



PATIENT PRESENTING CLINICAL SIGNS

Zoey Sadanoja For the past three months, very gradual weight loss. O not too concerned because is a little more active with new puppy. Has been pu/pd for 3 months. Still BAR, eating well, no vomiting past month or so but is noticing not as excited to eat just recently. Bms regular/formed. no c/s. Stilbestrol for urine incontinence, heartworm prevention are only meds currently.

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: Please see attached lab results. Bloodwork showed increased calcium levels.- 3 months ago, Urine showed no infection/crystals - spG 1.011. Repeat bloodwork two days ago - even more increase in calcium, rest of bloodwork WNLs. Attitude still normal. After ultrasound - plan is to send for a calcium panel/malignancy bloodwork.

BREED

Coonhound X

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

Spayed Female

The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra (visualized to 2.0 cm) are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted.

AGE

8 Years

The kidneys are of normal size and shape and exhibit appropriate corticomedullary differentiation with a normal 1:3 cortex to medulla ratio. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureter is not visible (normal). The left kidney measures 6.3 cm in length. The right kidney measures 6.1 cm in length.

WEIGHT

23.7 kg

Adrenal Glands

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 measures 9.8 mm at the cranial pole and 8.7 mm at the caudal pole. The right adrenal gland measures 8.0 mm at the caudal pole and 5.9 mm at the caudal pole.

INTERPRETED BY

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

Spleen

IMAGING PERFORMED BY

Crystal Hill

The splenic parenchyma is diffusely and subtly mottled with small hypoechoic nodules. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.

HOSPITAL NAME

Grand River VH

Liver

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.

REFERRING VET

Dr. Hornak/Day

The gallbladder is moderately distended with a small amount of freely moveable sludge. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

INVOICE

40422

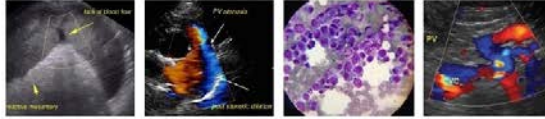
Gastrointestinal

The stomach is empty. The gastric wall is normal (4.1 mm thick) with normal deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.

DATE

8/12/22

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. Jejunal wall measures up to 3.8 mm. Intestinal motility appears normal.



PATIENT

Zoey Sadanoja

The visible portions of the colon are of normal wall thickness, up to 1.9mm. The ileocecal junction is visualized and appears normal. The distal most portion of the descending colon appears to be distended with very hard fecal matter.

SPECIES

Canine

Pancreas

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.

BREED

Coonhound X

Free Abdomen

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.

SEX

Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

8 Years

PRIMARY FINDINGS:

- Diffusely mottled spleen

WEIGHT

23.7 kg

SECONDARY FINDINGS:

- Suspicion for very hard stool in the distal colon

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

There is no apparent cause for the hypercalcemia and weight loss noted on today's scan. If not already performed, a rectal exam would be recommended to rule out the possibility of an anal sac adenocarcinoma. The planned hypercalcemia panel is an excellent next step, and if the panel supports primary hyperparathyroidism, then a cervical ultrasound or CT scan could be performed.

IMAGING PERFORMED BY

Crystal Hill

It is recommended to repeat a focal scan of the pelvic inlet following an enema, to ensure that the material noted adjacent to the bladder is in fact just hard stool.

HOSPITAL NAME

Grand River VH

The splenic changes are non-specific and could be consistent with nodular hyperplasia, extramedullary hematopoiesis, splenitis or less likely, neoplasia. Recommendations include:

- ❖ ultrasound-guided fine needle aspiration of affected areas with a 25G needle

REFERRING VET

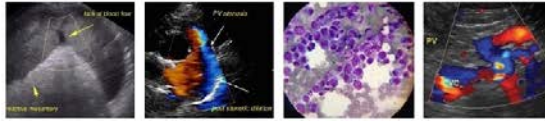
Dr. Hornak/Day

INVOICE

40422

DATE

8/12/22



PATIENT

Zoey Sadanoja

SPECIES

Canine

BREED

Coonhound X

SEX

Spayed Female

AGE

8 Years

WEIGHT

23.7 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Crystal Hill

HOSPITAL NAME

Grand River VH

REFERRING VET

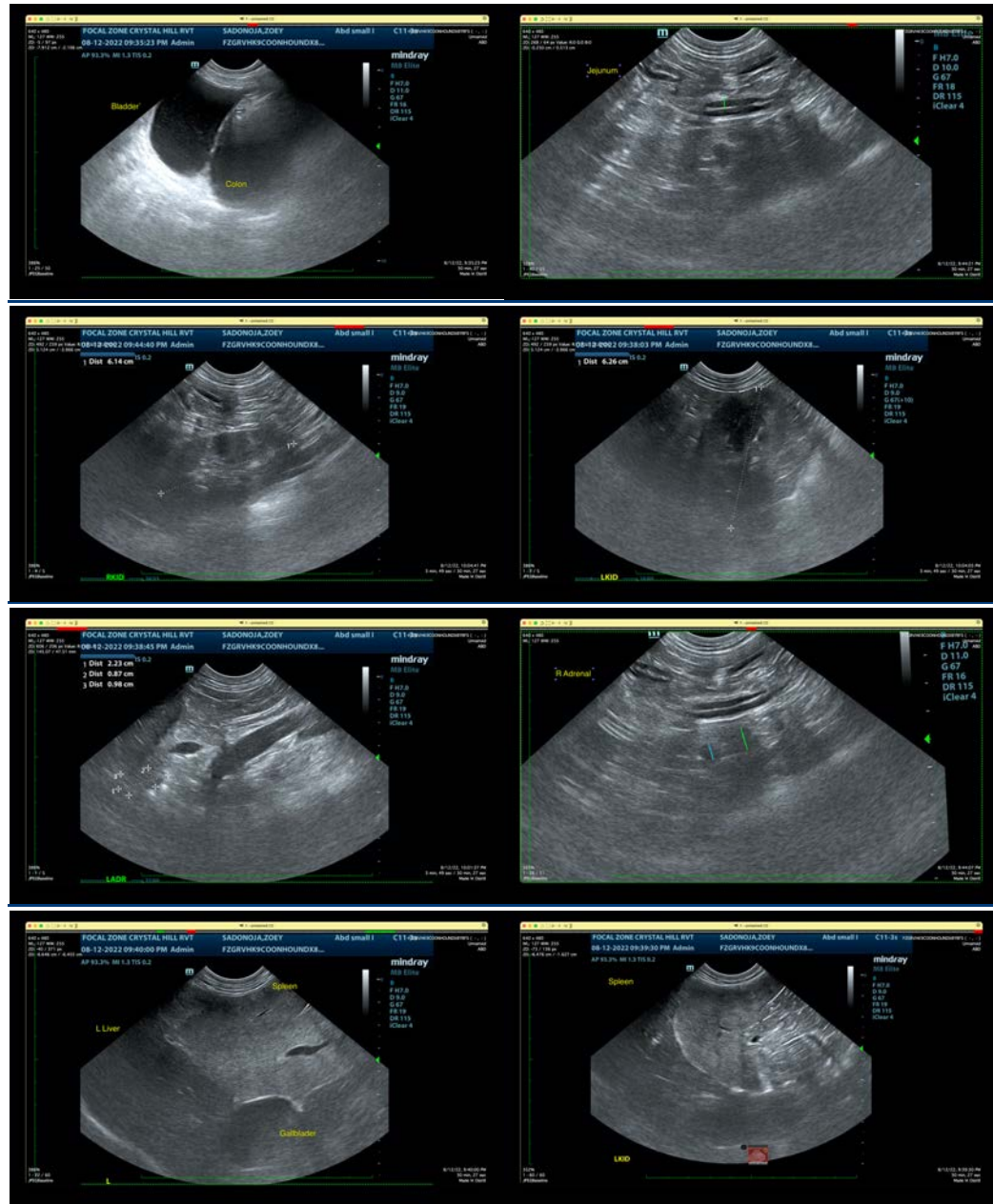
Dr. Hornak/Day

INVOICE

40422

DATE

8/12/22



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.

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

info@SonoPath.com