



PATIENT PRESENTING CLINICAL SIGNS

Bella Kimmel
History: Diarrhea for 2 weeks
Medication: RC HP, Fortiflora

SPECIES
Alb 3.9, sodium/potassium ratio 29, Hct 61, WBC 5.6, USG 1.010, negative protein and glucose.

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED
Urinary System

Beagle Mix
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

FS

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 4.8 cm. The right kidney measured 5.1 cm.

AGE

13 years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

30 Pounds

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.51 cm at the cranial pole and 0.58 cm at the caudal pole. The right adrenal gland measured 0.59 cm at the cranial pole and 0.67 cm at the caudal pole.

INTERPRETED BY
Spleen

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

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.

IMAGING PERFORMED BY
Liver

Rebekah Jakum, CVT
ARDMS/RVT

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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.

HOSPITAL NAME
Gastrointestinal

White Haven VH

Gastrointestinal

REFERRING VET

Dr. Dengler

The stomach exhibited intact yet subjective mild prominent wall layering with minor retained anechoic fluid, primarily in the area of the gastric antrum and pylorus. Gastric body wall measured 0.52 cm.

INVOICE

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The small intestine exhibited generalized intact wall layering and maintained 1:3 muscularis/mucosa ratio with segmental jejunal hypomotility/stasis exhibited by segmental retained digesta/chyme. No evidence of mechanical obstruction, loss of intestinal wall layering, or intestinal masses. Jejunum wall measured 0.44 cm.

DATE

8.25.2021

The visualized colon walls were sonographically unremarkable. Intact wall layering noted without evidence of colon mural hypertrophy. Generalized mild to moderate distention was present containing soft to nonformed feces. Colon wall measured 0.18 cm.



PATIENT *Pancreas*

Bella Kimmel 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.

SPECIES *Free Abdomen*

Canine No overt lymphadenopathy or peritoneal effusion was present.

BREED **PRIMARY FINDINGS**

- Beagle Mix
- Generalized colon distention with soft to nonformed feces
 - Segmental enteritis

SEX **SECONDARY FINDINGS**

- FS
- Mild age related kidneys
 - Mild gallbladder debris (non-mucocele) - incidental

AGE **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

13 years Given the patient's recent to recurrent diarrhea pattern, potential resolved colitis (in light of the previous bloody mucus diarrhea) with potential current antibiotic responsive diarrhea/dysbiosis is suspected. Dietary intolerance/food hypersensitivity also possible. Therefore, continued hydrolyzed protein diet is recommended.

WEIGHT

30 Pounds Assessment of serum cobalamin and folate levels may be considered. If not done, fresh fecal analysis to assess for parasitic ova/giardia is recommended. Broad-spectrum deworming (i.e., Panacur 50 mg/kg PO SID for 5 consecutive days with potential repeat protocol in 3 weeks) warranted regardless of fecal testing. If patient's diarrhea is refractory to Metronidazole, Tylosin may prove beneficial.

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

White Haven VH

REFERRING VET

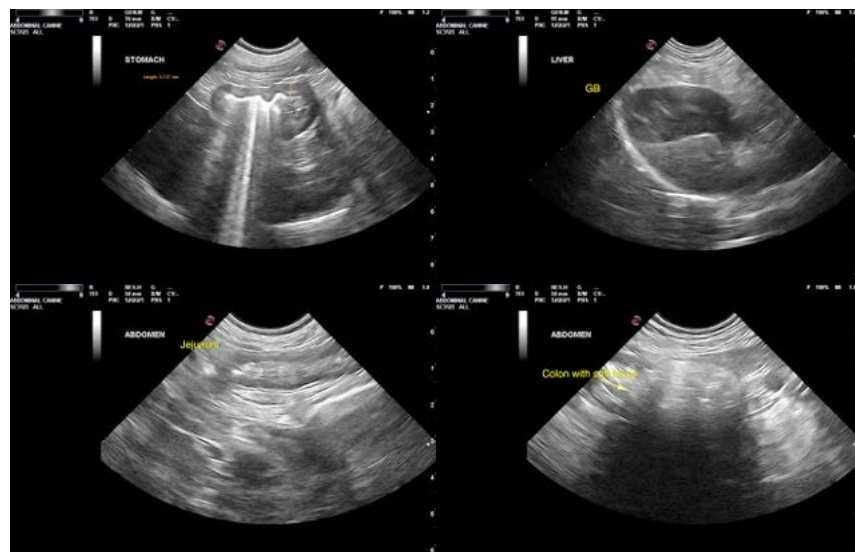
Dr. Dengler

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PATIENT

Bella Kimmel

SPECIES

Canine

BREED

Beagle Mix

SEX

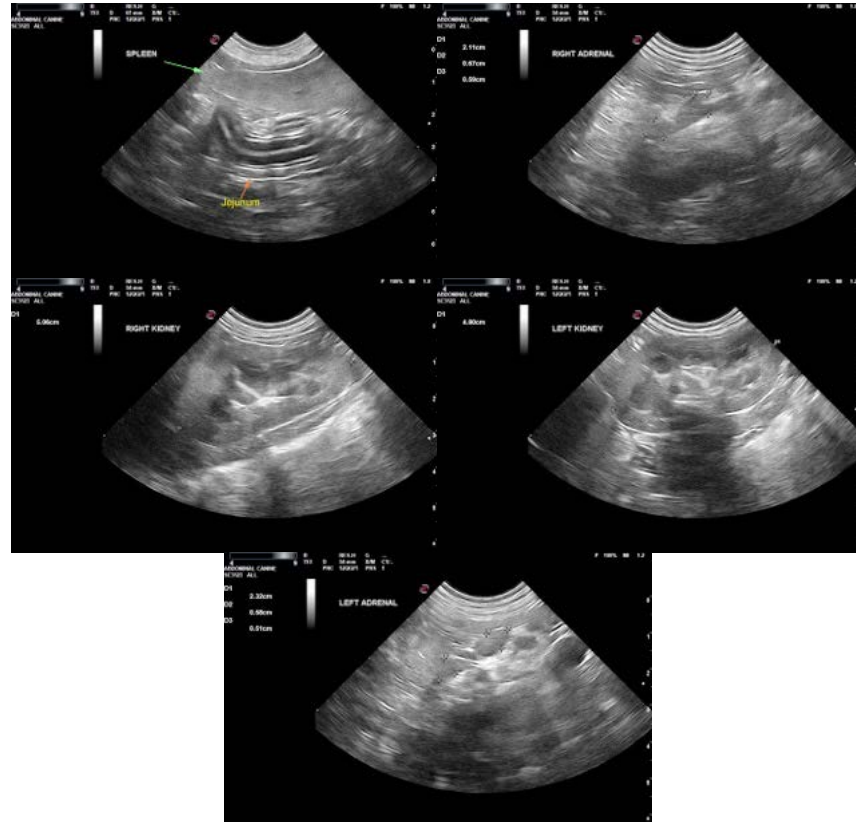
FS

AGE

13 years

WEIGHT

30 Pounds



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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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