



**PATIENT PRESENTING CLINICAL SIGNS**

Milo Deoliveila Recent history poor appetite and painful abdomen. No vomiting or diarrhea. Radiographs = questionable foreign body. GGTP high 14; Precision PSL high 310.

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine *Urinary System*

**BREED**

ChihuahuaMix

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 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. Pinpoint areas of medullary mineral were noted with scant bilateral pyelectasia. The left kidney measured 3.6 cm in length. The right kidney measured 3.9 cm in length.

**AGE**

6yr

The area of the aortic trifurcation was free of pathology.

The residual prostate was free of pathology measuring 0.47 cm in diameter.

**WEIGHT**

12.8lb

*Adrenal Glands*

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.50 cm width at the caudal pole and 0.40 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 0.44 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. A solitary non-disruptive non-homogeneous nodule measuring 1.0 cm in diameter was present in the mid lateral to cranial spleen. 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**

Pamela Harrigan, RDCS

*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. The gallbladder was non-distended in size with thin walls and moderate non-dependent mobile hyperechoic debris. The cystic and common bile ducts were normal.

**HOSPITAL NAME**

East Boston Animal Hospital

**REFERRING VET**

Dr. Chopra

*Gastrointestinal*

**INVOICE**

11484ag

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.35 cm in width.

**DATE**

08/29/2022

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 0.41 cm in width. The jejunum wall measured 0.27 cm in width.



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

Milo Deoliveila *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** No omental masses, lymphadenopathy or peritoneal effusion was present.

ChihuahuaMix **ULTRASONOGRAPHIC FINDINGS**

- SEX**
- Sonographically unremarkable gastrointestinal tract
  - Sonographically unremarkable pancreas
  - Moderate non-dependent mobile gallbladder debris (non-mucocele\_
  - Non-specific splenic nodule
  - Pinpoint renal medullary mineralization with scant to minor bilateral pyelectasia-nonspecific

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

6yr 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 changes in size or appearance with initial recheck in 3-4 weeks would be a more conservative approach.

**WEIGHT**

12.8lb

No evidence of GI foreign body or obstructive pattern was observed. A definitive cause of the patient's painful abdomen was not obvious. Potential for low grade pancreatitis could be present and appear sonographically normal. Assessment for possible referred abdominal pain is suggested.

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Ursodiol therapy could be considered given potential for mild non-obstructive cholestasis.

Urinalysis with C/S is recommended.

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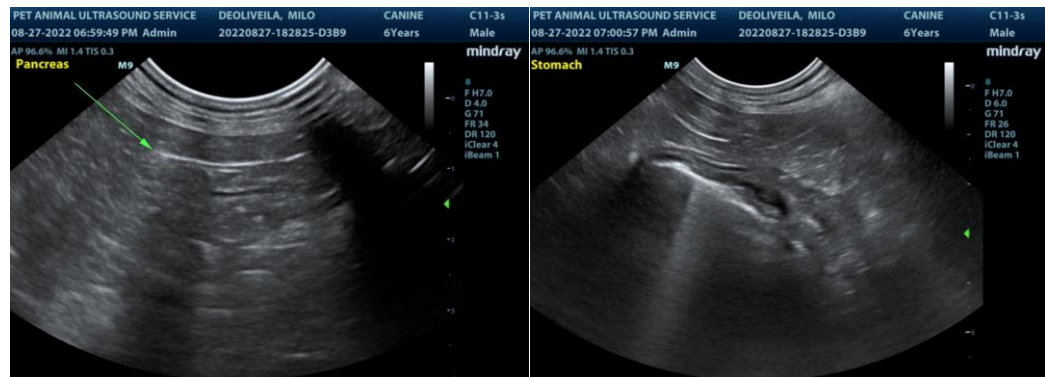
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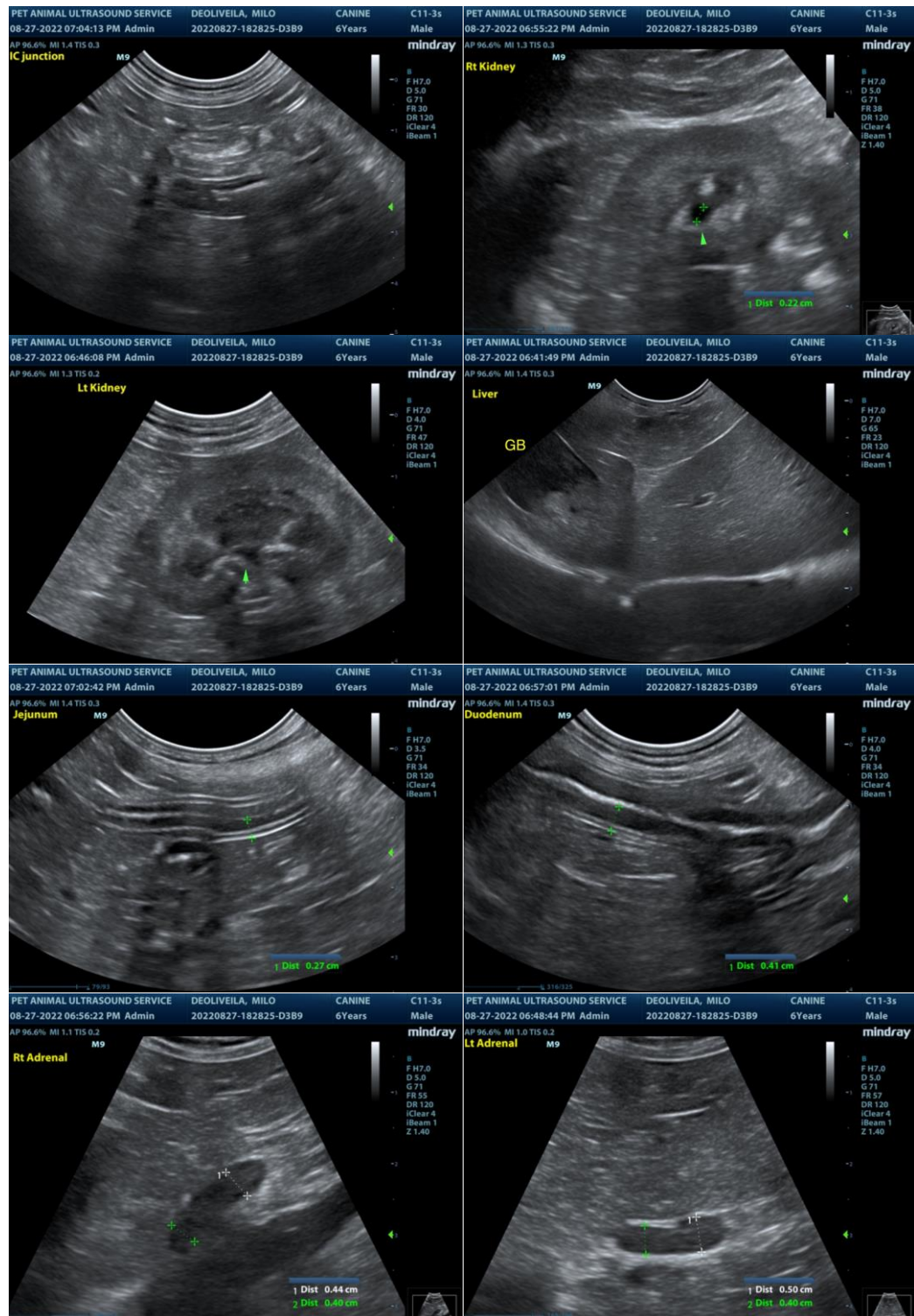
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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