



## PATIENT

Pecorino Wolf

## SPECIES

Canine

## BREED

Pitbull Mix

## SEX

Neutered male

## AGE

11 years

## WEIGHT

77 lbs

## INTERPRETED BY

Dr. Alicia Angosto  
Guerrero

## IMAGING PERFORMED BY

Ashley McCaughan

## HOSPITAL NAME

Marina Village  
Veterinary &  
Integrative Care

## REFERRING VET

Dr. McCaughan

## INVOICE

73410

## DATE

3/11/26

## PRESENTING CLINICAL SIGNS

Seen as a 2nd opinion for Anxiety, possible pain contributing to anxiety, history of mild ALT elevations. Recommending full orthopedic assessment for pain (radiographs) as contributing factor to anxiety. Owner reports that symptoms (pacing, panting, restlessness, disturbed sleep, clinginess) are worse indoors and improve outdoors. Abdominal u/s performed as part of full senior imaging.

Abnormal PE/Chem/CBC/UA Results: Radiographs of TL spine show (DACVR report) - Spondylosis deformans is present at L2-3, L4-5, level 6-7 and the lumbosacral junction. Negative for evidence of thoracic metastatic lesions. Bloodwork: historical- 04/11/2025 - Bloodwork (Chemistry) - ALT 172 (H), 8/2025 - ALT 243. Slab fracture 108 noted on oral examination.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is anechoic. The bladder neck and proximal urethra have a normal appearance. No calculi are identified and there is no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size, measuring 6.56×3.24 cm. The cortical thickness measures 0.1 cm in the sagittal plane. The cortex is isoechoic compared with the hepatic parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

The right kidney is normal in shape and size. A small cortical cyst measuring 3.63×3.71 mm is identified. The cortex is isoechoic compared with the hepatic parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

### Adrenal Glands

Both adrenal glands demonstrate normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane: the left adrenal gland measures 0.95 cm at the cranial pole and 0.89 cm at the caudal pole. The right adrenal gland was not confidently visualized.

### Spleen

No images or video clips of the spleen were available for evaluation.

### Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The hepatic parenchyma appears uniform and isoechoic relative to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed. The gallbladder was minimally visualized in one video clip and could not be adequately evaluated.



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## *Gastrointestinal*

The stomach is empty and folded with gas within the lumen. Gastric mural thickness measures 2.37 mm with preserved wall layering. The pylorus measures 5.56 mm.

Duodenum: 4.51 mm.  
Jejunum: 3.20–3.88 mm.

Wall layering is preserved throughout the evaluated segments. No sonographic evidence of inflammation, ileus, or foreign material is identified.

Colon: 1.08 mm, with formed fecal material in the descending segment.

## *Pancreas*

No images or video clips of the pancreas were available for evaluation.

## *Peritoneal Cavity*

No sonographic evidence of abdominal effusion, peritonitis, or lymphadenomegaly is identified. The iliac trifurcation region appears normal.

## ULTRASONOGRAPHIC FINDINGS

- Mild enlargement of the left adrenal gland.
- Small right renal cortical cyst (3.63×3.71 mm)

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver appears sonographically normal, which does not exclude mild hepatocellular disease but makes clinically significant structural hepatopathy unlikely. Chronic mild ALT elevation in dogs with a normal hepatic ultrasound is most commonly associated with early or mild hepatocellular disease, reactive hepatopathy, early vacuolar hepatopathy, or extrahepatic causes such as chronic pain or stress.

The left adrenal gland is enlarged, measuring up to 0.95 cm in dorsoventral diameter. In dogs, adrenal thickness typically remains  $\leq 0.7$  cm. In the absence of typical clinical signs of hyperadrenocorticism, normal ALP activity, and no ultrasonographic evidence of vacuolar hepatopathy, this finding most likely represents physiologic or stress-related adrenal hyperplasia. Early hyperadrenocorticism is considered unlikely but cannot be completely excluded on ultrasound alone.

A small right renal cortical cyst is present and is considered a common incidental finding in geriatric dogs.

Recommendations



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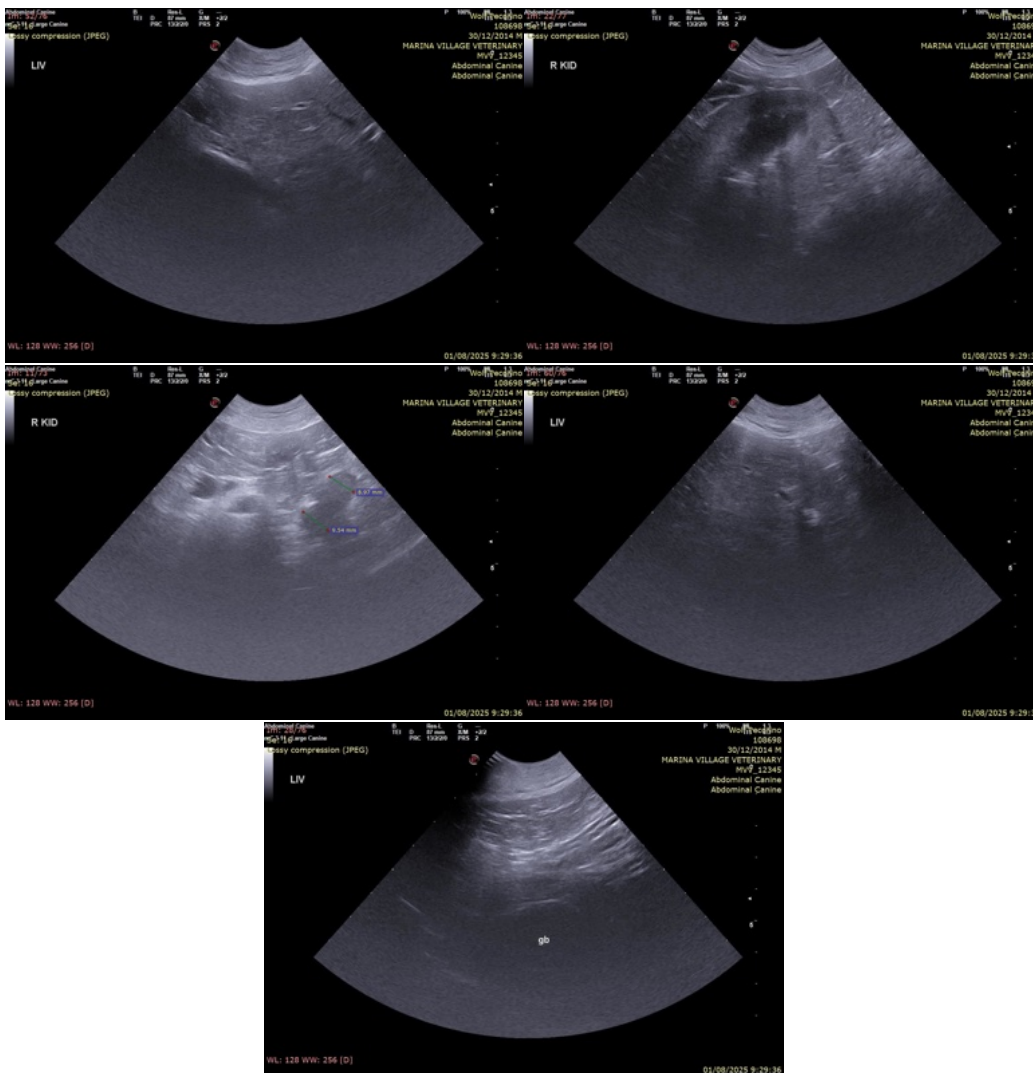
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- Serial monitoring of liver enzymes is recommended to assess progression or stability of the mild hepatocellular leakage.
- If ALT continues to increase or clinical signs develop, further hepatobiliary evaluation (repeat ultrasound, bile acids, or additional diagnostics) may be considered at the discretion of the attending clinician.
- Only if clinically indicated, consider screening for hyperadrenocorticism.



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.



## PATIENT

Alicia Angosto Guerrero, DMV, PgDip, MSc.

Pecorino Wolf

MV Esp Ultrasound in Domestic and Wild Animals

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[info@SonoPath.com](mailto:info@SonoPath.com)

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