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| PATIENT | PRESENTING CLINICAL SIGNS |
| Bella Bradshaw | Intermittent gas-distension and abdominal discomfort and loose stool starting around August 16. Weight loss with good appetite. Light brown watery diarrhea starting 9/11, vomited once this morning. Last ate 9/11 afternoon. |
| SPECIES | Abnormal PE/Chem/CBC/UA Results: cbc/chem all wnl fecal pending - nothing on direct GI panel pending |
| Canine | |
| BREED | ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN |
| Shepherd X | Urinary System |
| SEX | 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 were noted. |
| Spayed Female | |
| AGE | The area of the aortic trifurcation was free of pathology. |
| 4 Years | 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 with no evidence of pelvic dilation. The right kidney measured 6.4 cm. The left kidney measured 5.9 cm. |
| WEIGHT | Adrenal Glands |
| 21.5 kg | The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm at the cranial pole and 0.42 cm at the caudal pole. The right adrenal gland measured 0.40 cm at the caudal pole. |
| INTERPRETED BY | Spleen |
| Beth Johnson, DVM DACVIM | 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. |
| IMAGING PERFORMED BY | Liver |
| Dr. Anna Wepprich | 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. |
| HOSPITAL NAME | Gastrointestinal |
| Wilvet Salem | The stomach presented intact wall layering with a normal wall layer ratio. Mild non-shadowing ingesta/chyme present along with luminal gas. No evidence of gastric distention. Ventral gastric body wall measured 0.42 cm. |
| REFERRING VET | The small intestine presented intact wall layering with maintained 1:3 muscularis/mucosa ratio. No evidence of mechanical/metabolic ileus. Intermittent minor mucosa speckling noted. Duodenum wall measured 0.55 cm. Jejunum wall measured 0.40 cm. |
| Dr. Anna Wepprich | |
| INVOICE | The colon walls presented intact yet mildly prominent descending colon wall layering. Nonformed to liquid fecal matter was present in the descending colon. Descending colon wall measured 0.23 cm. |
| 41251 | |
| DATE | |
| 9/12/22 | |



PATIENT

Bella Bradshaw

Pancreas

SPECIES

Canine

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.

BREED

Shepherd X

Free Abdomen

Intermittent mildly prominent to enlarged mesenteric node were present, example measured 0.7 cm in width x 2.5 cm length. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

- Mild colitis pattern
- Intermittent benign/reactive mesenteric lymph nodes

AGE

4 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

21.5 kg

Overall, no evidence of significant visceral (specifically gastroenterocolic) structural pathology. Dietary intolerance/food allergy, dysbiosis, occult parasitism (even with negative fecal testing), IBD, mild to low-grade pancreatitis, both of which may present sonographically normal, or less likely early infiltrative intestinal neoplasia are all potentials. Occult Addison's disease is considered a less likely potential, given subjective normal adrenal presentation.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Further assessment may include pending GI panel +/- resting cortisol level. Pending GI panel results, hydrolyzed diet trial with potential long-term dietary therapy, prophylactic deworming i.e., Panacur 50 mg/kg PO SID for 5 consecutive days with potential repeat protocol in 3 weeks, high colony count probiotic, +/- empirical cobalamin supplementation pending GI panel, and/or antibiotic therapy (if clinically indicated) with as needed gastrointestinal support and monitoring of clinical response would be reasonable. Upper and lower endoscopic intestinal biopsies may ultimately be indicated.

IMAGING PERFORMED BY

Dr. Anna Weprich

HOSPITAL NAME

Wilvet Salem



REFERRING VET

Dr. Anna Weprich

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PATIENT

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SPECIES

Canine

BREED

Shepherd X

SEX

Spayed Female

AGE

4 Years

WEIGHT

21.5 kg

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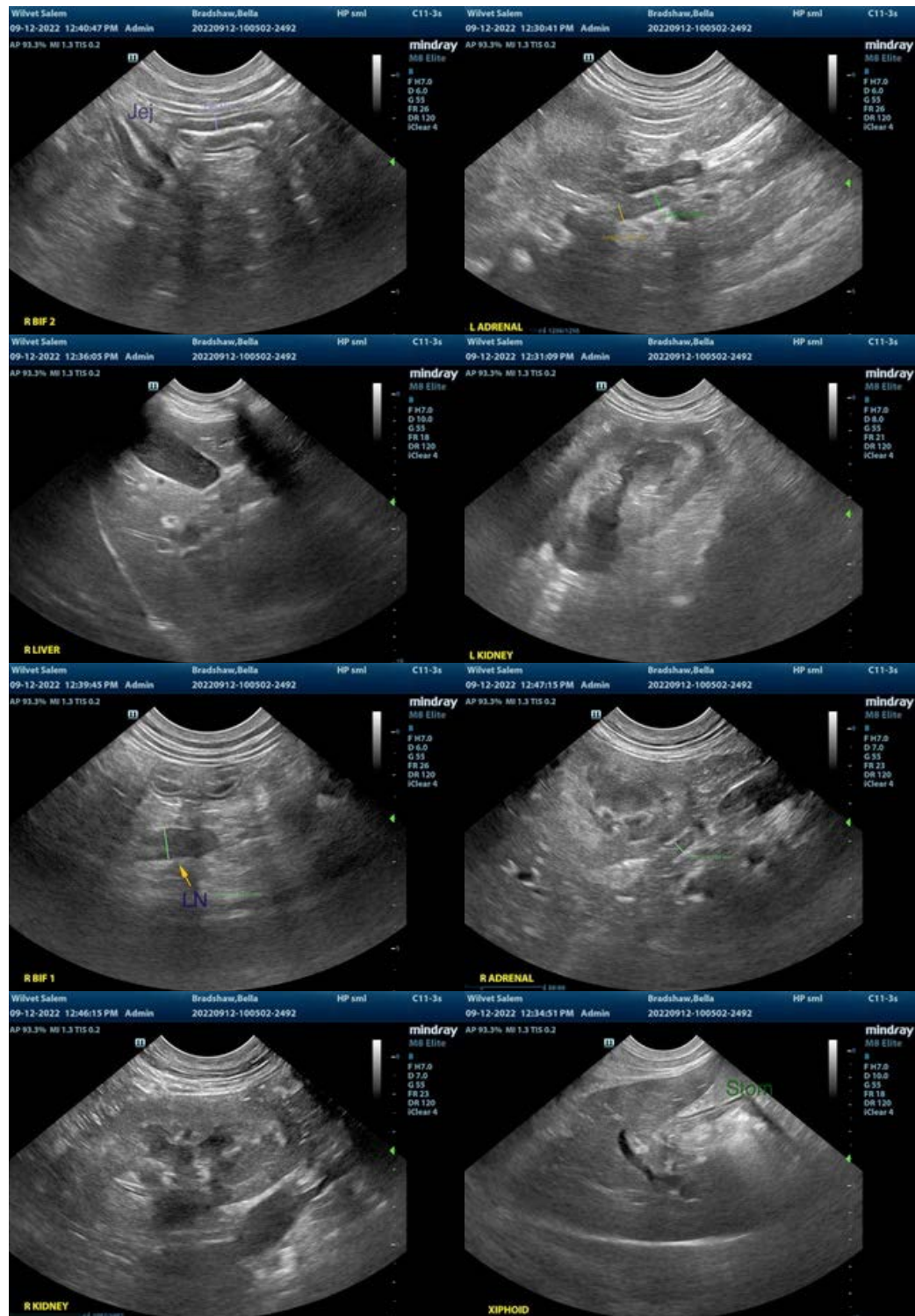
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Shepherd X

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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)

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