


PATIENT PRESENTING CLINICAL SIGNS

Lola Ramirez Vomiting off and on since April 2021, poor appetite. Occasional diarrhea. On PVD HA diet. No meds currently.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

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 were noted.

BREED

Jack Russell Terrier

SEX

Spayed Female

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 3.2 cm. The right kidney measured 3.8 cm.

AGE

2 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.54 cm at the cranial pole and 0.38 cm at the caudal pole. The right adrenal gland measured 0.44 cm at the cranial pole and 0.26 cm at the caudal pole.

WEIGHT

5.2 kg

Spleen

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.

INTERPRETED BY

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

Liver

The liver exhibited potential for mild subnormal size. 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.

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Westoak AH

Gastrointestinal

The stomach presented mild wall thickening secondary to mild mucosal hypertrophy. Intact wall layering was maintained and distinct. Minor retained anechoic fluid was present. Gastric body wall measured 0.35 cm.

REFERRING VET

Dr. Fisher

The small intestine presented intact wall layering with segmental propensity for mildly prominent to echogenic submucosa as well as segmentally prominent muscularis layer. Areas of subjective mild mucosa hypertrophy were also noted segmentally. No evidence of loss of intestinal wall layering, masses, or intussusception. Duodenum wall measured 0.42 cm. Jejunum wall measured 0.44 cm.

INVOICE

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Normal visible colon wall layers were present with nonformed to semiformed feces.

DATE

9/22/21



PATIENT *Pancreas*

Lola Ramirez 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.

SPECIES

Canine

PRIMARY FINDINGS

- Enteropathy – probable IBD versus other enteropathy

BREED

Jack Russell Terrier

SECONDARY FINDINGS

- Potential mild subnormal liver size – non-specific, likely patient variant.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Spayed Female

The small intestine exhibited mural changes suggestive of inflammatory enteropathy with primary concern for inflammatory bowel disease. Further assessment may include GI panel to include PLI, TLI, cobalamin and folate. Intestinal biopsies are recommended for definitive diagnosis via histopathology.

AGE

2 Years

The potential for mild subnormal liver size is likely a patient variant without overt evidence of a portosystemic shunt. Correlation with full CBC/Chem panel and urinalysis suggested.

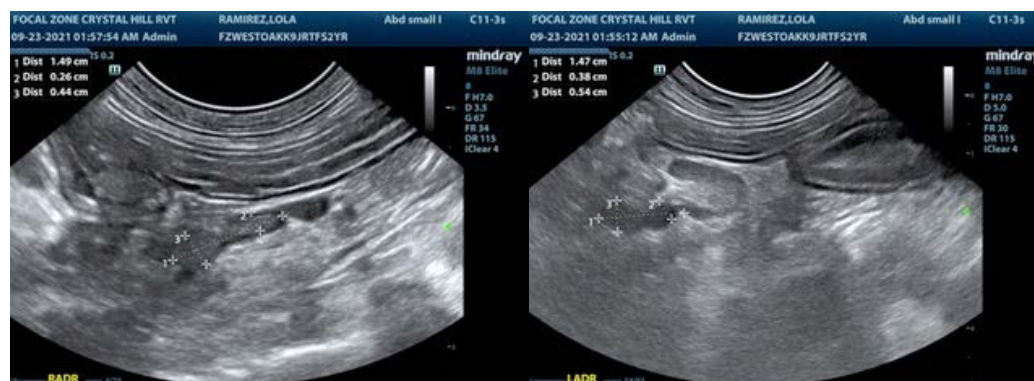
WEIGHT

5.2 kg

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 (Proviale or Visbiome), antibiotic trial and as needed gastrointestinal support with assessment of clinical response may prove beneficial.

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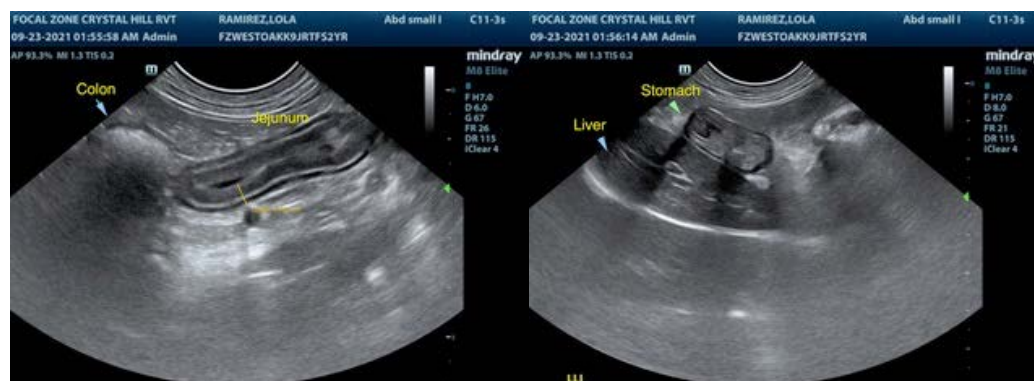
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PATIENT

Lola Ramirez

SPECIES

Canine

BREED

Jack Russell Terrier

SEX

Spayed Female

AGE

2 Years

WEIGHT

5.2 kg

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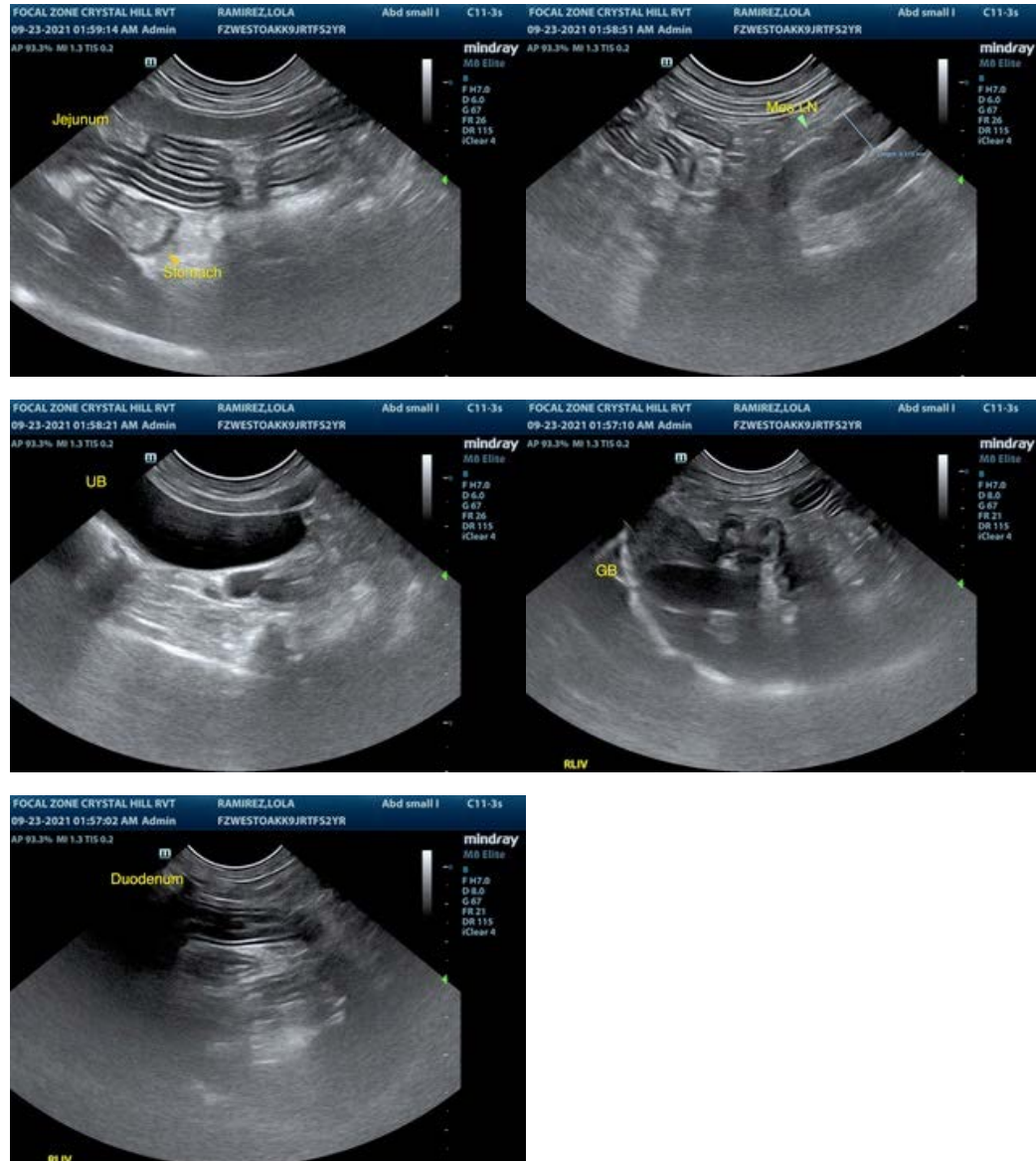
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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