



PATIENT	PRESENTING CLINICAL SIGNS
Buddy Tamburi	History: repeat ultrasound, previously performed on 8/23/22. Dog has done great the last 5 weeks and today stopped eating and turned jaundice.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone and cystourethral junction exhibited normal tone. Mild nonuniform thickening of the urinary bladder wall was present. Suspect two to possibly adhered luminal calculi present, measuring approximately 1.0 cm to 1.4 cm in diameter. The apical urinary bladder wall measured 0.58 cm in width. Probable pinpoint to focal areas of adhered mineral to hyperechoic sediment noted along the apical to ventral apical luminal surface. No overt pathology in the area of the residual prostate. Aortic trifurcation was normal.
Spaniel Mix	
SEX	
Neutered Male	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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Nonobstructive medullary renoliths were present. The left kidney measured 4.1 cm in length. The right kidney measured 4.7 cm in length.
AGE	
16 Years	
WEIGHT	
16.4 Pounds	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left and right adrenal glands were not definitively visualized.
IMAGING PERFORMED BY	Spleen
Nicole Gotfredson	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	Liver
Buffalo VC	The liver was mildly enlarged with subjective mild generalized decreased parenchyma echogenicity with mild indistinct portal vascular borders. The liver exhibited moderate coarse parenchyma echotexture. No masses or nodule were noted.
REFERRING VET	Gastrointestinal
Teresa Bessler	The gallbladder revealed normal to potential mild distention, containing primarily anechoic content with mild increased to congealed mildly echogenic nonmineralized luminal debris. The subjective cystic biliary duct, just distal to the gallbladder neck appeared to be dilated containing mucus. Definitive to diffuse common bile duct dilation, distal to the cystic biliary duct, was not obviously present. Subtle evidence of hyperechoic mesentery was noted around the gallbladder and cystic biliary duct. No evidence of free fluid.
INVOICE	
17404	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.
DATE	
9/22/22	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.
	Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Buddy Tamburi

The right limb of the pancreas exhibited persistent enlargement with areas of mild capsule asymmetry. Uniform hypoechoic parenchyma was present, compared to adjacent mildly reactive peripancreatic omentum.

SPECIES

Canine

Free Abdomen

BREED

Spaniel Mix

Ill-defined indistinct mildly nonhomogeneous nodular lesion was noted caudal to the left kidney, which did not appear to be associated with the non-visualized left adrenal gland based on location. This ill-defined nodular lesion measured 2.5 cm x 1.6 cm and did not overtly appear to be involved with the caudal spleen.

SEX

Neutered Male

Potential for mild hypoechoic to swollen hepatic lymphadenopathy is possible, although not definitive.

No omental masses noted.

ULTRASONOGRAPHIC FINDINGS

AGE

16 Years

- Persistent right limb pancreatitis pattern
- Suspect acute on chronic to recurrent hepatopathy with increased congealed gallbladder debris and concurrent cystic biliary mucoduct- potential for cholangitis/cholangiohepatitis, possible post hepatic obstruction cannot be definitively excluded
- Bilateral nonobstructive renolithiasis
- Urinary bladder calculi with mild cystitis
- Nonspecific nonhomogeneous small nodular lesion caudal to the left kidney
- Overtly normal gastrointestinal tract, potential for low grade gastritis

WEIGHT

16.4 Pounds

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Nicole Gotfredson

Potential for occult hepatic or pancreatic neoplasia, although thought less likely cannot be definitively excluded. Assuming normal clotting status, screening hepatic and pancreatic FNA cytology may be considered. Concurrent FNA of the nonspecific nonhomogeneous nodular lesion caudal to the left kidney could be considered, although this nodular lesion was not overtly consistent with neoplastic criteria. Empirically, hospitalization with empirical therapy for cholangiohepatitis and pancreatitis with as needed gastrointestinal support and assessment of clinical response would be reasonable.

HOSPITAL NAME

Buffalo VC

Correlation with recheck CBC chemistry panel and urinalysis is suggested. Recheck sonogram is recommended if persistent/progressive evidence of cholestasis and/or pancreatitis.

REFERRING VET

Teresa Bessler

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DATE

9/22/22



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Buddy Tamburi

SPECIES

Canine

BREED

Spaniel Mix

SEX

Neutered Male

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IMAGING PERFORMED BY

Nicole Gotfredson

HOSPITAL NAME

Buffalo VC

REFERRING VET

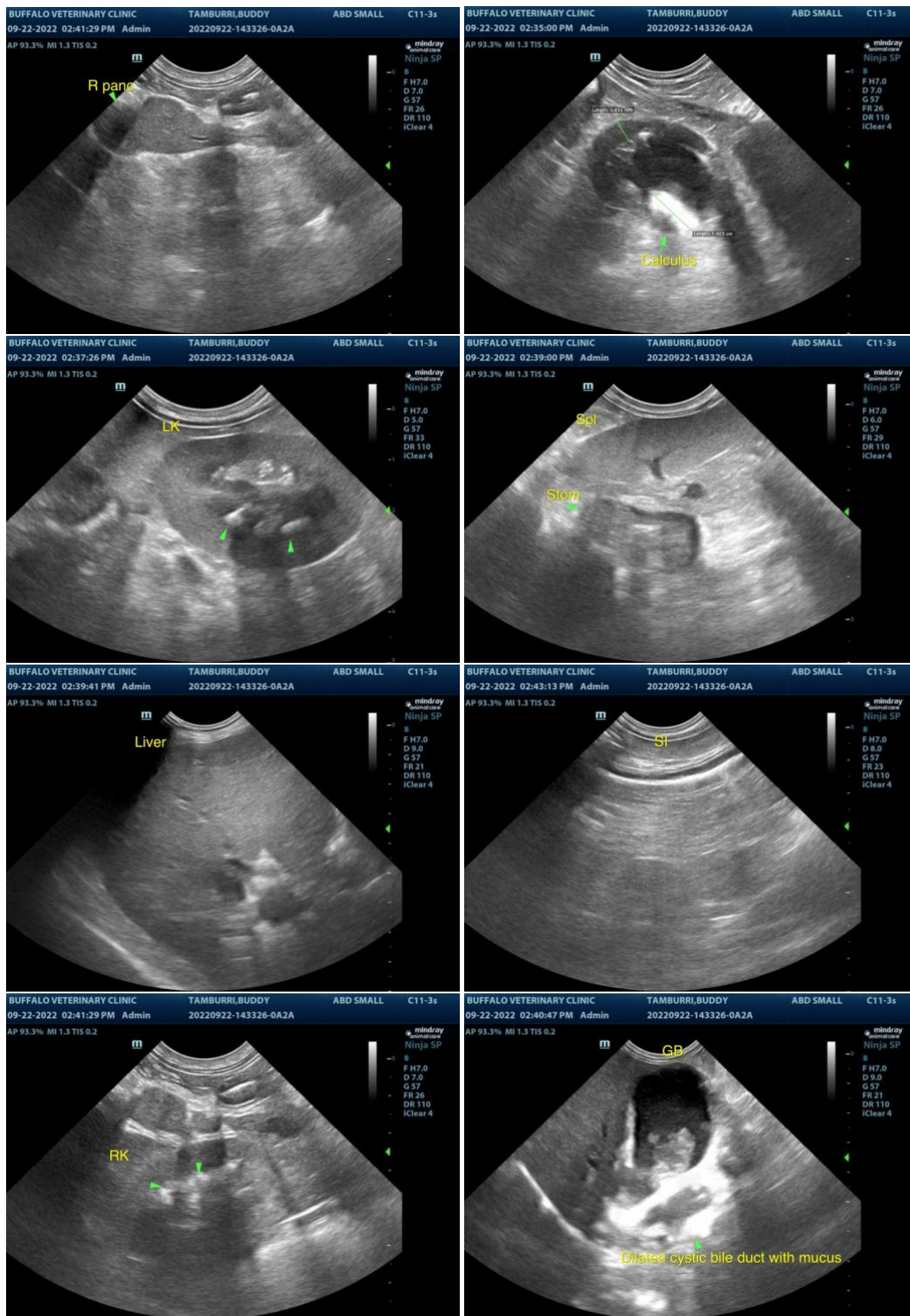
Teresa Bessler

INVOICE

17404

DATE

9/22/22



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



PATIENT

can be of any further assistance please contact me.

Buddy Tamburi

SPECIES

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

Canine

BREED

Spaniel Mix

SEX

Neutered Male

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WEIGHT

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HOSPITAL NAME

Buffalo VC

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