



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Luigi Ianotti
SPECIES Canine
BREED Jack Russell Terrier
SEX MN
AGE 9yr
WEIGHT 31.4lb

PRESENTING CLINICAL SIGNS
 History: Intermittent diarrhea with recent vomiting (1-2 x daily, mostly bile). Incontinence. Owner started feeding boiled rice and chicken two days prior to appointment. rDVM did TLI/Folate/Cobalamine test which came back normal. Evaluate for hepatopathy/ pancreatic issue/ inflammatory bowel disease. Current medications: Metronidazole, Provable probiotic, Famotidine, Cerenia

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was mildly distended in size with normal tone. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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 mural changes were noted.

Normal size and margination was 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 minor loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present.

The left kidney measured 5.1 cm in length. The right kidney measured 5.0 cm in length.

The area of the aortic trifurcation was free of pathology.

The residual prostate was free of pathology measuring 0.52 cm in diameter.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.63 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 0.54 cm width at the caudal pole and 0.39 cm width at the cranial 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 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 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 was empty with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.40 cm in width.

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 0.46 cm in width. The jejunum wall measured 0.31 cm in width.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Airport Animal Hospital

REFERRING VET

Dr. Gudluru

INVOICE

11285ag

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08/05/2022



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

Luigi Ianotti **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.

Jack Russell Terrier

ULTRASONOGRAPHIC FINDINGS

- SEX**
 - Overtly normal GI tract
 - Minor to early age related renal changes
 - Distended urinary bladder, overly normal visible proximal urethra
 - Unremarkable pancreas

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9yr

Overall no overt evidence of significant abdominal visceral pathology specifically GI, pancreatic or lower urinary tract pathology.

WEIGHT

31.4lb

The appearance of the gastrointestinal tract was overtly normal with considerations including dietary intolerance / food hypersensitivity, occult parasitism, inflammatory bowel disease or low grade to mild pancreatitis both of which may present sonographically normal without evidence of mural changes or other. If not recently done a full CBC/Chem/UA and T4 may be considered to rule out underlying metabolic etiology.

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 DABVP (Canine and Feline)

Empirically, a limited antigen or hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Provable or Visbiome), antibiotic trial and as needed gastrointestinal support with assessment of clinical response may prove beneficial. Intestinal biopsies may be indicated if GI signs continue despite empirical therapy.

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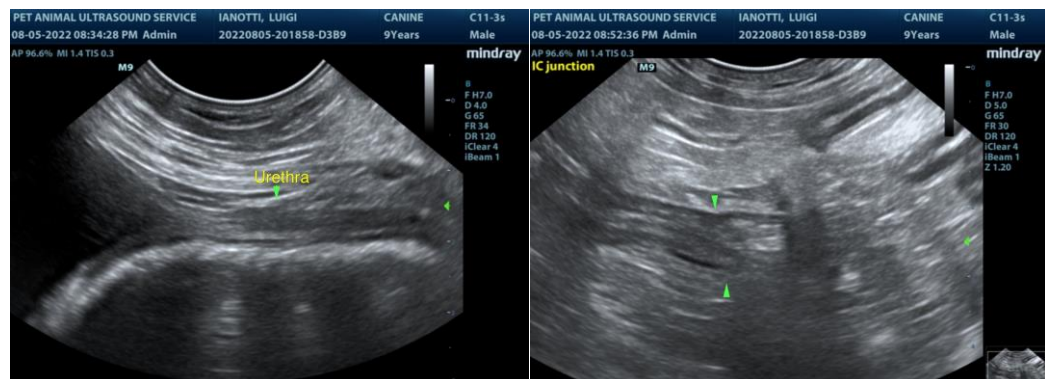
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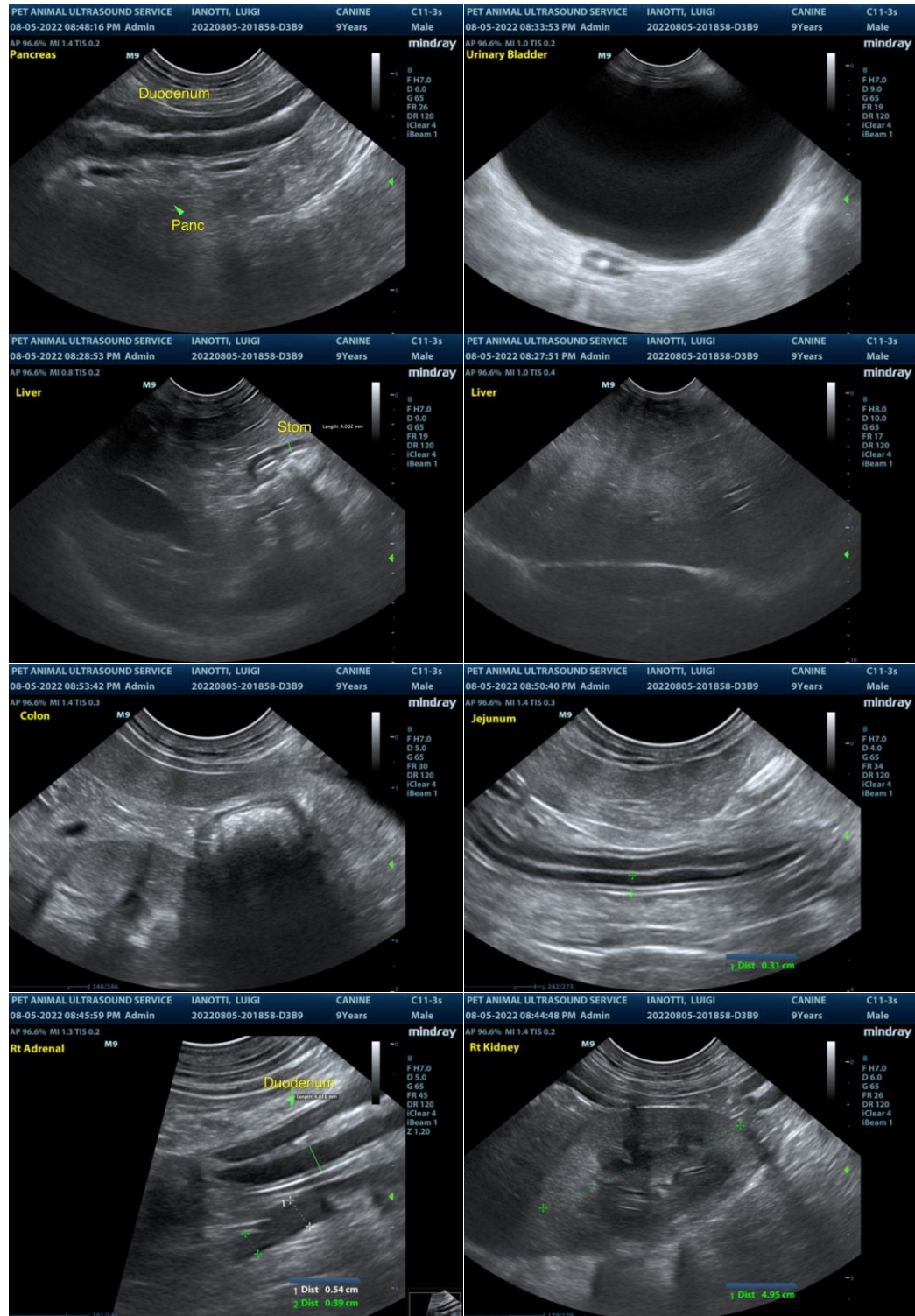
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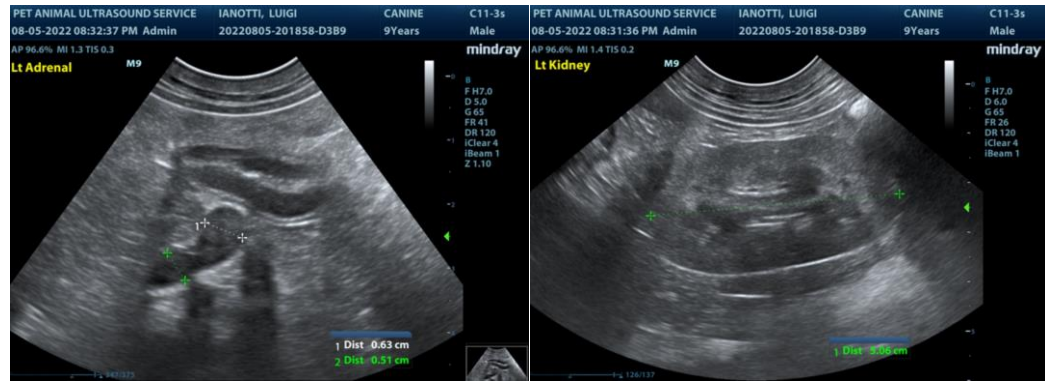
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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