

Portable Animal Wellness Sonography, Inc.

 IMAGING PERFORMED BY  
 pawsonography@gmail.com 530-786-8340

## PATIENT

Maddie York

## PRESENTING CLINICAL SIGNS

## SPECIES

Canine

## BREED

Labrador Ret

## SEX

FS

## AGE

10

## WEIGHT

66.8lb

Sedated dex 0.05ml/butorphanol 0.1ml - Significant ventral abdominal bruising - improving - Prominent right ventral abdominal mass - Possible hyperadrenocorticism - Elevated ALP - Perianal adenoma - Excessive panting History/Physical Findings: No significant change since history from most recent abdominal ultrasound performed 8/16/22: Patient presents for acupuncture and laser therapy consultation in May 2022 for osteoarthritis, especially of the hind end. Patient has a history of elevated liver enzymes, excessive panting, weight loss, multiple dermal and subcutaneous masses. Perianal adenoma has slightly increased in size over the past 3 months. Owner noted slight improvement in panting with addition and dose adjustment of nutraceuticals and pharmaceuticals. Advised owner to have testing performed for hyperadrenocorticism. Low-dose dexamethasone suppression test performed with rDVM and started on Vetoryl for a few days, then rDVM advised discontinuing Vetoryl and recommended abdominal ultrasound. Upon physical exam, patient is always tachypneic, has lordosis with a potbellied appearance, decreased conscious proprioception in both hind limbs, moderate muscle atrophy, holds the hind end slightly tucked, mild periodontal disease (with multiple missing teeth from previous dental procedure), and distortion and shortening of the nasal planum secondary to previous trauma as a puppy. BCS 4.5/9. 9/16/22 Addendum: Two weeks ago patient slipped off of the outdoor stairs and abdomen landed with impact on the corner of the stairs. Spotty bruising started to form that then expanded to bruising along the entire ventral abdomen in 1 week. Pendulous appearance to the right ventral abdomen appeared to be more prominent with a slight elevation/swelling (~8cm in diameter) of the intramuscular/subcutaneous region. Bruising appeared to be significantly resolved today.

Current Therapy and Medications: - Acupuncture and laser therapy every 2 weeks. - Dasuquin Advanced with ESM, omega-3 FA, gabapentin, amantadine, and Galliprant.

## INTERPRETED BY

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

Abnormal PE/Chem/CBC/UA Results: 8/16/22 History: - Systolic BP: 160mmHg - LDDST (from 5/19/22): Baseline - 1.7 (1-5ug/dL) 4hr Post - 2.2 (0-1.4ug/dL) 8hr Post - 1.5 (0-1.4ug/dL) Summary of Laboratory Abnormalities: - PT/aPTT WNL today. - Elevated ALT 131 (12-118 IU/L) (from 4/5/22) returned to normal 90 on 9/27/22 recheck. - Elevated ALKP 563 (5-131 IU/L) (from 4/5/22) increased to 622 on 9/27/22 recheck.

## IMAGING BY

 Loetitia Saint-Jacques,  
 DVM

## ULTRASONOGRAPHIC RECHECK EXAMINATION OF THE ABDOMEN

### Urinary System

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.

## HOSPITAL NAME

LuxPetVet

## REFERRING VET

Dr. Kee

Normal size and margination was 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. The left kidney measured 7.1 cm in length. The right kidney measured 7.7 cm in length.

## INVOICE

The area of the aortic trifurcation was free of pathology.

11753ag

## DATE

09/30/2022



## PATIENT

Maddie York

### *Adrenal Glands*

## SPECIES

Canine

The bilateral adrenal glands were enlarged in size with symmetrical capsule contour. Non-homogeneous adrenal parenchyma was noted with no evidence of mineralization or overt neoplastic criteria. The left adrenal gland measured 1.1 cm width at the caudal pole and 3.1 cm length. The right adrenal gland measured 1.1 cm width at the caudal pole and 2.9 cm length.

## BREED

Labrador Ret

### *Spleen*

The spleen exhibited possible generalized enlargement and generalized parenchymal heterogeneity with previously noted variably echogenic splenic nodules. Some of the nodules appeared to mildly distort the splenic capsule. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. An example of a splenic nodule measured 2.1 cm in diameter.

## SEX

FS

### *Liver*

## AGE

10

The liver was enlarged with rounded contour and normal overall parenchyma echogenicity exhibiting moderate coarse echotexture and evidence of remodeling. The previously noted non-disruptive parenchymal nodules were present, an example measuring 3-4 cm in diameter.

## WEIGHT

66.8lb

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with moderate non-dependent variably echogenic focally congealed debris. The cystic and common bile ducts were normal.

### *Gastrointestinal*

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(Canine and Feline)

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.

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.

## IMAGING BY

Loetitia Saint-Jacques,  
11/7

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

### *Pancreas*

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

## REFERRING VET

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### *Free Abdomen*

No overt lymphadenopathy or peritoneal effusion was present. Previously noted probable intra-abdominal lipoma was present exhibiting hyperechoic fat echogenicity measuring ~ 11-12 cm in diameter. Peripheral hypoechoic fluid noted within the lipoma.

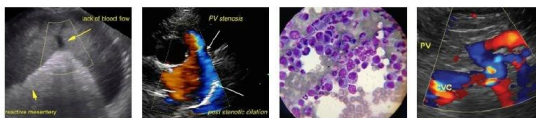
## INVOICE

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## ULTRASONOGRAPHIC FINDINGS

## DATE

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## PATIENT

Maddie York

- Hepatomegaly exhibiting mild parenchymal remodeling and previously noted nodules

## SPECIES

Canine

- Moderate gallbladder debris (non-mucocele)
- Previously noted variable echogenic splenic nodules
- Bilateral chronic mild renal changes
- Bilateral mild adrenomegaly-no overt neoplastic criteria
- Previously noted probable intra-abdominal lipoma

## BREED

Labrador Ret

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall a static abdominal presentation compared to the previous study.

## SEX

FS

The hepatosplenic nodules appear to be similar in appearance with evidence of progression. Previously mentioned etiologies still apply. Assuming normal clotting status and using a 25g needle, a hepatosplenic FNA for screening cytology could be considered vs. continued monitoring.

## AGE

10

Assuming normal clotting status and using a 25g needle, an intra-abdominal FNA for screening cytology may be considered.

The LDDST in this patient may be considered equivocal for Cushing's syndrome given the 8 hour post sample of 1.5.

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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/>.

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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>

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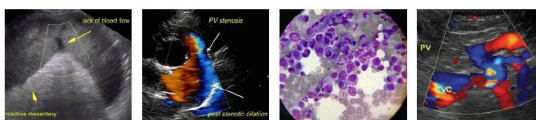
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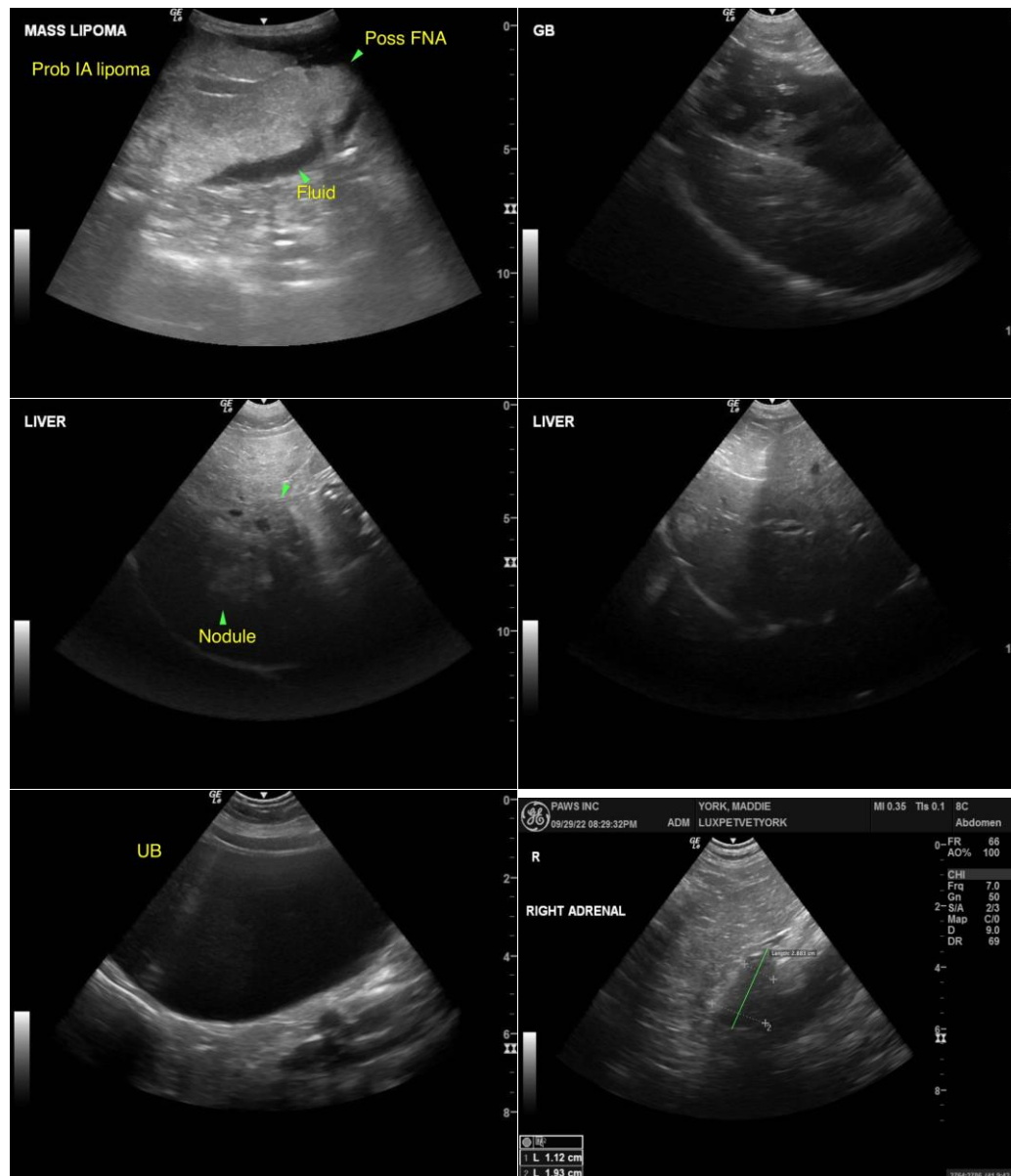
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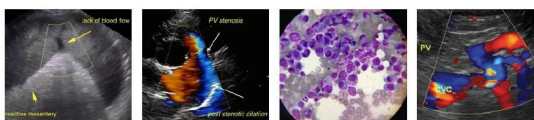
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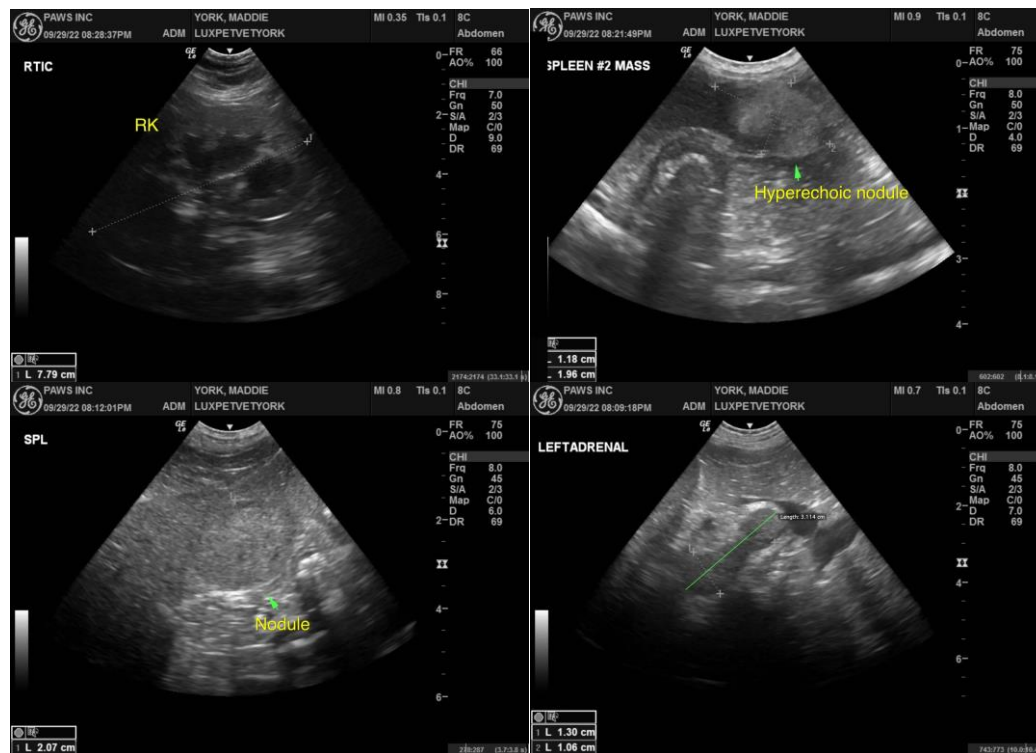
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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