

PATIENT PRESENTING CLINICAL SIGNS

Cooper Serra Persistently elevated WBC over past month and general ADR that had been managed on Zeniquin and Carprofen until he crashed last Thursday. Despite SQ fluids and Unasyn WBC count has elevated. Hyporexia is intermittent but appears to be improved on Cerenia. Currently also on Clavamox 125 mg.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shih Tzu

The urinary bladder 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.

SEX

Neutered Male

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture. The prostate measured 0.72 cm in width.

AGE

11 Years

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 loss of corticomedullary symmetry and definition expected for the age of the patient. Minor pyelectasia was noted in both kidneys. The right kidney measured 3.7 cm. The left kidney measured 3.6 cm. Pinpoint dystrophic medullary mineralization was present in both kidneys.

The area of the aortic trifurcation was free of pathology.

WEIGHT

12 Pounds

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. Potential for pinpoint dystrophic mineral noted in the caudal right adrenal pole. The right adrenal gland measured 0.44 cm at the cranial pole and 0.57 cm at the caudal pole. The left adrenal gland measured 0.52 cm at the cranial pole and 0.72 cm at the caudal pole.

INTERPRETED BY

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

Spleen

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

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.

HOSPITAL NAME

Wood River AH

Liver

REFERRING VET

Dr. David Serra

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with minor particulate debris. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

INVOICE

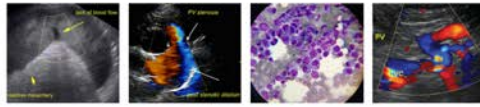
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The stomach exhibited intact yet subjective mild prominent walls. Pylorus wall measured 0.54 cm. Gastric body wall measured 0.40 cm. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

DATE

9/20/21

The small intestine presented intact wall layering with subjective maintained 1:3 muscularis/mucosa ratio. Intermittent duodenojejunal mucosal speckling present. Duodenum wall measured 0.40 cm.



PATIENT

Cooper Serra

Jejunum wall measured 0.38 cm. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with subjective semiformal to potentially soft feces. Colon wall measured 0.17 cm.

SPECIES

Canine

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 was evident.

BREED

Shih Tzu

Free Abdomen

No intraabdominal or omental masses, lymphadenopathy, abscess, or effusion.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Probable gastritis/gastroenteritis
- Bilateral age related kidneys with pinpoint dystrophic medullary mineral and mild bilateral pyelectasia

AGE

11 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Potential for bilateral low-grade pyelonephritis possible, yet considered a less likely differential. Urine C/S and protein: creatinine ratio on sterile urine sample is recommended.

WEIGHT

12 Pounds

INTERPRETED BY

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 DABVP (Canine and Feline)

Overall, an obvious cause of the elevated to increasing white blood cell count and patient's clinical signs (aside from the suspected gastritis to gastroenteritis) was not definitively evident. As-needed gastrointestinal support recommended. 3-view chest radiographs suggested if not done to rule out concurrent occult thoracic pathology.

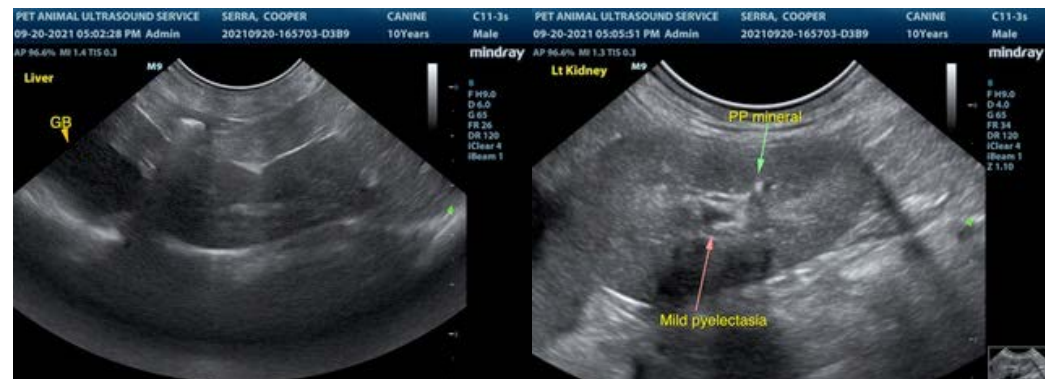
IMAGING PERFORMED BY

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Infectious disease serology may be considered if clinically indicated. CBC pathology review for further assessment of the leukocytosis is suggested.

HOSPITAL NAME

Wood River AH



REFERRING VET

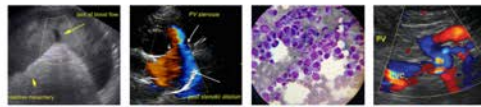
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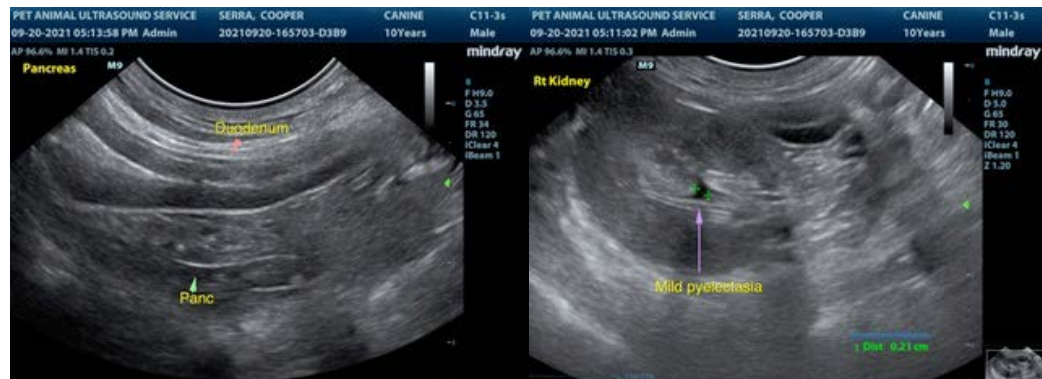
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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