**PATIENT**

Nimzie Shoot

**PRESENTING CLINICAL SIGNS**

History: Presented for continued hospitalization for pancreatitis from AEC. Has had recurrent bouts of gastroenteritis/diarrhea throughout the summer.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Azotemia, elevated alk phos, abnormal cpl

**BREED**

Schnoodle

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN*****Urinary System***

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. Aortic trifurcation was normal.

**SEX**

Spayed Female

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pyelectasia was present or overt pyelonephritis. The left kidney measured 3.9 cm in length. The right kidney measured 3.9 cm in length.

**AGE**

11 Years

***Adrenal Glands*****WEIGHT**

15 Pounds

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.7 cm length x 0.49 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.6 length x 0.42 cm width at the caudal pole.

**INTERPRETED BY**

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

***Spleen***

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout primarily medial parenchyma around the hilus. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

**IMAGING PERFORMED BY**

Sarah Pender, CVT

***Liver***

The liver exhibited subjective mild enlargement. 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 echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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***Gastrointestinal***

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate retained echogenic with subtle progressive distal acoustic shadowing ingesta without signs of obstruction or foreign material. The visualized gastric walls were sonographically unremarkable without evidence of mural hypertrophy or mechanical pyloric outflow obstruction. The pylorus wall measured 0.42 cm.

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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 0.39 cm. The jejunum wall measured 0.46 cm.

**SPECIES**

Canine

Normal visible colon wall layers were present with apparent formed feces in lumen.

***Pancreas*****BREED**

Schnoodle

The pancreas base and right pancreatic limb presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.

**ULTRASONOGRAPHIC FINDINGS****SEX**

Spayed Female

**Primary Findings**

- Persistent subjectively mild to moderate pancreatitis with reactive peripancreatic mesentery
- Possible concurrent inflammatory enteropathy
- Gastric ingesta – postprandial presentation, potential for metabolic gastric stasis if documented NPO

**AGE**

11 Years

**Secondary Findings**

- Mild subjective hepatomegaly with mild gallbladder debris (non-mucocele-subjectively benign)

**WEIGHT**

15 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****INTERPRETED BY**R. McKenzie Daniel, DVM,  
DABVP (Canine and Feline)

Subjectively, the kidneys did not appear to be end stage. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. A GI panel to include PLI/TLI/cobalamin/folate may be considered given the patients recurrent bouts of gastrointestinal signs. Empirically, continued appropriate therapy for persistent mild to moderate pancreatitis and as needed gastrointestinal support which may include bland, low fat or hydrolyzed diet, appropriate antibiotics, high colony count probiotics (such as Provable) and empirical deworming (i.e., Panacur at 50 mg per kg POSID) for at least 5 consecutive days recommended.

**IMAGING PERFORMED BY**

Sarah Pender, CVT

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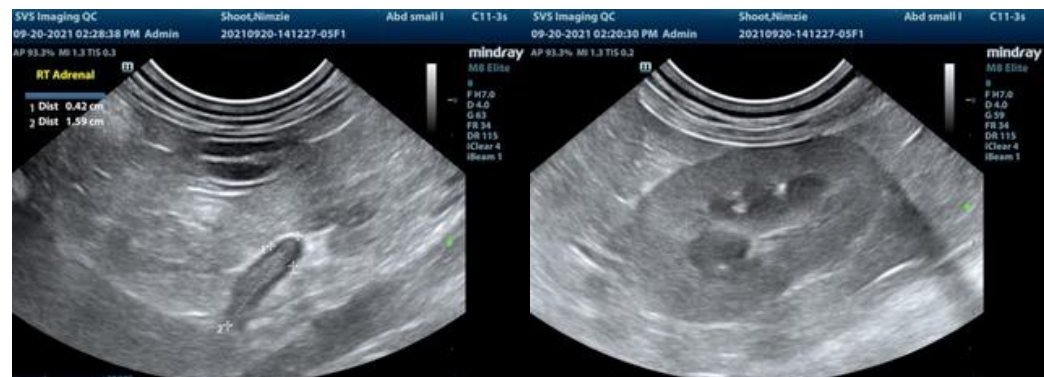
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**PATIENT**

Nimzie Shoot

**SPECIES**

Canine

**BREED**

Schnoodle

**SEX**

Spayed Female

**AGE**

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**WEIGHT**

15 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

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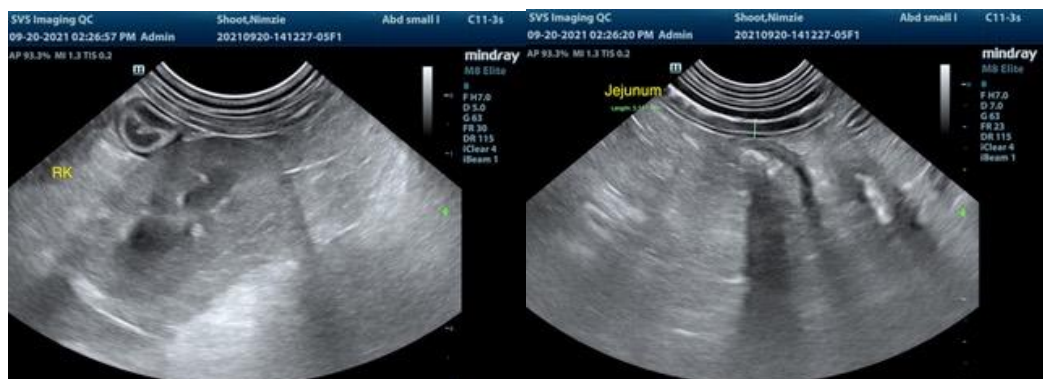
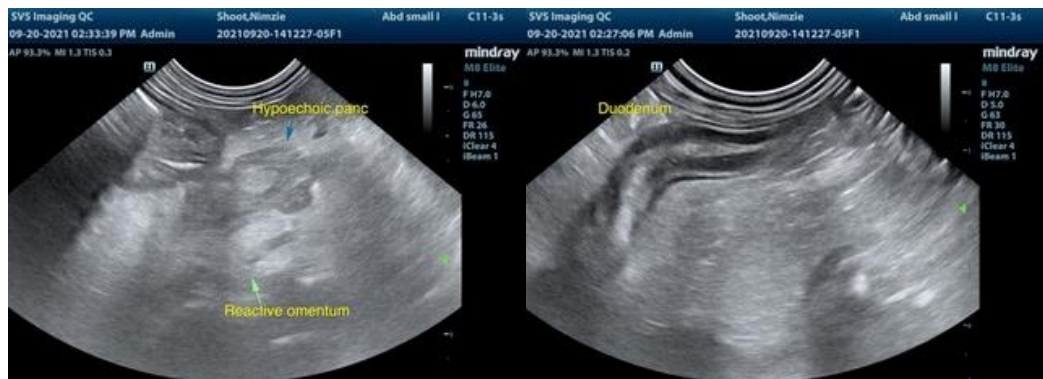
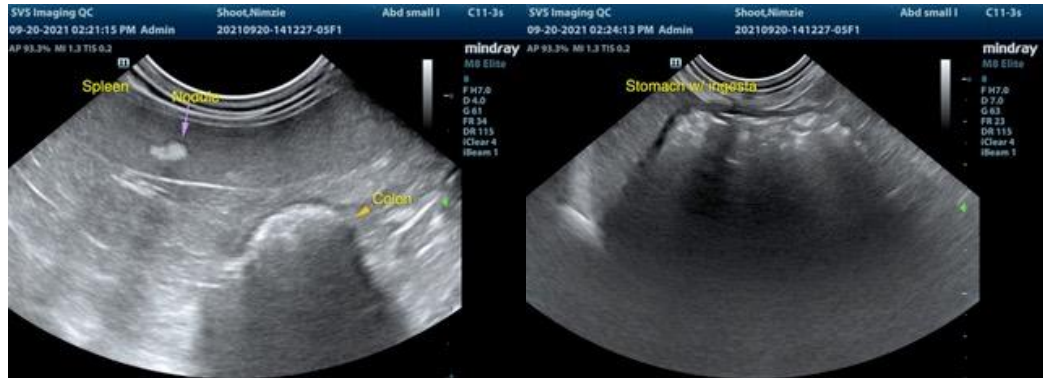
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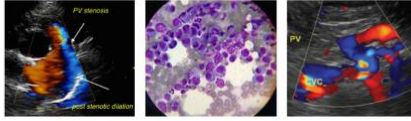
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**PATIENT**

Nimzie Shoot

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.

**SPECIES**

Canine

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

**BREED**

Schnoodle

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

15 Pounds

**INTERPRETED BY**

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