



PATIENT	PRESENTING CLINICAL SIGNS
Hayley Holmes	Recurrent diarrhea last 60 days variable severity comes in bouts. Patient sedated butorphanol and medazalam for scan
SPECIES	Abnormal PE/Chem/CBC/UA Results: Blood work non diagnostic diarrhea panel negative No ovum or parasites done.
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Shep X	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.
FS	
AGE	The area of the aortic trifurcation was free of pathology.
10	
WEIGHT	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 left kidney measured 5.2 cm in length. The right kidney measured 6.5 cm in length.
30.4 kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.62 cm width at the caudal pole and 0.53 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 0.48 cm width at the caudal pole and 0.62 cm width at the cranial pole.
IMAGING PERFORMED BY	Spleen
Dr. Belan	The spleen was subjectively normal in size with primarily maintained capsule contour. Generalized mild parenchymal heterogeneity was present exhibiting multiple discrete hypoechoic nodules with an example measuring 0.6-0.8 cm in diameter. The discrete splenic nodules were non-expansive and did not distort the splenic capsule. Normal splenic vascularity was noted.
HOSPITAL NAME	Liver/ Gallbladder
Dewinton Pet Hosp	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. A solitary thinly walled intraparenchymal cyst was present measuring 2.0 cm in diameter. The gallbladder was non-distended in size containing with mild, nonorganized gallbladder debris in the caudal lumen and gallbladder neck. The gallbladder and peripheral gallbladder were otherwise sonographically normal. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Pazej	
INVOICE	
14860	
DATE	
9/13/22	



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DVM, DABVP
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**IMAGING
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Gastrointestinal

The visualized gastric walls were sonographically normal. The lumen of the stomach contained moderate, nonshadowing ingesta most consistent with post prandial presentation without signs of ileus, obstruction or foreign material. The ventral gastric body wall width measured 0.30 cm. No overt obstructive pathology was noted at the level of the pyloric outflow.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Segmental duodenojejunal nonshadowing ingesta / chyme as present. Otherwise, the small intestine was normal. The duodenum wall measured 0.5 cm width. The jejunum wall measured 0.44 cm width.

Normal visible colon wall layers were present with semi-formed to soft fecal matter.

Pancreas

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Overtly normal gastrointestinal tract with gastric and segmental intestinal ingesta / chyme
- Sonographically unremarkable colon containing semi-formed / soft fecal matter
- Multiple discrete hypoechoic splenic nodules

Secondary Findings

- Solitary benign hepatic cyst
- Mild gallbladder debris

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence of structural gastroenterocolic pathology was present.

At times, the gastroenterocolic sonographic presentation does not always correlate with chronic to recurrent gastrointestinal signs. Considerations in this case may include; dietary intolerance/ food hypersensitivity, dysbiosis, occult parasitism even with a negative fecal exam, low-grade to chronic pancreatitis or IBD, which may present as sonographically normal, or less likely infiltrative neoplasia. Further assessment may include a GI panel to include PLI/TLI/Cobalamin/Folate.

Although considered unlikely, resting cortisol level to rule out occult Addison's Disease is warranted.

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



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if clinically indicated, with as-needed gastrointestinal support and assessment of clinical response may prove beneficial. Endoscopic intestinal biopsies may be considered if GI signs continue despite empirical therapy and additional diagnostics.

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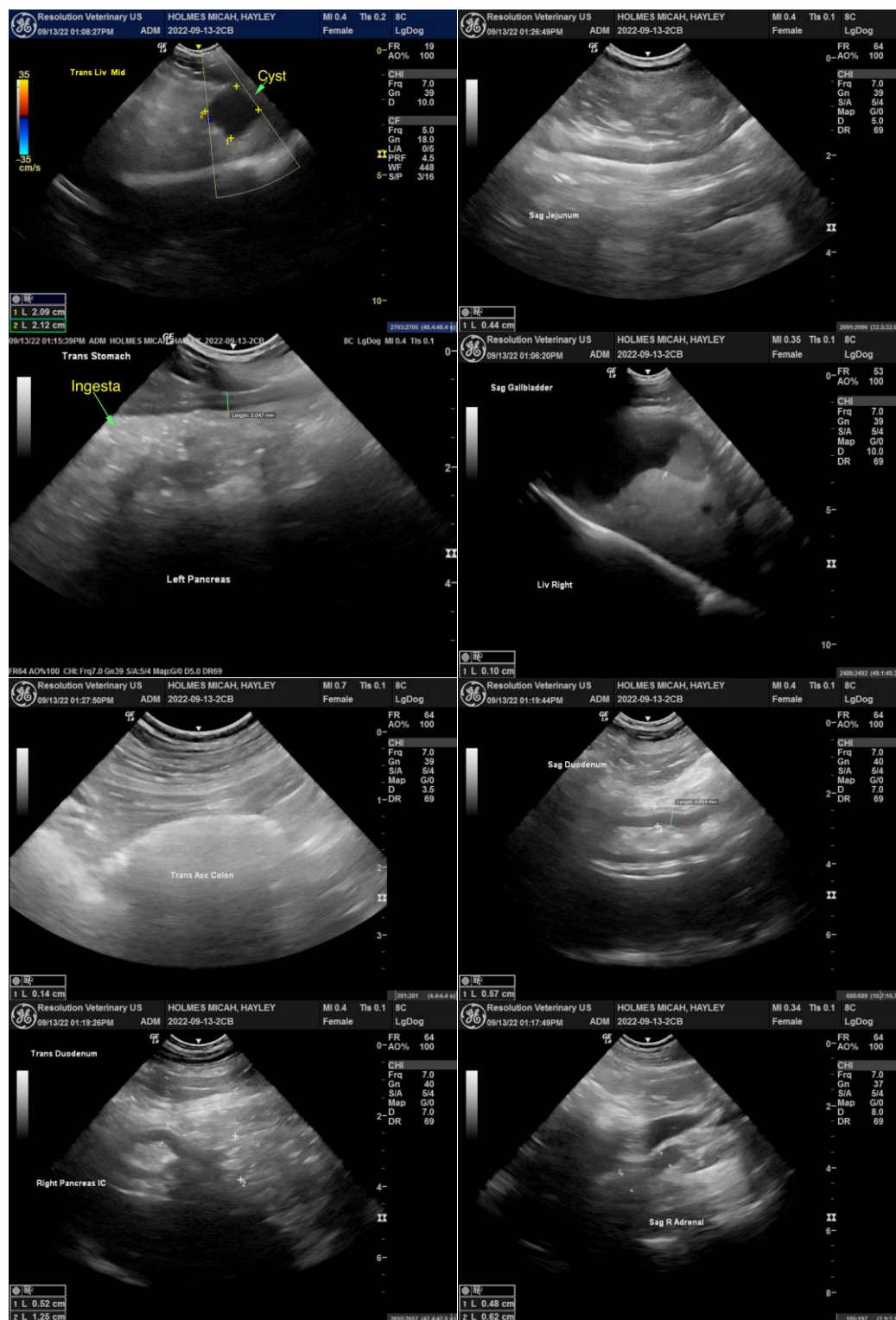
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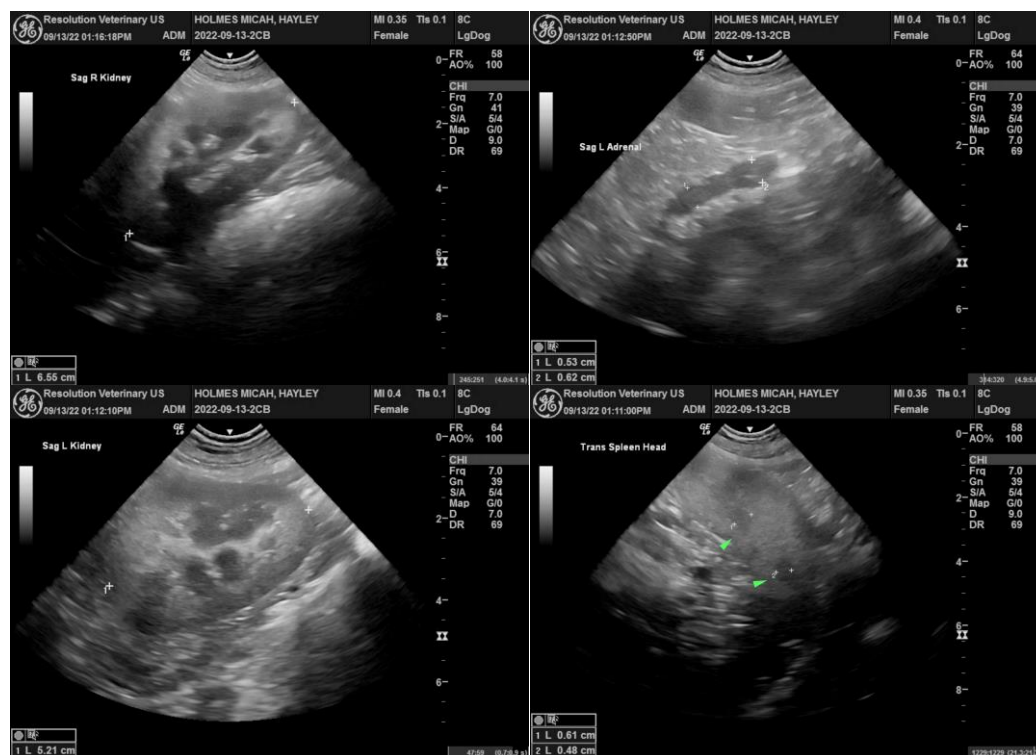
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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