

PATIENT PRESENTING CLINICAL SIGNS

Bentley Knott diarrhea: open-stress vs IBD vs neoplasia vs food allergy vs parasites vs other PU/PD: open-cushings vs behavioral vs UTI vs DM vs other separation anxiety

SPECIES Urinary System

Canine 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 was noted.

BREED
Australian Shepherd No evidence of pathology was noted in the area of the residual prostate or aortic trifurcation.

SEX
Neutered Male 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. Pinpoint medullary mineralization was present in both kidneys. No evidence of pelvic dilation was present. The left kidney measured 7.5 cm in length. The right kidney measured 7.7 cm in length.

AGE
--

Adrenal Glands

WEIGHT
72 lbs. The left adrenal gland was normal in size with generalized mildly nonhomogeneous parenchyma. A subtly echogenic, non-expansive nodule in the cranial left adrenal gland was present, measuring 0.85 cm x 0.57 cm. The left adrenal gland itself measured 1.0 cm width in the cranial pole and 1.0 cm width in the caudal pole.

INTERPRETED BY
R. McKenzie Daniel, DVM, DABVP (Canine and Feline) The right adrenal gland exhibited subjective mild mid to cranial enlargement with generalized mildly nonhomogeneous parenchyma. The right adrenal gland measured 1.3 cm width in the cranial pole and 0.78 cm width in the caudal pole. No overt mineralization associated with the left or right adrenal glands was noted.

IMAGING PERFORMED BY
Loetitia Saint-Jacques, RVT

Spleen

HOSPITAL NAME
Donner Truckee VH 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.

REFERRING VET

Dr. India Vannini

Liver/ Gallbladder

INVOICE
12209 The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform. The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

DATE
9/11/21



PATIENT ***Gastrointestinal***

Bentley Knott 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.

SPECIES The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild, nonobstructive duodenal ileus was present. The duodenum wall width measured 0.42 cm. The jejunum wall width measured 0.42 cm.
Canine

BREED Normal visible colon wall layers were present with subjective semi-formed to soft feces in lumen.

Australian Shepherd ***Pancreas***

SEX 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 were evident.
Neutered Male

Free Abdomen

AGE No overt lymphadenopathy or peritoneal effusion was present.
--

ULTRASONOGRAPHIC FINDINGS

Primary Findings

WEIGHT

72 lbs.

- Mild age-related kidneys with pinpoint medullary mineralization
- Mild right cranial adrenomegaly with nonspecific left adrenal nodule
- Subjective vacuolar hepatopathy pattern
- Probable mild enterocolitis - possible inflammatory bowel

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

The left adrenal nodule is suggestive of benign adenoma, although the possibility of emerging adrenal neoplasia cannot be definitively excluded.

HOSPITAL NAME

Donner Truckee VH

LDDST is recommended if clinical concern for Cushing's Disease. Given the PU/PD, additional diagnostics may include urine C/S and baseline UPC on a sterile urine sample +/- Leptospirosis titers / PCR if clinically indicated. Sonographic monitoring of both the left and right adrenal glands with initial recheck in 4-6 weeks is recommended.

REFERRING VET

Dr. India Vannini

The appearance of the gastrointestinal tract was non-specific with considerations including dietary intolerance / food hypersensitivity, occult parasitism, infectious enterocolitis, inflammatory bowel disease without evidence of mural changes or other. A GI panel to include PLI/TLI/Cobalamin/Folate, fresh fecal analysis to assess for parasitic ova / Giardia. 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.

INVOICE

12209

DATE

9/11/21



PATIENT

Bentley Knott

SPECIES

Canine

BREED

Australian Shepherd

SEX

Neutered Male

AGE

--

WEIGHT

72 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Donner Truckee VH

REFERRING VET

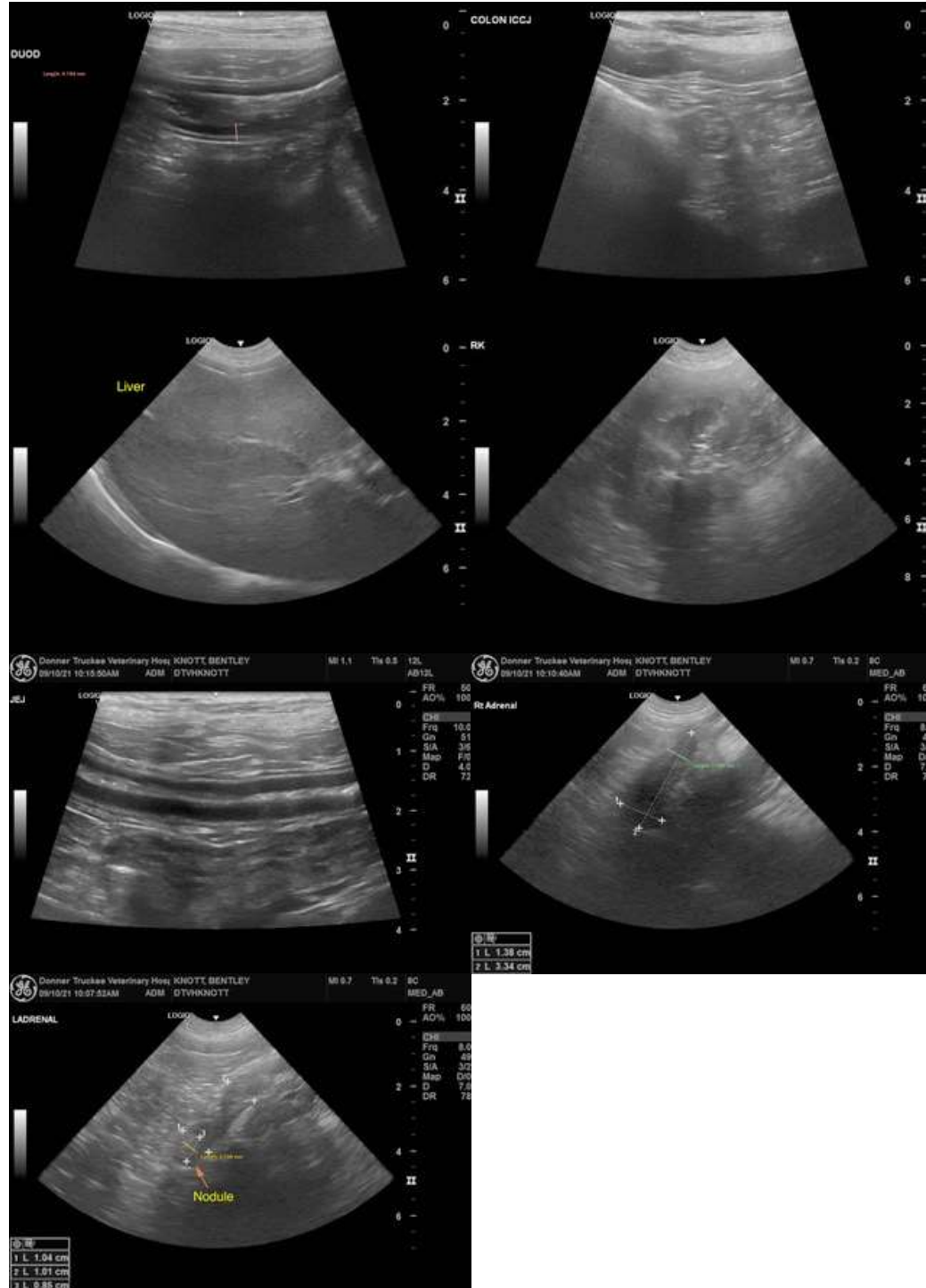
Dr. India Vannini

INVOICE

12209

DATE

9/11/21



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



PATIENT visible in the image/video clips provided.

Bentley Knott 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.

SPECIES

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

BREED

Australian Shepherd

SEX

Neutered Male

AGE

--

WEIGHT

72 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Donner Truckee VH

REFERRING VET

Dr. India Vannini

INVOICE

12209

DATE

9/11/21