



PATIENT PRESENTING CLINICAL SIGNS

Buddy Carroll Anorexia; lethargy. Weight loss (5 lb in 10 days). Radiographs: unremarkable abdomen
 Abnormal PE/Chem/CBC/UA Results: Folate 4.67; SDMA 36; ALT 176

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *Urinary System*

BREED The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.

Doodle

SEX The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 1.0 cm in width.

MN No evidence of pathology in the area of the aortic trifurcation.

AGE Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex. Mild pyelectasia was present in both kidneys. The left kidney measured 6.6 cm in length. The right kidney measured 6.6 cm in length.

8 Years

WEIGHT *Adrenal Glands*

45 lbs The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.55 cm width at the caudal pole and 0.51 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.31 cm width at the caudal pole and 0.40 cm width at the cranial pole.

INTERPRETED BY

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

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. A solitary non-expansive hypoechoic nodule noted in the subjective cranialateral spleen measuring 0.70 cm diameter.

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

Liver

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.

HOSPITAL NAME

Mashpee Veterinary
 Hospital

REFERRING VET

Mark Oldham, DVM

Gastrointestinal

INVOICE

47182

The stomach presented intact wall layering with a normal wall layer ratio. No evidence of retained ingesta, fluid, or foreign material. The gastric body wall measured 0.32 cm width.

DATE

8-29-21

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor upper to mid duodenal ileus was present. The lumen of the small intestine was empty with no evidence of mechanical obstruction or foreign material. The jejunum wall measured 0.41 cm width.



PATIENT

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

Buddy Carroll

Pancreas

SPECIES

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.

Canine

Free Abdomen

BREED

Focally enlarged intermittent mid abdominal mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 0.61 cm width.

Doodle

SEX

No overt peritoneal effusion was present.

MN

ULTRASONOGRAPHIC FINDINGS

AGE

- Mild hepatopathy.
- Mild gallbladder debris (nonmucocele).
- Mild bilateral pyelectasia.
- Nonspecific non-expansive splenic nodule.
- Possible enteropathy.
- Intermittent subjectively benign mesenteric lymphadenopathy - mild reactive lymphadenitis or lymphoid hyperplasia suspected.

8 Years

WEIGHT

45 lbs

INTERPRETED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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

The pyelectasia within the bilateral kidneys 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.

**IMAGING
 PERFORMED BY**

Potential etiologies for the splenic nodule may include benign processes such as nodular hyperplasia, extramedullary hematopoiesis, hematoma, infection, infarction, or neoplasia. Ultrasound guided FNA of the nodule using 25-gauge needle and assuming normal coagulation parameters may be considered. Otherwise, sonographic monitoring of the splenic nodule for any change in size or appearance with initial recheck in 3-4 weeks would be a more conservative approach.

Pamela Harrigan, RDCS

HOSPITAL NAME

Mashpee Veterinary
 Hospital

Although no evidence of structural gastrointestinal mural pathology was noted, given the patient's weight loss, underlying intestinal disease with concurrent reactive mesenteric lymphadenopathy is suspected. The decreased folate levels, although nonspecific, may be seen with upper intestinal disease. Endoscopic biopsies would be required for a definitive diagnosis.

REFERRING VET

Mark Oldham, DVM

Three view chest radiographs may be considered, if not done, to rule out occult thoracic pathology as a possible cause of weight loss.

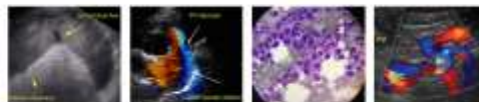
INVOICE

Empirically, continued gastrointestinal support and monitoring of weight loss is recommended.

47182

DATE

8-29-21



PATIENT

Buddy Carroll

SPECIES

Canine

BREED

Doodle

SEX

MN

AGE

8 Years

WEIGHT

45 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Mashpee Veterinary Hospital

REFERRING VET

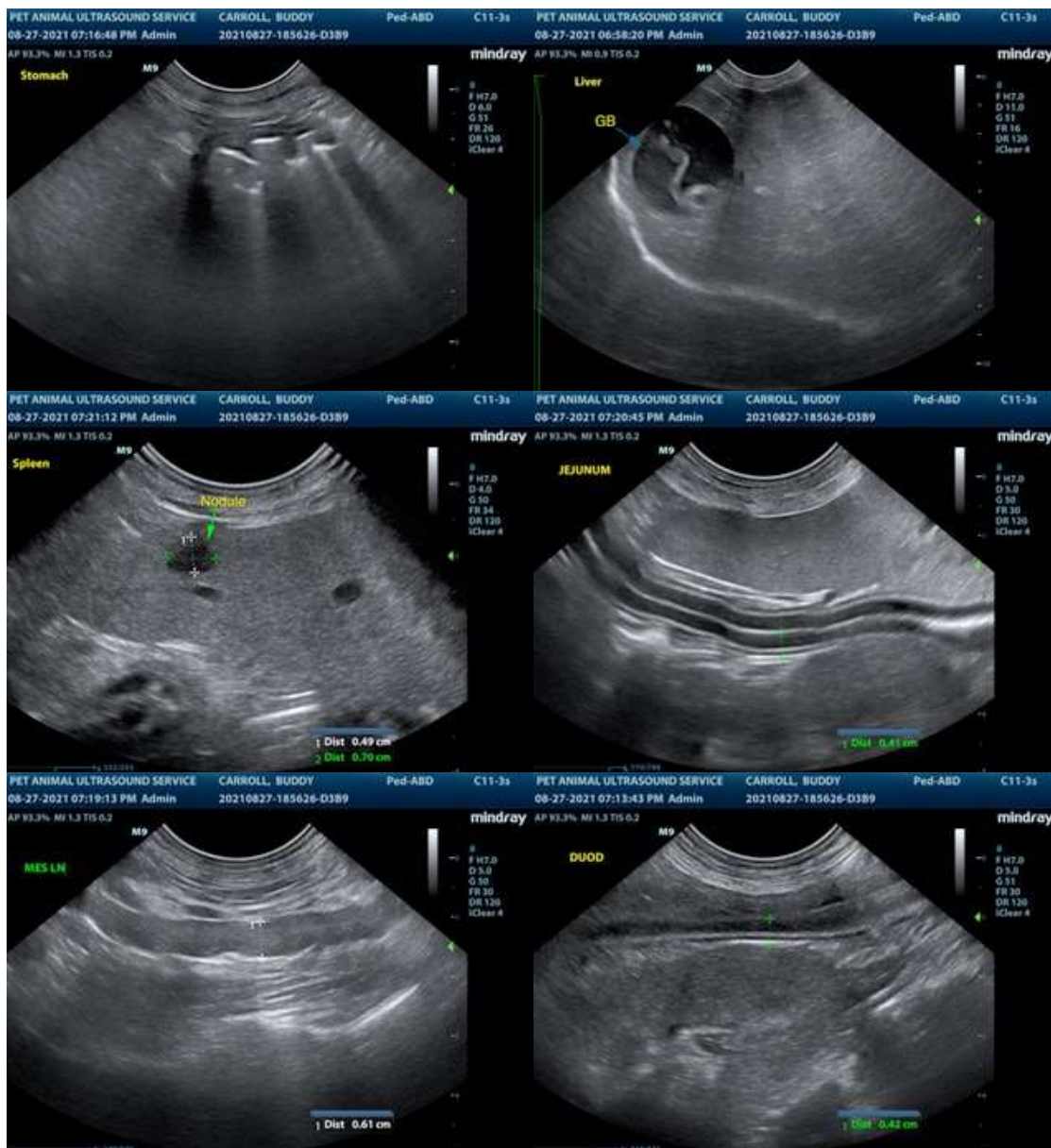
Mark Oldham, DVM

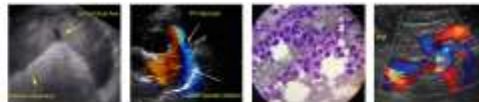
INVOICE

47182

DATE

8-29-21





PATIENT

Buddy Carroll

SPECIES

Canine

BREED

Doodle

SEX

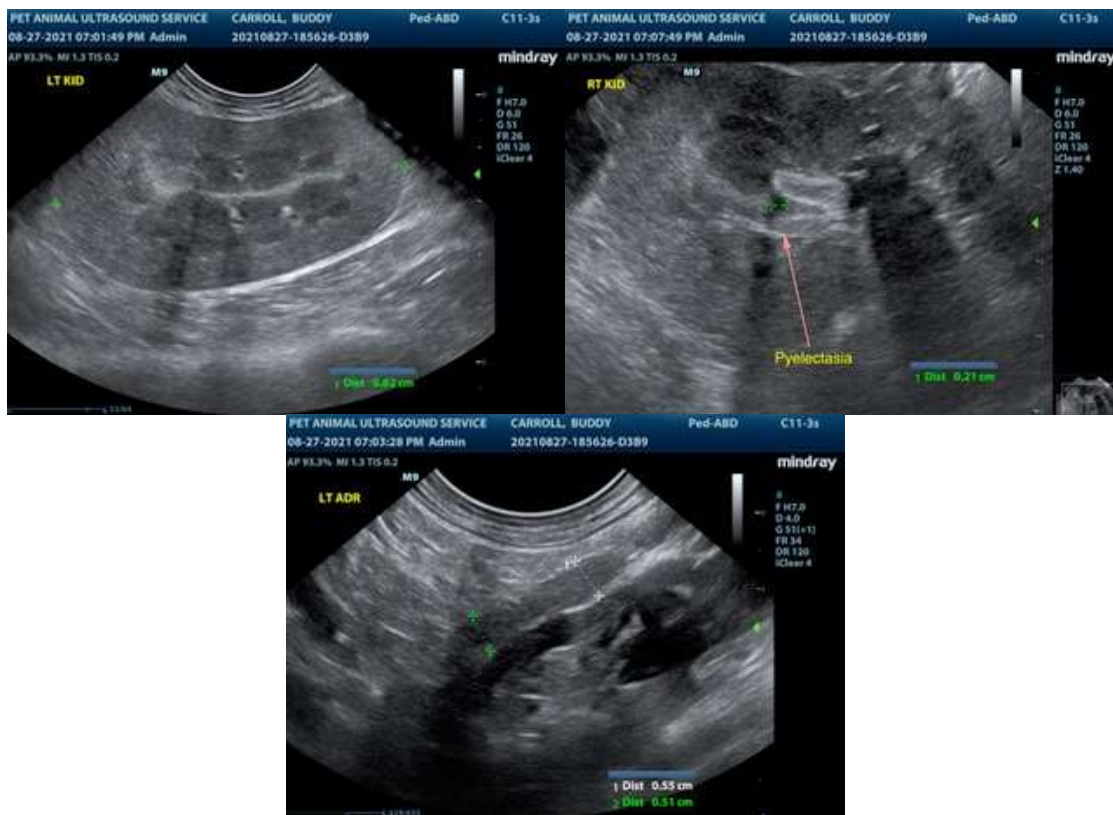
MN

AGE

8 Years

WEIGHT

45 lbs



INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

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

HOSPITAL NAME

Mashpee Veterinary
 Hospital

REFERRING VET

Mark Oldham, DVM

INVOICE

47182

DATE

8-29-21