



PATIENT	PRESENTING CLINICAL SIGNS
Maverick Mitchell	ongoing pancreatitis
SPECIES	Abnormal PE/Chem/CBC/UA Results: 6/21/22- GLU 3.2, ALT 153, LIP 1457, spec cPL 1123. 9/22/22-spec cPL 278
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Bernese Mtn Dog X	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
SEX	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 7.2 cm in length. The right kidney measured 6.2 cm in length.
MN	The area of the aortic trifurcation was free of pathology.
AGE	Adrenal Glands
9yr	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 cm width at the caudal pole and 3.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.82 cm width at the caudal pole and 3.3 cm length.
WEIGHT	Spleen
34kg	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	Liver
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The liver exhibited potential for mild enlargement with symmetrical capsule contour and normal parenchymal echogenicity with moderate coarse echotexture. Evidence of minor benign parenchymal remodeling was present. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with moderate hyperechoic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.
IMAGING PERFORMED BY	Gastrointestinal
Kelly Reschny	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild ingesta exhibiting subtle progressive distal acoustic shadowing with no signs of ileus, obstruction or foreign material.
HOSPITAL NAME	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.
Preston AC	Normal visible colon wall layers were present with apparent formed feces in lumen.
REFERRING VET	
Dr. MacDonald	
INVOICE	
11692ag	
DATE	
09/26/2022	



PATIENT

Maverick Mitchell

Pancreas

The pancreas was overtly normal in size and contour exhibiting isoechoic mildly heterogeneous parenchyma. No signs of active inflammation or neoplastic disease was evident.

SPECIES

Canine

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

BREED

Bernese Mtn Dog X

ULTRASONOGRAPHIC FINDINGS

- Mildly heterogeneous pancreas
- Minor hepatic parenchymal remodeling-possible low grade hepatopathy
- Gallbladder debris (non-mucocele)
- Gastric ingesta-probable post prandial

SEX

MN

Secondary

- Mild urinary bladder sediment

AGE

9yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonographically the appearance of the pancreas was not consistent with acute or active pancreatitis was without evidence of pancreatic neoplastic criteria. Given the decreasing spec cPL, potential for resolving pancreatitis or persistent low grade to chronic pancreatitis may be possible. Reassessment of ALT levels or for evidence of cholestasis is suggested. Hepatosupportive medications if clinically indicated as well as medical therapy for low grade pancreatitis which may include as needed GI support and/or dietary therapy may be appropriate.

WEIGHT

34kg

INTERPRETED BY

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

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.

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BREED

Bernese Mtn Dog X

SEX

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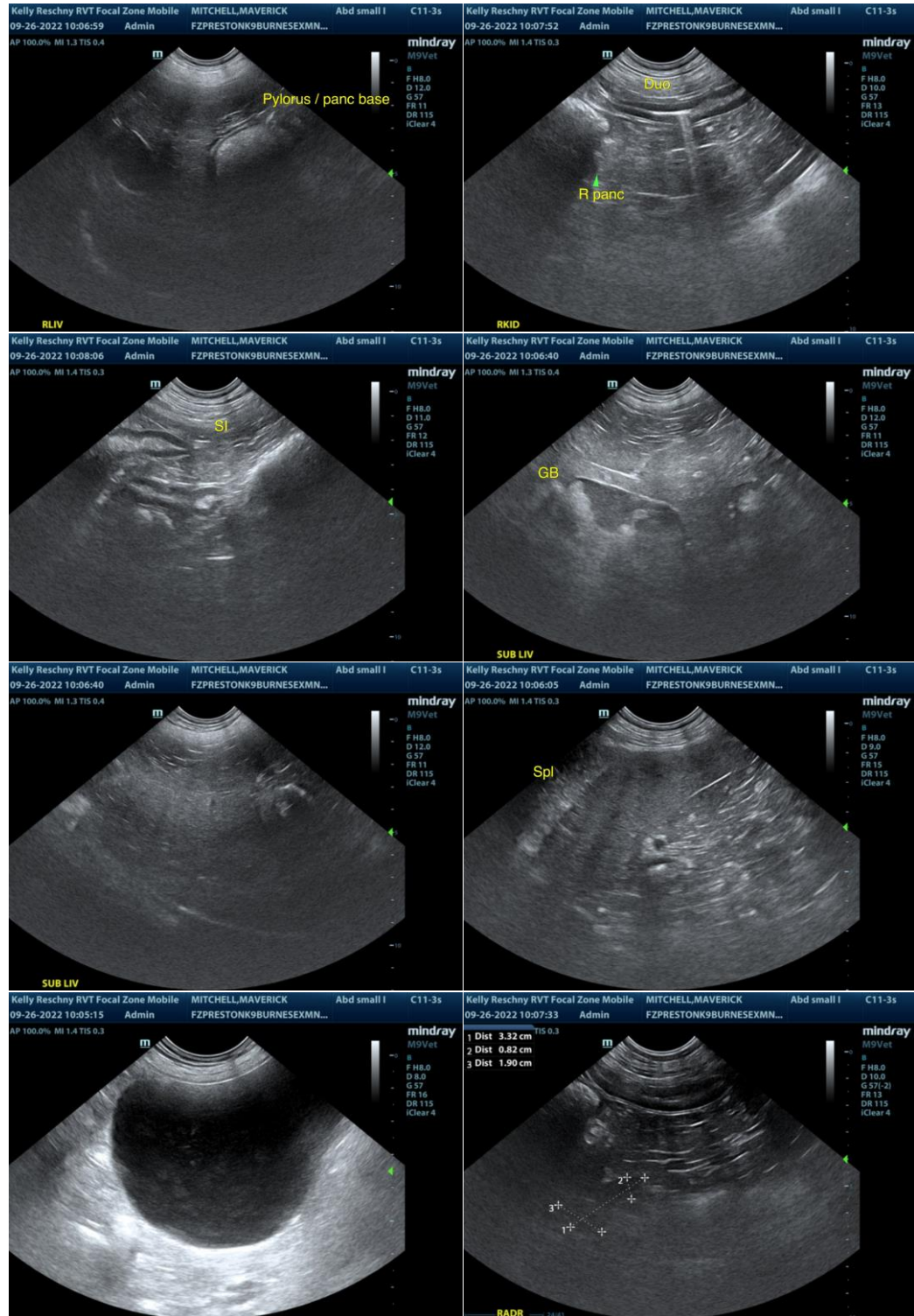
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PATIENT

Maverick Mitchell

SPECIES

Canine

BREED

Bernese Mtn Dog X

SEX

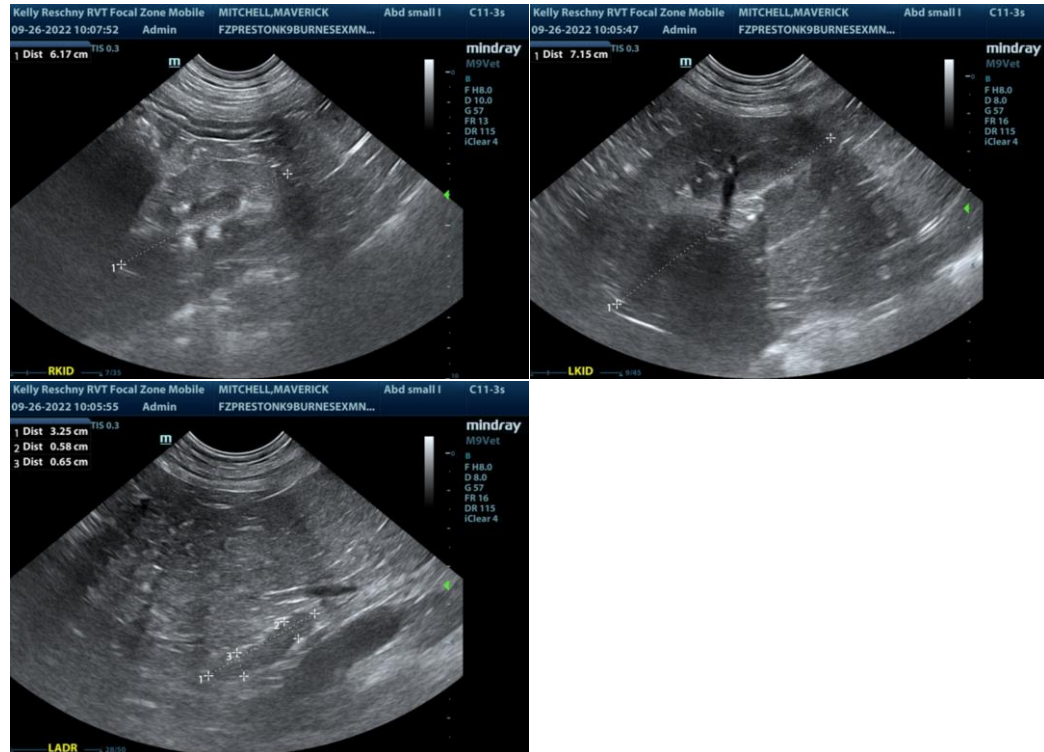
MN

AGE

9yr

WEIGHT

34kg



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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