



**PATIENT PRESENTING CLINICAL SIGNS**

**Zowie Gilbert** History: Weight loss, reduced appetite, Cushing's, heart murmur, thyroid/parathyroid surgery 2017  
 Medication: Pepcid, Benazepril, Metronidazole, Entyce

**SPECIES** ALP 336, BUN 35, Sodium/Potassium ratio 31, unremarkable CBC.

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Dachshund

The urinary bladder was mildly distended, yet subjective normal noted. The 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.

**SEX**

FS

The kidneys were normal in size. Mild asymmetrical renal margination noted in the left kidney. A normal 1:3 cortex / medulla ratio was maintained in both kidneys. 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. Bilateral mild pyelectasia was present. The left kidney measured 4.1 cm. The right kidney measured 3.9 cm.

**AGE**

15 years

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

12.3 lbs Pounds

**Adrenal Glands**

The adrenal glands were mildly prominent in size with mild asymmetrical margination and non-homogeneous parenchyma. The left adrenal gland measured 2.1 cm length x 0.74 cm at the caudal pole. The right adrenal gland measured 1.6 cm length x 0.68 cm at the caudal pole.

**INTERPRETED BY**

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

**Spleen**

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**Liver**

The liver presented enlarged in size. 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 minor debris, primarily around the inner luminal surface as well as mild non-dependent, non-organized debris. The cystic duct and common bile ducts were normal without evidence of dilation.

**HOSPITAL NAME**

Stanglein VC

**REFERRING VET**

Dr. Stanglein

**INVOICE**

25776

**Gastrointestinal**

The stomach presented intact yet subjectively prominent wall layering, primarily in the area of the pylorus. Pylorus wall measured 0.78 cm. By comparison, gastric body wall measured 0.35 cm. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

**DATE**

9.23.2021



**PATIENT**

Zowie Gilbert

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. Intermittent minor mucosal speckling present in the jejunum.

**SPECIES**

Canine

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

**Pancreas**

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

**BREED**

Dachshund

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

FS

- Bilateral moderate chronic renal changes with pyelectasia
- Prominent to mild non-homogeneous bilateral adrenal gland – consistent with chronic PDH or age related/adenomatous change, no overt neoplasia.
- Vacuolar hepatopathy pattern
- Minor gallbladder debris (non-mucocele)
- Gastroenteritis with mild pyloric thickening

**AGE**

15 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The renal pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein: creatinine ratio on sterile urine sample is recommended. Recheck ACTH stimulation test may be considered given the patient's clinical signs and chronic Cushing's disease.

**WEIGHT**

12.3 lbs Pounds

Given the intact wall layering, the mild pyloric thickening may indicate mild pyloric inflammation. This did not overtly appear to be obstructed to pyloric outflow. In addition to current gastrointestinal support, limited antigen or hydrolyzed diet with smaller, more frequent feedings may prove beneficial if evidence of vomiting.

**INTERPRETED BY**

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

A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological examination are recommended to assess for or rule out occult disease which may cause weight loss.

**IMAGING PERFORMED BY**

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ARDMS/RVT

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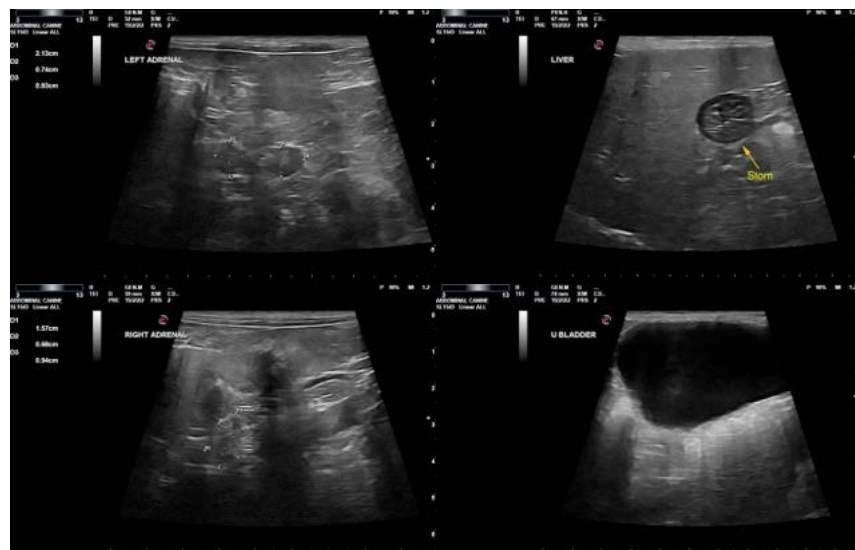
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**PATIENT**

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**SPECIES**

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**BREED**

Dachshund

**SEX**

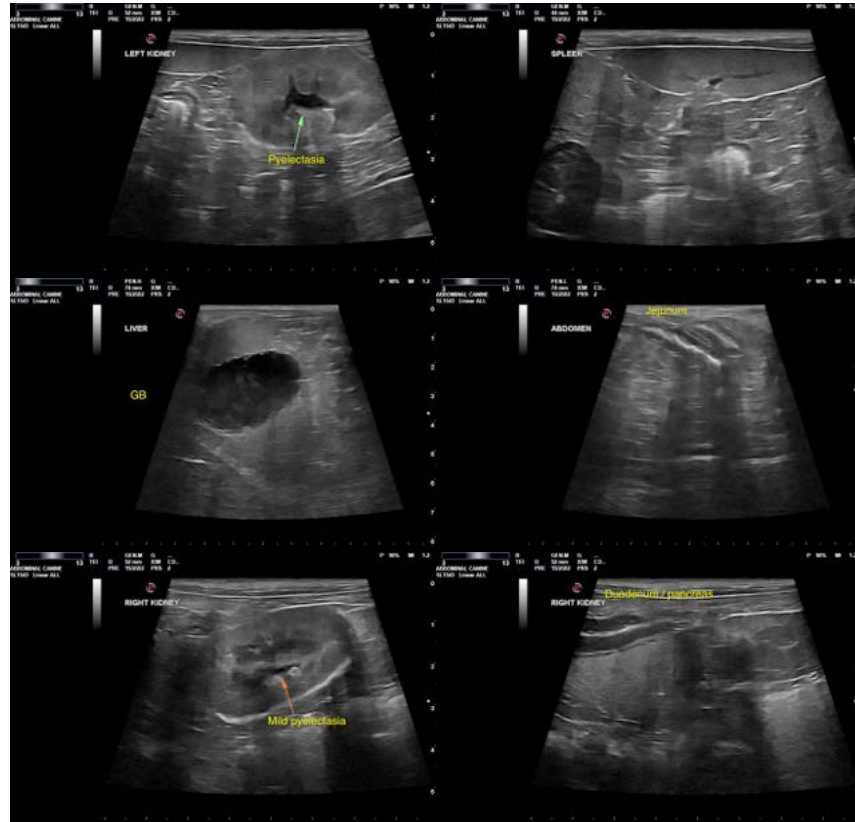
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**AGE**

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**WEIGHT**

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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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