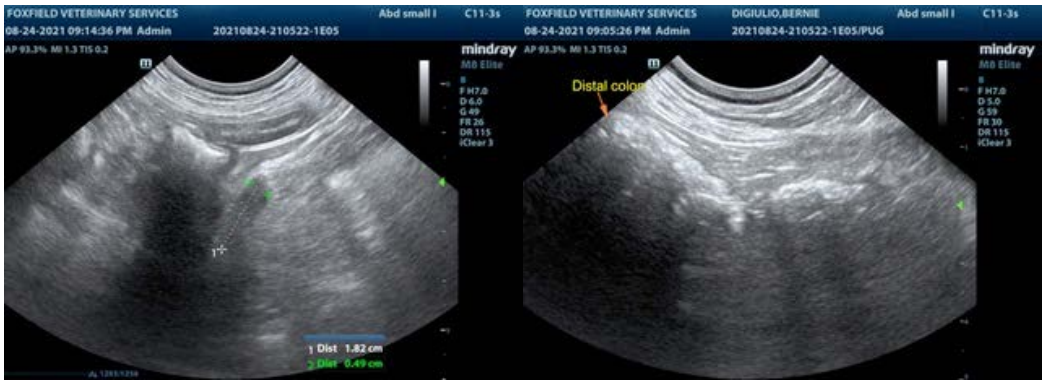
- Gastric ingesta – correlate with recent meal ingestion
- Enteritis/enterocolitis pattern with jejunal mucosal speckling

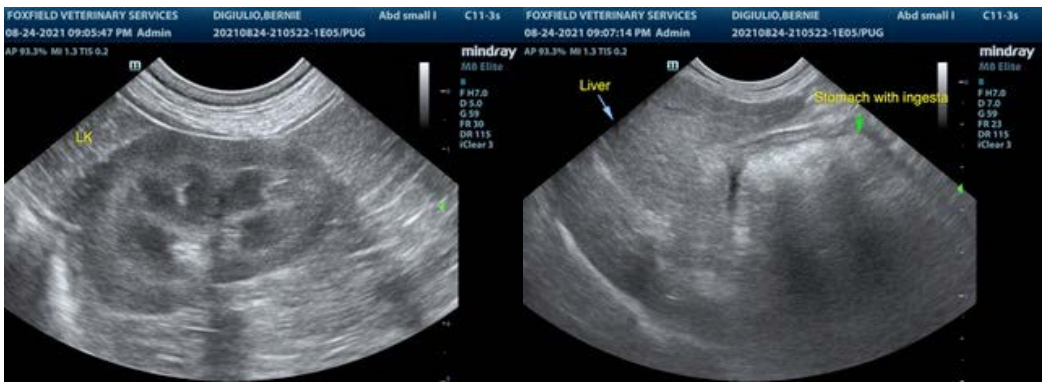
SECONDARY FINDINGS

- Mild age related renal changes

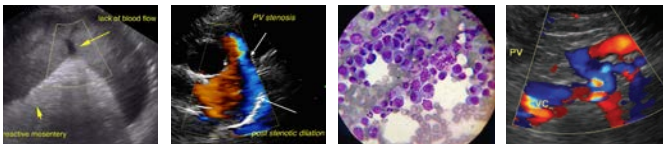
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gastroenterocolic foreign body or mechanical ileus. Dietary indiscretion/food intolerance or inflammatory enteropathy/enterocolonopathy likely given the subtle jejunal mucosal speckling. The jejunal mucosal speckling is non-specific, yet may be associated with intestinal inflammation. Conservative therapy for diarrhea should prove beneficial in this case. Fresh fecal analysis to assess for parasitic ova/giardia is recommended if not yet done. If recurrent diarrhea is noted, GI panel to include PLI, TLI, cobalamin and folate and long-term hydrolyzed diet therapy could be considered.





SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bernie Digiulio

SPECIES

Canine

BREED

Pug

SEX

Neutered Male

AGE

10 Years

WEIGHT

27.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Rodriguez

HOSPITAL NAME

Foxfield Vet Service

REFERRING VET

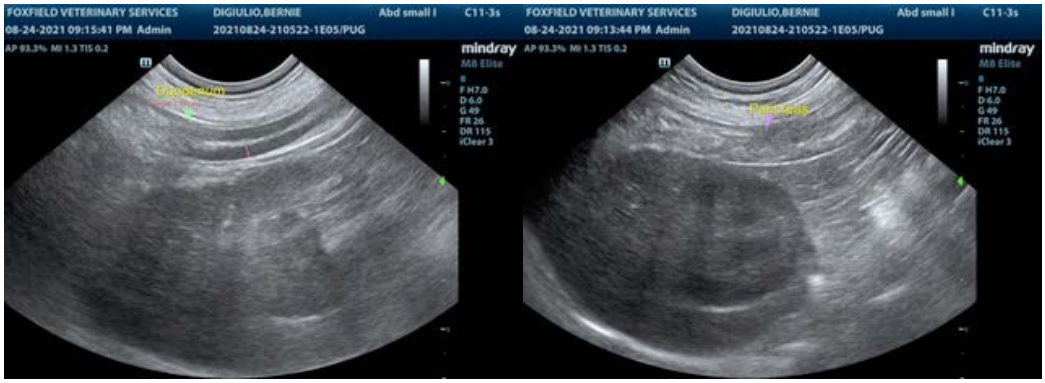
Dr. Rodriguez

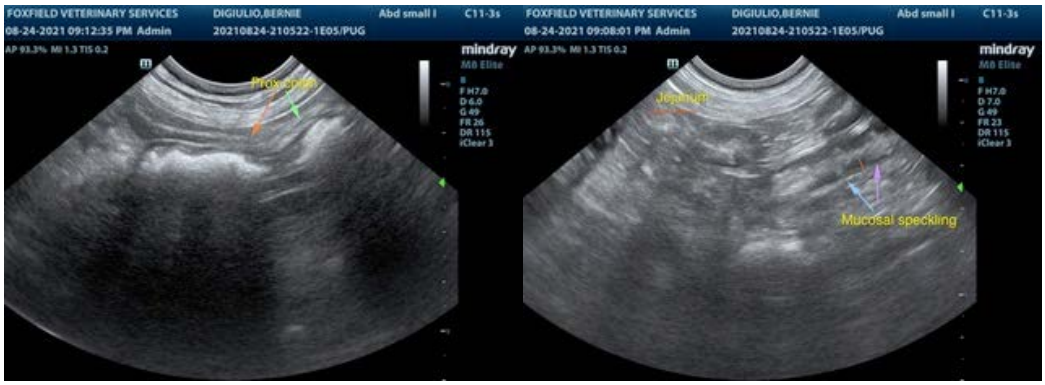
INVOICE

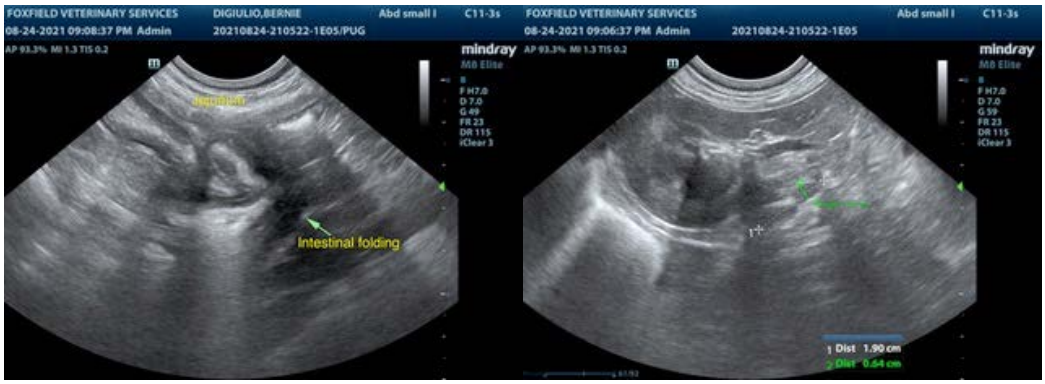
24861

DATE

8/24/21







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.

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