



PATIENT

Jasmine Van Wert

PRESENTING CLINICAL SIGNS

Blood work performed 8/23/22 elevated TP/albumin, alkaline phosphatase, total bilirubin. History of vomiting and diarrhea. Currently has yellow mucous occasionally on stools and will vomit bile-tinged fluid when stomach empty.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: LABS attached

BREED

Chiweenie

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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

14 Yrs

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. No evidence of pelvic dilation was present. Pinpoint medullary mineral was present. The left kidney measured 3.2 cm in length. The right kidney measured 3.2 cm in length.

WEIGHT

13.2 lbs

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 cm width at the caudal pole and 0.42 cm width at the cranial pole.

INTERPRETED BY

R. McKenzie Daniel, DVM,
DABVP (Canine and

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.53 cm width at the caudal pole and 0.47 cm width at the cranial pole.

IMAGING PERFORMED BY

Spleen

Loetitia Saint-Jacques, RVT

The spleen exhibited a finely textured. Potential indistinctly visualized focal hyperechoic splenic parenchyma was noted, which may suggest emerging benign myelolipomas. No evidence of splenic neoplastic criteria. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

HOSPITAL NAME

Sierra Animal Wellness
Center

Liver/ Gallbladder

REFERRING VET

Dr. Peggy Roberts

The liver revealed mild generalized enlargement and maintained symmetrical capsule contour. Generalized mild parenchyma hyperechogenicity with intermittent nondisruptive mildly hypoechoic intraparenchymal nodules, an example measured 2.0 cm in diameter.

INVOICE

17405

The gallbladder was non-distended in size with mild nondependent congealed yet nonorganized luminal debris. The cystic duct and common bile ducts were normal without evidence of dilation. No evidence of gallbladder or peripheral gallbladder inflammation.

DATE

9-21-22

Gastrointestinal



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate ingesta, consistent with reported postprandial presentation, without signs of obstruction or foreign material. The ventral gastric body wall measured 0.28 cm.

SPECIES

Canine

The small intestine presented intact yet subjective mildly prominent wall layering. The lumen of the small intestine contained minor segmental ingesta/chyme. The duodenum wall measured 0.35 cm. The jejunum wall measured 0.28 cm.

BREED

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The colon exhibited intact yet subtly prominent wall layering. The colon contained semi-formed to possible soft fecal matter. The colon wall measured 0.20 cm in wall width.

SEX

FS

Pancreas

The pancreas was normal in size and contour with heterogeneous to subtly hypoechoic pancreas parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

AGE

14 Yrs

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

13.2 lbs

- Mild hepatomegaly, exhibiting echogenic to intermittent discreet nodular parenchyma-probable vacuolar hepatopathy/vacuolar hepatitis, potential for inflammatory/immune mediated disease, nodular to regenerative hyperplasia, hematopoiesis or small granulomas. Neoplastic criteria is considered unlikely.

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DABVP (Canine and

- Mild congealed gallbladder debris (non-mucocele)
- Gastric ingesta- consistent with reported postprandial presentation
- Intact yet minor prominent small bowel walls, suspect low-grade colitis
- Mild heterogeneous to hypoechoic pancreas- patient/age-related variant, potential for low grade pancreatitis is possible
- Bilateral mild chronic renal changes

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potential for low grade IBD/colitis and/or low-grade chronic pancreatitis is possible in this patient, if recurrent gastrointestinal signs and evidence of diarrhea. Novel protein or hydrolyzed diet trial with high colony count probiotic is recommended. Assuming normal clotting status, screening hepatic FNA cytology could be considered. Hepatosupportive medications, including Denamarin and Ursodiol may prove beneficial.

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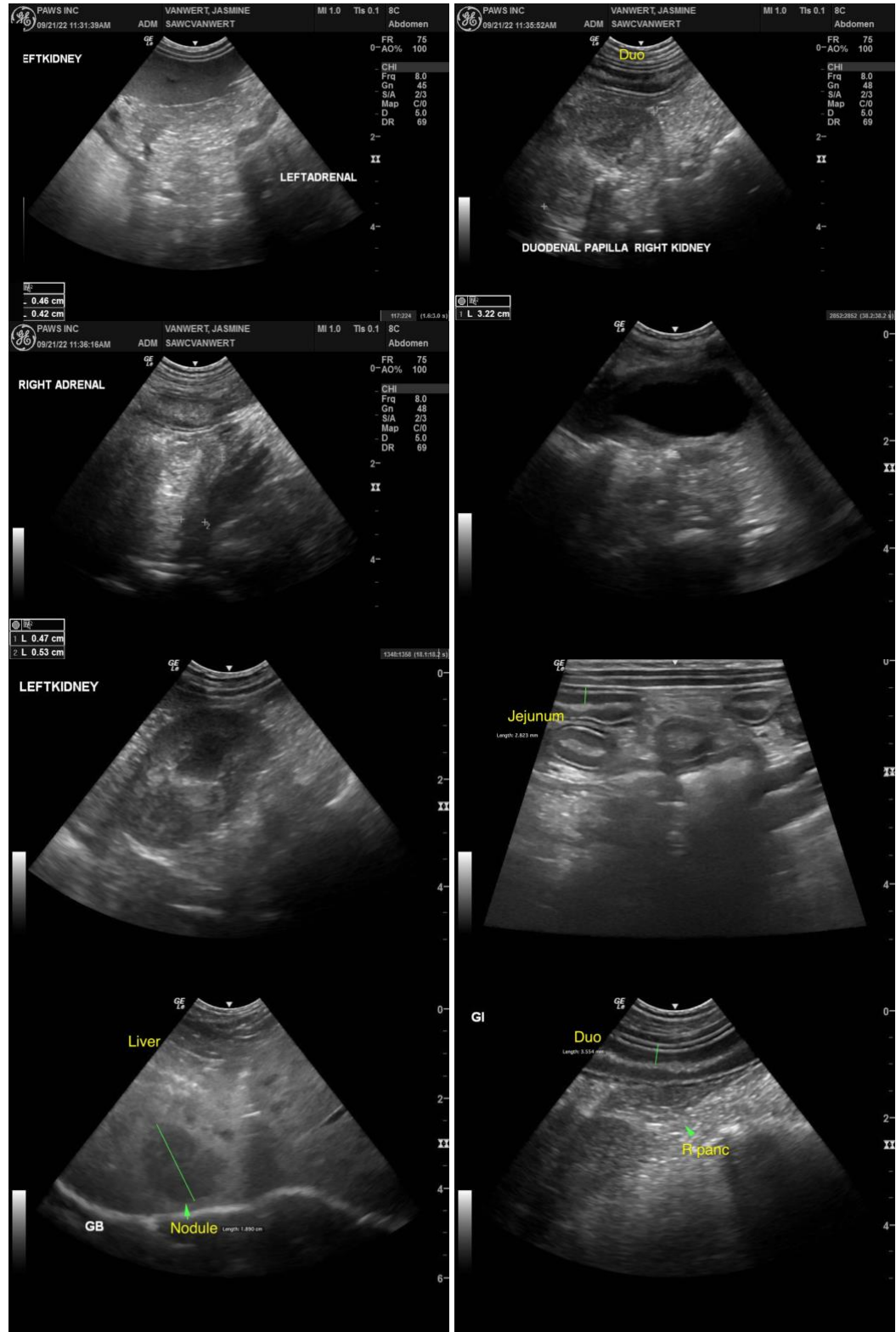
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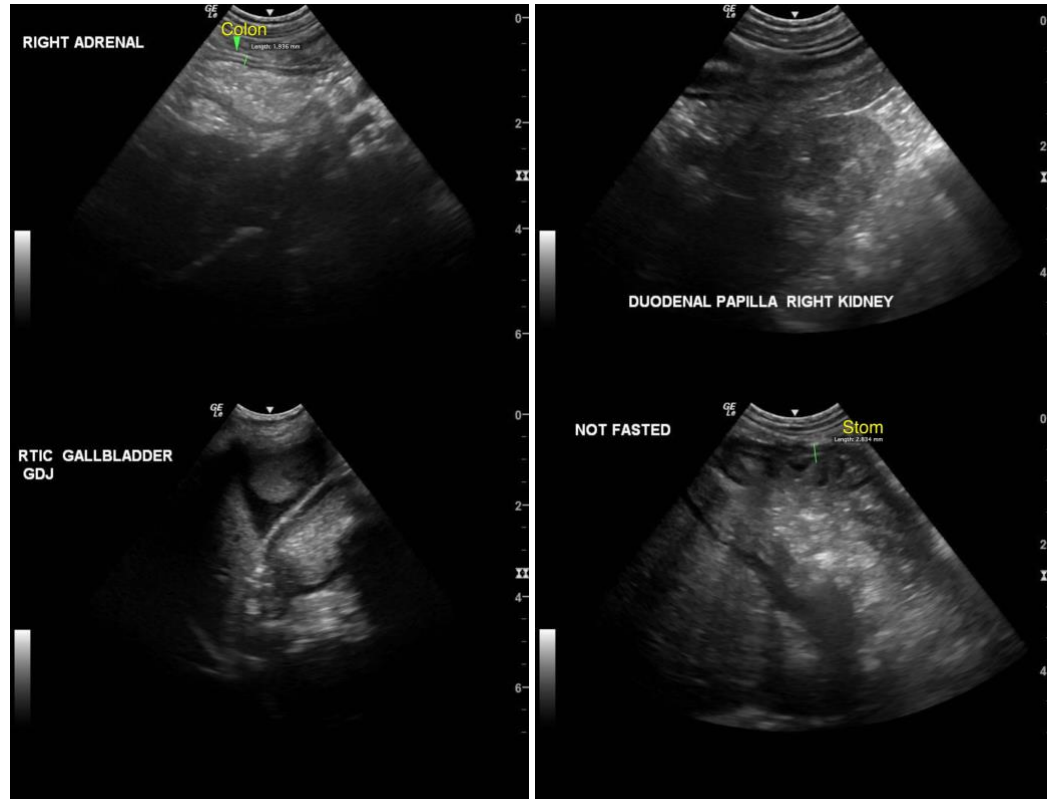
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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