



PATIENT	PRESENTING CLINICAL SIGNS
Rowdee Kleinschmidt	Patient was treated at BAESC ICU for vomiting, regurgitation, dehydration and abdominal pain on 8/12/22. MEDICAL MANAGEMENT: - IVF, supportive care, ursodiol, metronidazole, PATIENT PROGRESS: - Clients report that Rowdee is greatly improved; he is eating, brighter, and has been able to attend day care. He did develop loose stools recently, and is receiving metronidazole. - He vomited once ~ 1 week ago, bilious. - Adrenal gland testing was performed per clients: No indication of HAC - Uncertain if thyroid testing has been performed - Uncertain if BP was re-checked MEDICATIONS: - Ursodiol and Metronidazole DIET: - Purina Pro Plan, EN with canned and kibble
SPECIES	
Canine	
BREED	
West Highland White Terrier	Abnormal PE/Chem/CBC/UA Results: PE: Adrenal gland testing (uncertain if LDDST or ACTH stim) were performed at primary care DVM within the last 2 weeks and were reportedly normal. -- Uncertain if re-check BP or Thyroid panel has been submitted
SEX	ULTRASONOGRAPHIC RECHECK EXAMINATION OF THE ABDOMEN
MN	<i>Urinary System</i>
AGE	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.
12yr	
WEIGHT	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 5.2 cm in length. The right kidney measured 5.3 cm in length.
10.3kg	
INTERPRETED BY	The area of the aortic trifurcation was free of pathology.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy.
IMAGING PERFORMED BY	The area of the residual prostate was free of pathology.
Patti Mayfield DVM	<i>Adrenal Glands</i>
HOSPITAL NAME	The right adrenal gland exhibited persistent static mild enlargement with intact yet mild capsule asymmetry. Heterogeneous to nodular parenchyma was noted with no evidence of mineralization or obvious vascular invasion. The right adrenal gland measured 1.1 cm width at the caudal pole and 2.5 cm length. An example of a mid to cranial nodule measured ~ 1.8 cm x 1.2 cm.
Patti Mayfield	The left adrenal gland exhibited more normal overall size with a similar appearing non-disruptive nodule in the caudal left adrenal gland measuring 0.67 cm in diameter. No evidence of mineralization or vascular invasion was present. The left adrenal gland measured 0.70 cm width at the caudal pole and 1.9 cm length.
REFERRING VET	<i>Spleen</i>
Bend Equine Medical Center	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.
INVOICE	
11529ag	
DATE	
09/06/2022	



PATIENT

Liver

Rowdee Kleinschmidt

The liver was subjectively normal in size, structure, and contour. Intermittent previously noted small thinly walled cysts were present. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion.

SPECIES

Canine

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with minor residual dependent luminal debris. The cystic and common bile ducts were normal.

BREED

Gastrointestinal

West Highland White Terrier

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.

SEX

MN

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.

AGE

Pancreas

12yr

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This finding is likely age related and is incidental.

WEIGHT

10.3kg

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Static hepatic parenchymal remodeling with intermittent benign cysts
- Essentially resolved gallbladder debris-no evidence of previously noted partial to emerging gallbladder mucocele
- Minor splenic parenchyma remodeling-benign
- Persistent static right adrenomegaly with bilateral adrenal nodular changes
- Static mild chronic renal changes

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Patti Mayfield

REFERRING VET

Bend Equine Medical Center

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bilateral adrenal gland nodular changes were essentially static with potential mild progressive nodular changes in the right adrenal gland with some degree of measurement variability possible. Overall, the adrenal glands appeared to be static without evidence of significant enlargement. Previously mentioned etiologies are still applicable. Continued monitoring of BP and serial sonographic monitoring is recommended.

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Assuming no evidence of cholestasis, discontinuation of the Ursodiol would be reasonable. Sonographic reassessment of the gallbladder is advised if previously noted clinical signs recur.

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SPECIES

Canine

BREED

West Highland White Terrier

SEX

MN

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12yr

WEIGHT

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(Canine and Feline)

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

Patti Mayfield

REFERRING VET

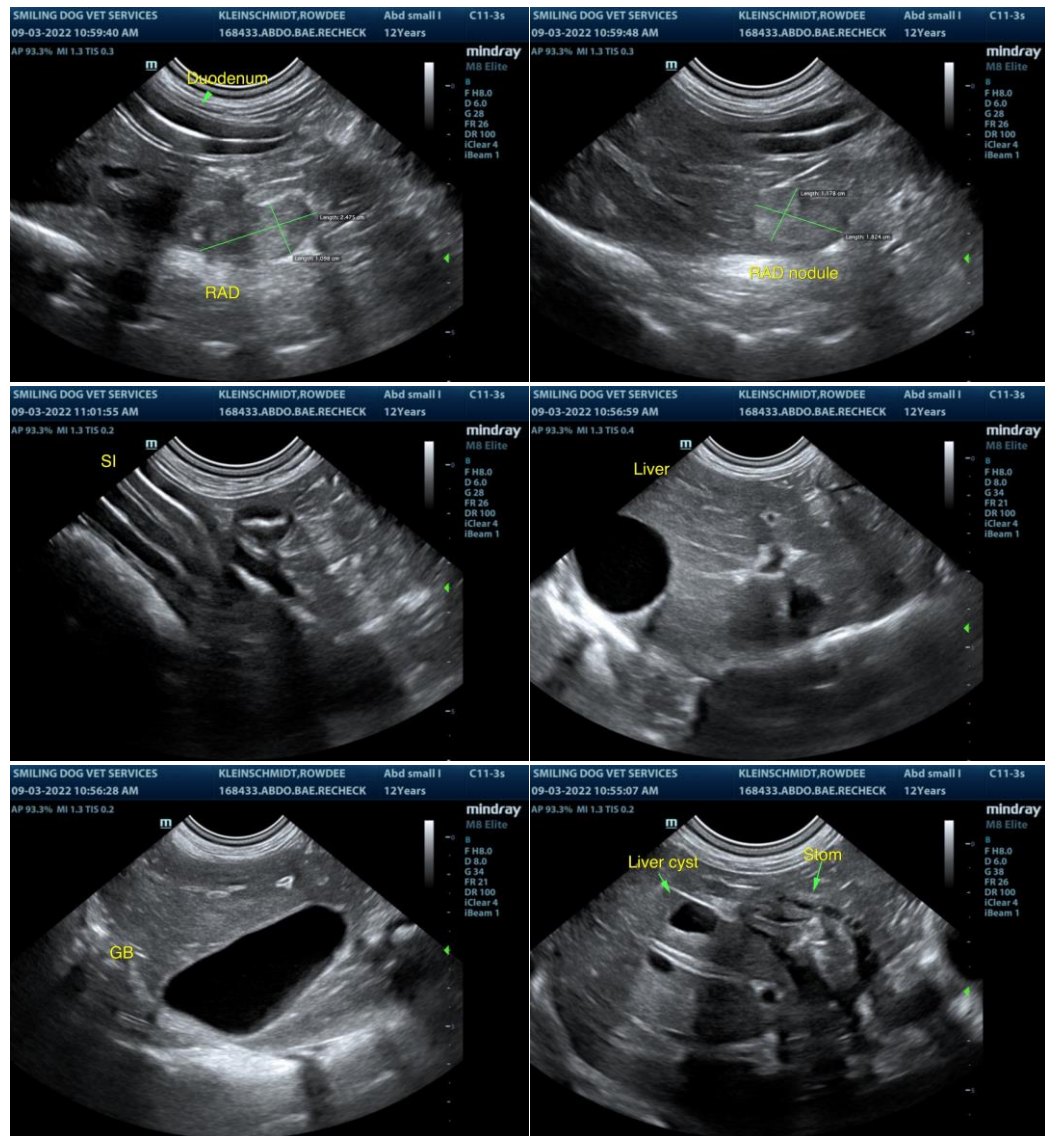
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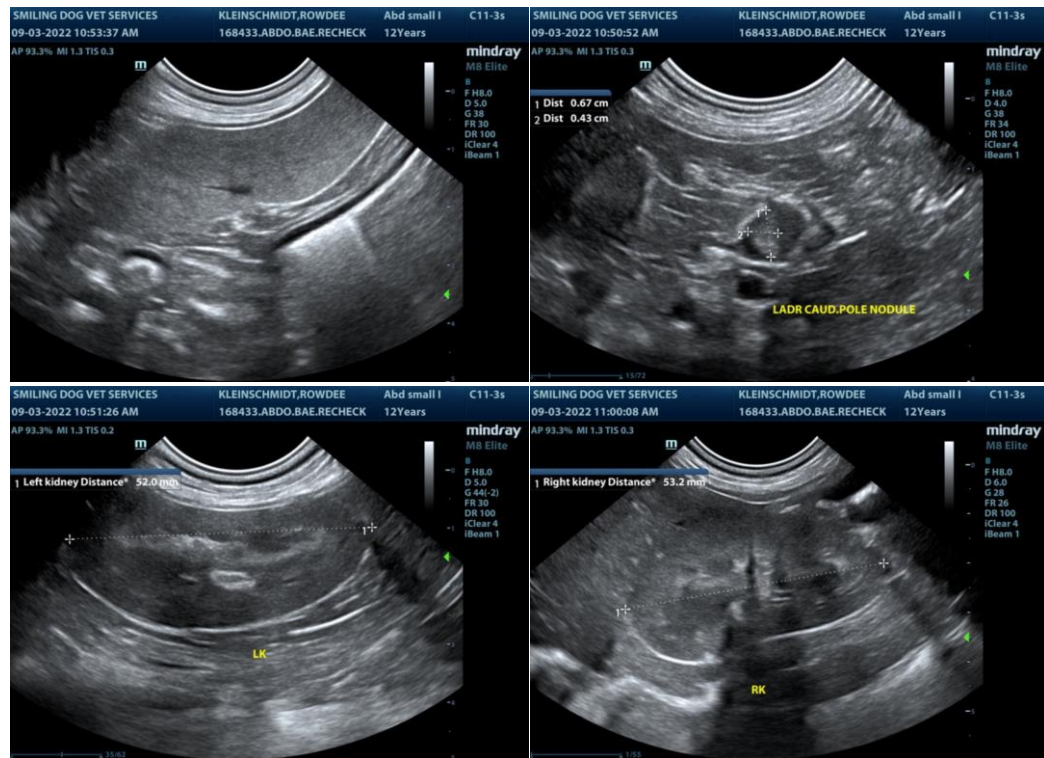
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com