



PATIENT PRESENTING CLINICAL SIGNS

Tess Parr Recently o reports pupd and not "self". Rx Trilostane 20mg bid. Prev AUS done 1/21. LDDST dx HAD 3/21. Medically managed with ACTH stims q4-6m. See below for most recent ACTH stim.

SPECIES Abnormal PE/Chem/CBC/UA Results: Recent ACTH stim low 4h and 8h post. Antech consult: Canine ACTH stim "tight control". Advised decrease to 10mg in evening. recommend AUS to r/o adrenal tumor etc.

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Nova Scotia Duck Tolling Retriever

Urinary System

SEX The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

FS

AGE

9yr

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 6.2 cm in length. The right kidney measured 6.1 cm in length.

WEIGHT

42lb

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was subnormal in size with normal contour and a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm width at the caudal pole and 2.5 cm width at the cranial pole. The right adrenal gland was not definitively visualized-suspected to be secondary to subnormal size.

IMAGING PERFORMED BY

Sara Hansen

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.

HOSPITAL NAME

Better Vet

Liver

The liver exhibited generalized enlargement, symmetrical capsule contour and normal overall parenchyma echogenicity with mild coarse echotexture and minor remodeling. Intermittent nondisruptive hyperechoic intraparenchymal nodules were present in the mid liver an example measuring 2.6 cm in diameter. 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 with mild echogenic debris. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Rensema

INVOICE

11726ag

DATE

09/26/2022

Gastrointestinal



PATIENT The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild primarily nonshadowing ingesta/chyme with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.40 cm in width.

Tess Parr

SPECIES 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. The jejunum wall measured 0.43 cm in width.

Canine

BREED The segmental proximal to transverse colon exhibited mildly thickened walls with indistinct wall layer detail. The transverse colon wall measured 0.45 cm in width. The colon appeared to contain formed to semi formed fecal matter.

Nova Scotia Duck Tolling Retriever

SEX *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.

FS

AGE *Free Abdomen*

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

9yr

WEIGHT

42lb

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

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

- Bilateral subnormal adrenal glands
- Sonographically unremarkable stomach/small bowel with mild gastric ingesta/chyme
- Segmental mildly thickened colon
- Hepatopathy with intermittent nonspecific hyperechoic intraparenchymal nodules
- Minor gallbladder debris
- Mild pancreatic remodeling

IMAGING PERFORMED BY

Sara Hansen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The subnormal adrenal glands may be secondary to Addison's disease with contribution owing to prednisone therapy. Although non-specific the overall liver may indicate metabolic/reactive/vacuolar hepatopathy, inflammatory/immune mediated disease, areas of nodule hyperplasia, lipogranuloma, hematopoiesis or other with neoplasia thought less likely. Assuming normal clotting status a screening hepatic FNA could be considered for further assessment. Potentially prednisone therapy may be masking intra-abdominal changes or other GI pathology. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial. Three view chest radiographs recommended to rule out occult thoracic pathology.

HOSPITAL NAME

Better Vet

REFERRING VET

Dr. Rensema

For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

INVOICE

11726ag

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>

DATE

09/26/2022



PATIENT

Tess Parr

SPECIES

Canine

BREED

Nova Scotia Duck
Tolling Retriever

SEX

FS

AGE

9yr

WEIGHT

42lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Better Vet

REFERRING VET

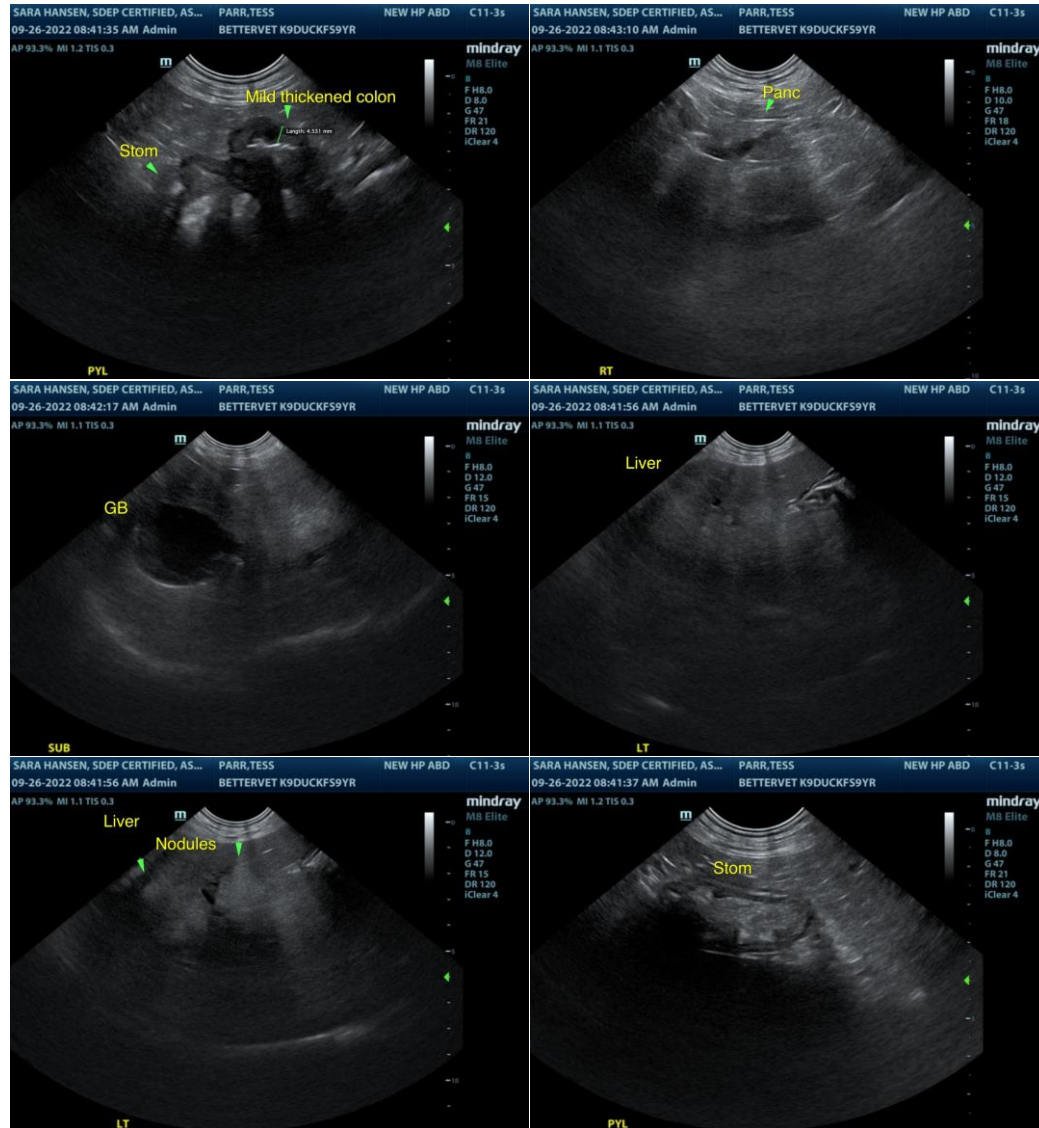
Dr. Rensema

INVOICE

11726ag

DATE

09/26/2022





PATIENT

Tess Parr

SPECIES

Canine

BREED

Nova Scotia Duck
Tolling Retriever

SEX

FS

AGE

9yr

WEIGHT

42lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Better Vet

REFERRING VET

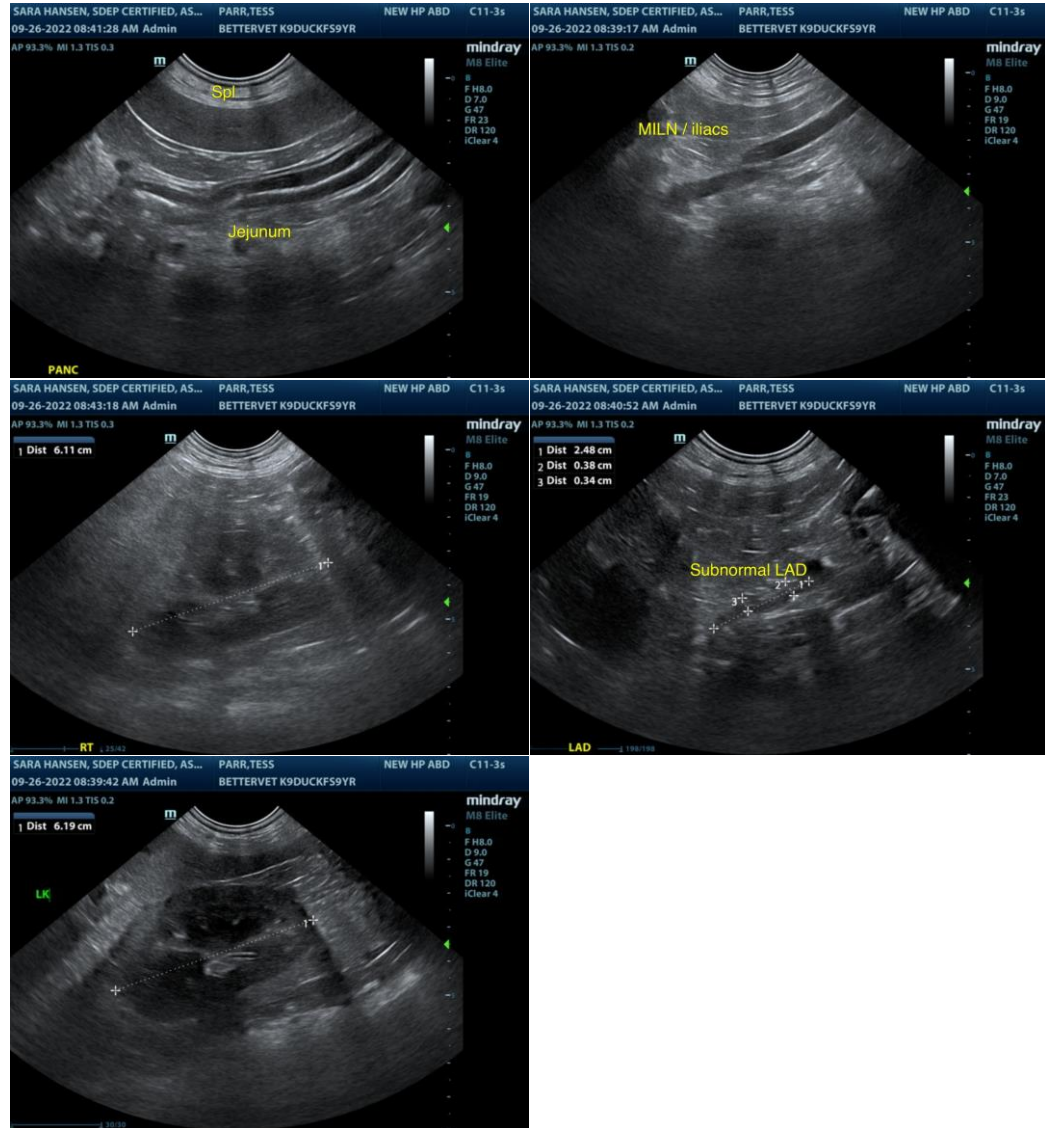
Dr. Rensema

INVOICE

11726ag

DATE

09/26/2022



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)

info@SonoPath.com