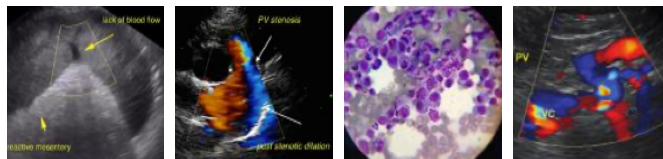


PATIENT	PRESENTING CLINICAL SIGNS
George McIntyre	History: Hyporexia and vomiting. Responded partially to symptomatic treatment. Has improved since hospitalization and is now eating. No abdominal pain.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Elevated amylase 2000 with normal lipase.
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Chihuahua	The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted. Urethra visualized to 3.0 cm.
SEX	The prostate is of appropriate size for patient age and neutering status, with a homogenous parenchyma and smooth capsule. The prostatic urethra is non-dilated with normal margins.
Neutered Male	Both kidneys are of normal size and shape and exhibit appropriate corticomedullary differentiation with a normal 1:3 cortex to medulla ratio, and a medullary rim sign is present in both kidneys. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 3.9 cm in length. The right kidney is 4.1 cm in length.
AGE	
3 years	Adrenal Glands
WEIGHT	The adrenal glands are both identified in their normal locations. They are normal in size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The left adrenal gland height is 4.3 mm at the cranial pole and 4.0 mm at the caudal pole. The right adrenal gland height is 3.5 mm at the cranial pole and 4.7 mm at the caudal pole.
6.3 kg	
INTERPRETED BY	Spleen
Tam Mengine, DVM, DABVP (canine/feline practice)	The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.
IMAGING PERFORMED BY	Liver
Dr Sarah Barthelémy	The liver is of appropriate size and shape, with sharp borders and a mildly coarse parenchymal echotexture that is hypoechoic to the spleen. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.
HOSPITAL NAME	The gallbladder is moderately distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.
Alpine 24-hour PH	Gastrointestinal
REFERRING VET	The stomach is empty. The gastric wall is 4.6 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.
Dr Nielsen	The visualized portions of the duodenum, jejunum, and ileum are of normal thickness with intact wall layering that exhibits the appropriate 1:3 muscularis to mucosa ratio. The duodenal wall measures 4.2 mm. The jejunal wall measures up to 2.1 mm. Intestinal motility appears normal.
INVOICE	The visible portions of the colon are of normal thickness, up to 1.2 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.
12392	
DATE	
3.10.23	



PATIENT

Pancreas

George McIntyre

The areas of the limbs and body of the pancreas are isoechoic to the surrounding mesenteric fat, with normal capsular appearance. There is no evidence of peripancreatic inflammation. The pancreatic duct appears normal.

SPECIES

Free Abdomen

Canine

There is no evidence of free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are of appropriate echogenicity. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis.

BREED

ULTRASONOGRAPHIC FINDINGS

Chihuahua

Findings

SEX

- Unremarkable canine abdomen

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

There is no apparent explanation for the noted gastrointestinal signs noted on today's ultrasound. While the presence of a medullary rim sign is occasionally associated with renal disease, it is often an incidental finding and should be correlated with laboratory results.

3 years

Additional recommendations include:

WEIGHT

The changes in the gastrointestinal tract are consistent with gastroenteritis of unknown etiology.

6.3 kg

Recommendations include:

- fecal parasite testing and empiric fenbendazole treatment
- probiotic therapy
- bland diet
- treatment with parenteral fluids, antiemetics, antacids and gastroprotectants as clinically indicated.
- If signs persist, trials with a novel protein or hydrolyzed diet, a resting cortisol level and a GI panel could be considered.

INTERPRETED BY

Tam Mengine, DVM,
DABVP (canine/feline
practice)

**IMAGING
PERFORMED BY**

Dr Sarah Barthelemy

HOSPITAL NAME

Alpine 24-hour PH

REFERRING VET

Dr Nielsen

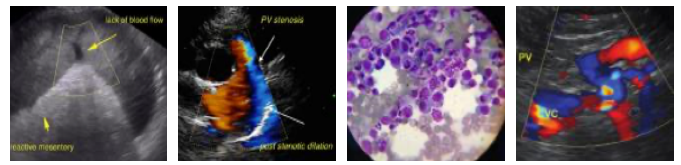


INVOICE

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DATE

3.10.23



PATIENT

George McIntyre

SPECIES

Canine

BREED

Chihuahua

SEX

Neutered Male

AGE

3 years

WEIGHT

6.3 kg

INTERPRETED BY

Tam Mengine, DVM,
DABVP (canine/feline
practice)

IMAGING PERFORMED BY

Dr Sarah Barthelmy

HOSPITAL NAME

Alpine 24-hour PH

REFERRING VET

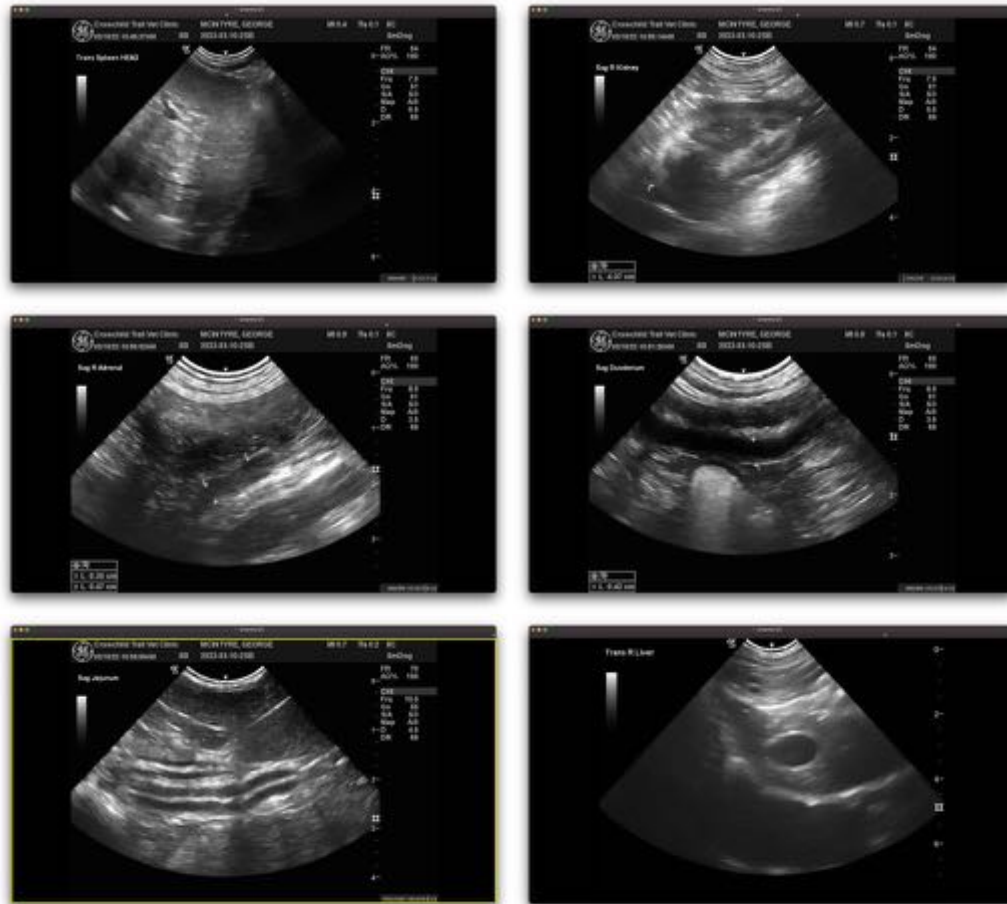
Dr Nielsen

INVOICE

12392

DATE

3.10.23



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.

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.

Tam Mengine, DVM, DABVP (canine/feline practice) info@SonoPath.com