



PATIENT PRESENTING CLINICAL SIGNS

Delilah Swearingen Vomited bile last week, PUPD, Lack of appetite, no BM's last few days Current Medications Mirtazapine, may be starting Denamarin and Metronidazole prior to appt.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Pug

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Moderate non-dependent to focally congealed echogenic sediment was present. Minor dependent mineralized sand also present. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX

Spayed Female

Normal size and margination were 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of medullary mineralization were present in both kidneys. The left kidney measured 3.8 cm. The right kidney measured 5.0 cm.

AGE

13 Years

WEIGHT

24 Pounds

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.8 cm length x 0.53 cm at the caudal pole. The right adrenal gland measured 1.5 cm length x 0.49 cm at the caudal pole. No evidence of adrenal tumors or overt hyperplasia.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Jenna Walsh

Liver

The liver was subjectively normal in size, structure, and contour. 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. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

HOSPITAL NAME

Reid Vet Hospital

REFERRING VET

Dr. Heider

Gastrointestinal

The stomach presented mild wall thickening secondary to echogenic mucosa hypertrophy, primarily in the area of the gastric antrum and pylorus. Intact wall layering was maintained and distinct. Mild gastric distension with primarily anechoic fluid was present.

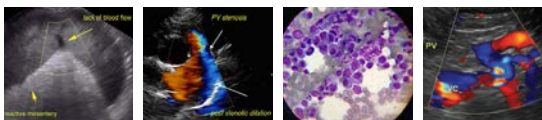
INVOICE

25212

DATE

9/8/21

The duodenum exhibited intact yet subjective mild prominent wall layering with minor upper duodenal retained fluid, suggestive of minor upper duodenal ileus. Duodenum wall measured 0.51 cm. The jejunum and ileum to the level of the colon were sonographically unremarkable. Jejunum wall measured 0.33 cm.



PATIENT Normal visible colon wall layers were present with subjective semiformal feces.

Delilah Swearingen **Pancreas**

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

Canine

BREED **Free Abdomen**

Pug

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

SEX

- Moderate non-dependent to focally congealed urinary bladder sediment – probable cellular or crystalline debris.

Spayed Female

AGE

- Bilateral mild chronic renal changes with pinpoint medullary mineral
- Heterogeneous to echogenic pancreas – suspect chronic pancreatitis.
- Mild gastroduodenitis pattern

13 Years

WEIGHT

- Mild hepatic parenchymal remodeling – subjectively benign
- Minor gallbladder debris (non-mucocele)

24 Pounds

INTERPRETED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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

Pending urinalysis, urine culture and sensitivity on sterile urine sample may be indicated if evidence of inflammatory cells. No overt evidence of underlying adrenal pathology, yet adrenal testing may be considered if suspicion for hyperadrenocorticism. However, the appearance of the liver was not overtly consistent with steroid hepatopathy. Chronic pancreatitis with potential for mixed inflammatory pattern would be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with spec cPL may be considered. As-needed gastrointestinal support and therapy for suspected gastroduodenitis is recommended.

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

Reid Vet Hospital

REFERRING VET

Dr. Heider

INVOICE

25212

DATE

9/8/21





PATIENT

Delilah Swearingen

SPECIES

Canine

BREED

Pug

SEX

Spayed Female

AGE

13 Years

WEIGHT

24 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

Reid Vet Hospital

REFERRING VET

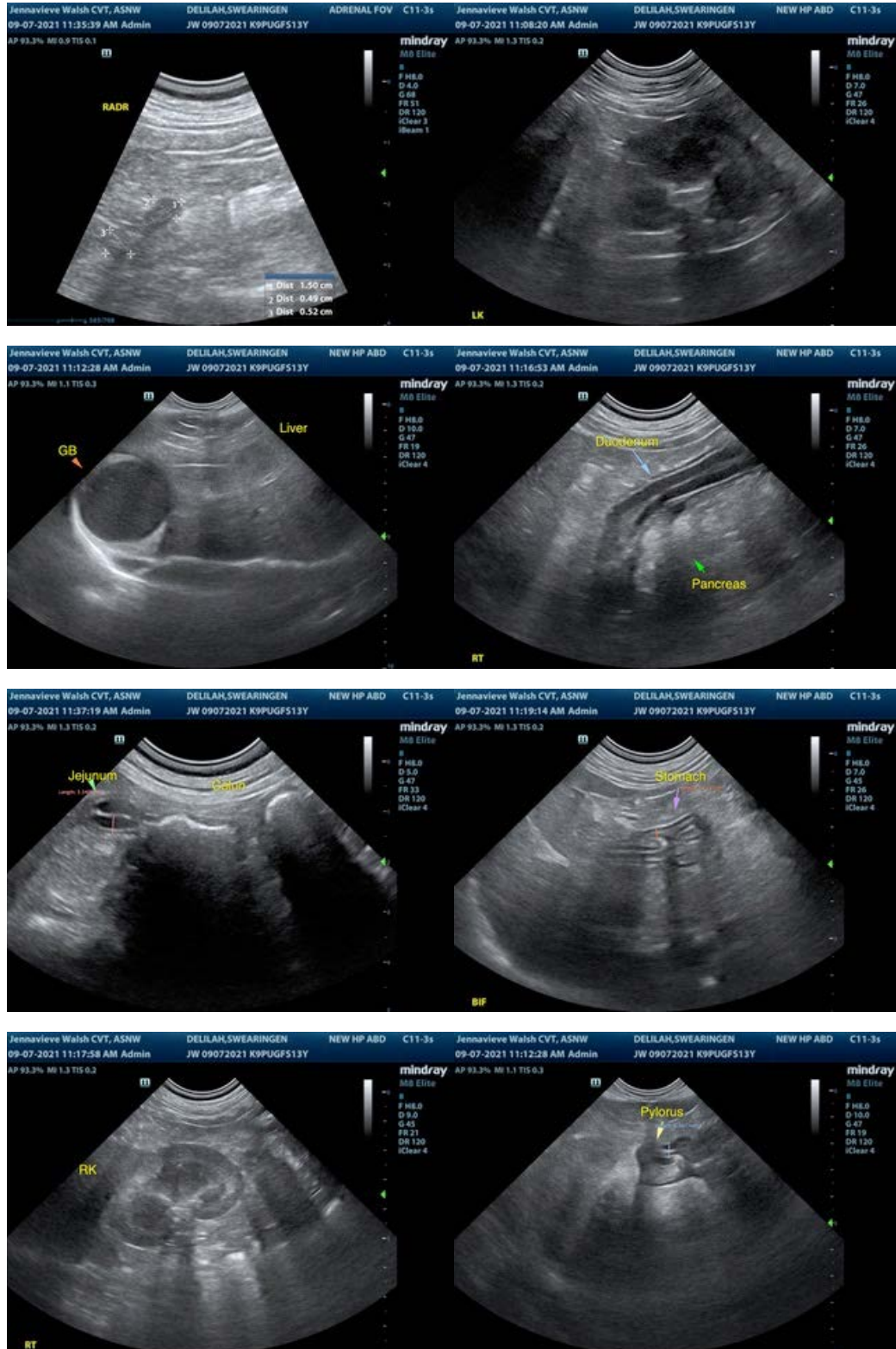
Dr. Heider

INVOICE

25212

DATE

9/8/21





PATIENT

Delilah Swearingen

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.

SPECIES

Canine

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.

BREED

Pug

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

Spayed Female

AGE

13 Years

WEIGHT

24 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jenna Walsh

HOSPITAL NAME

Reid Vet Hospital

REFERRING VET

Dr. Heider

INVOICE

25212

DATE

9/8/21