



PATIENT	PRESENTING CLINICAL SIGNS
Caramelo Gutierrez	<p>History: History: in the last week Caramelo had difficulties at night, bumping into things, being wobbly, having difficulties jumping, owners think he may be in pain at hips. During the day he is walking normally. Lately, owners also noticed changes of Caramelo's behavior, he almost has a compulsion to walk, he avoids the owners, when he is sleeping all of a sudden he jumps up and he moves around. At night he appears disoriented. He lost weight, he used to be around 15 lbs. Water intake appears to be increased, appetite has been decreased in the last month, now he barely eats. Five months ago, while in Colombia, Caramelo had problems urinating, he had a PU surgery (unknown the type of the stones). Also, ALT was high, an abdominal ultrasound showed rounded margins of the liver, no other information provided. No coughing, sneezing, vomiting or diarrhea.</p> <p>Abnormal PE/Chem/CBC/UA Results: QAR, 5% dehydrated, DDZ gr 2, Muscle waste, CBC: 8/8/22 WBC: (24.8) H 6.00-17.00 , with neutrophilia (19.12) 3.62-12.30 CHEM: Calcium (15.6) H 9.0-12.2 Globulin (4.4) H 2.0-3.6 Albumin (2.4) L 2.5-4.0 ALT (286) H 0-120 EPOC: Calcium, ionized (1.76) H 1.13-1.42</p>
SPECIES	
Canine	
BREED	
Yorkie	<p>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</p> <p>Urinary System</p> <p>The cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. The urinary bladder exhibited variably thickened ventral apical and dorsal walls. Anechoic urine was present in the lumen with no uroliths or sediment. Pinpoint areas of luminal to potentially adhered mineral was present. The ureteral papillae were normal. The ureters were not visible which is normal.</p> <p>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 mild to moderate loss of corticomodullary symmetry and definition expected for the age of the patient. Bilateral small cortical cysts were present. No evidence of pelvic dilation was present. The left kidney measured 5.0 cm in length. The right kidney measured 5.1 cm in length.</p> <p>The area of the aortic trifurcation was free of pathology.</p> <p>The area of the residual prostate was indistinctly visualized.</p> <p>Adrenal Glands</p> <p>The bilateral adrenal glands were mildly prominent in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.48 cm width in the cranial pole and 0.60 cm width in the caudal pole. The right adrenal gland measured 0.72 cm width in the cranial pole and 0.67 cm width in the caudal pole.</p> <p>Spleen</p> <p>The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.</p> <p>Liver</p> <p>The liver was subjectively normal in size with areas of mild asymmetrical capsule contour. The liver parenchyma was nonuniform and hyperechoic to the spleen with a moderate coarse echotexture. A</p>
SEX	
MN	
AGE	
10yr	<p>WEIGHT</p> <p>12lb</p>
INTERPRETED BY	
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	
IMAGING PERFORMED BY	
Jose	<p>HOSPITAL NAME</p> <p>Elmhurst Animal Emergency Hospital</p>
REFERRING VET	
Dr. Suci	
INVOICE	
11334ag	<p>DATE</p> <p>08/09/2022</p>



PATIENT	solitary hypoechoic nodule measuring 2.2 cm in diameter was present. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was mildly distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
Caramelo Gutierrez	
SPECIES	Gastrointestinal
Canine	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 0.26 cm in width.
BREED	
Yorkie	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 0.40 cm in width. the jejunum wall measured 0.24 cm in width.
SEX	Normal visible colon wall layers were present with apparent formed feces in lumen.
MN	Pancreas
AGE	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
10yr	Free Abdomen
WEIGHT	No omental masses, overt lymphadenopathy or peritoneal effusion was present.
12lb	
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none"> • Variably thickened urinary bladder and potential proximal urethra, comma pinpoint urinary bladder adhered mineral • Chronic renal changes with pinpoint medullary mineral • Bilateral nonspecific prominent adrenal glands • Hepatopathy exhibiting nonuniform parenchyma hyperechogenicity and solitary nodule • Overtly normal GI tract
IMAGING PERFORMED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Jose	The overall appearance of the bladder may indicate chronic cystitis with concurrent mild mineral. The possibility of neoplastic criteria cannot be excluded. A cytospin cytology of free catch urine to assess for evidence of atypical transitional cells and urine C/S is recommended. A BRAF assay could be considered. Assuming normal clotting status hepatic parenchyma and nodule FNA using a 25g needle is warranted for cytology. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Three view chest radiographs suggested if not done to assess for thoracic pathology. A hypercalcemia panel may be indicated as well as rectal palpation to assess for occult disease as contributing factors.
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PATIENT

Caramelo Gutierrez

SPECIES

Canine

BREED

Yorkie

SEX

MN

AGE

10yr

WEIGHT

12lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst Animal
Emergency Hospital

REFERRING VET

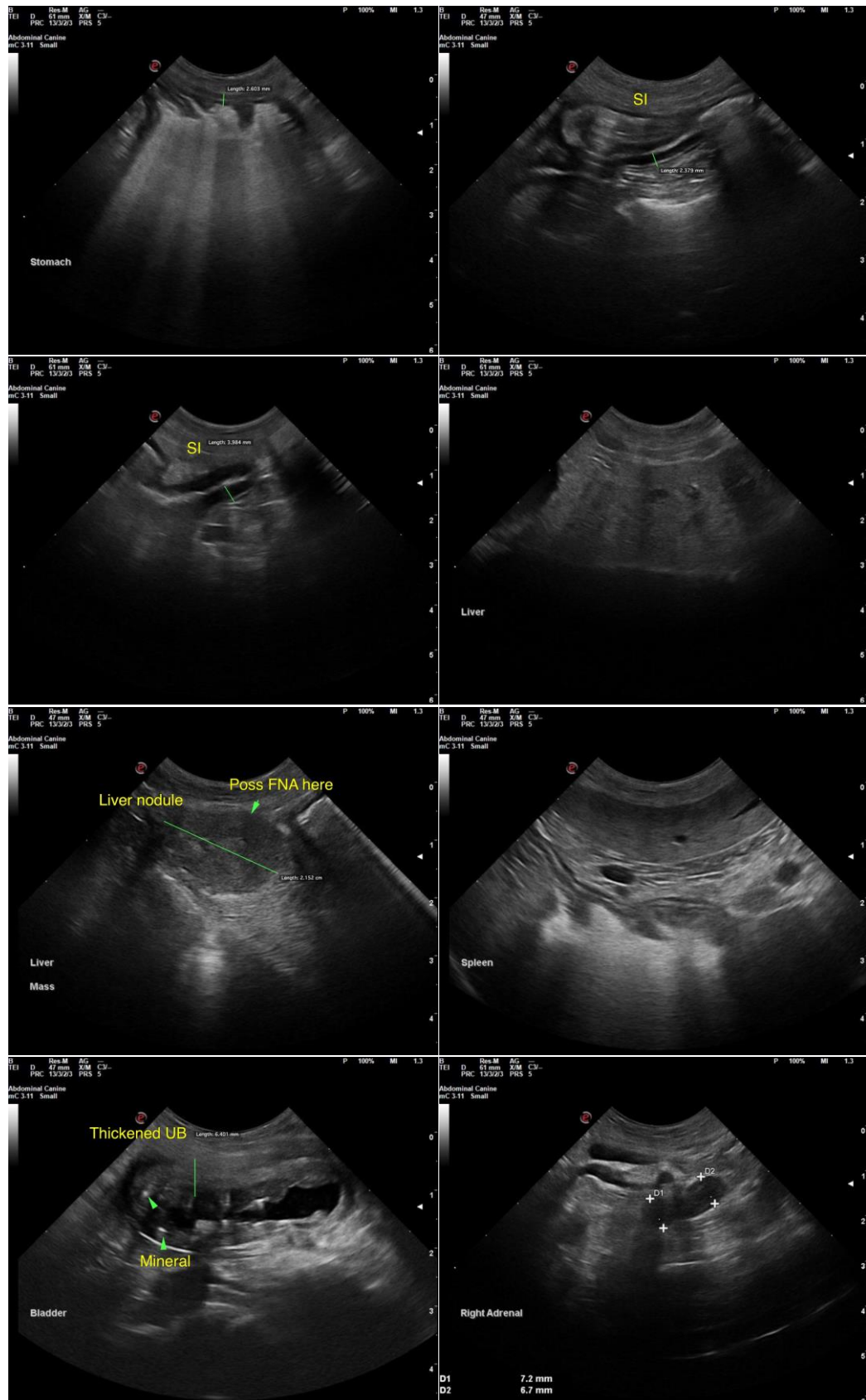
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PATIENT

Caramelo Gutierrez

SPECIES

Canine

BREED

Yorkie

SEX

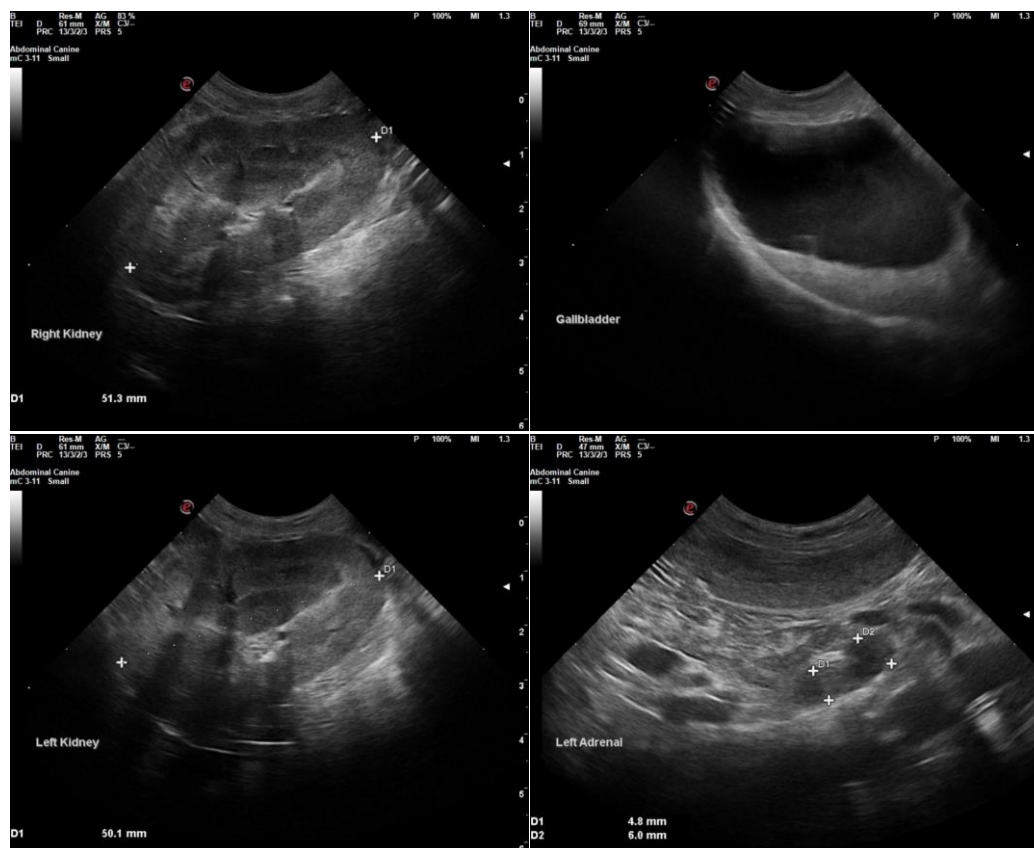
MN

AGE

10yr

WEIGHT

12lb



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

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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