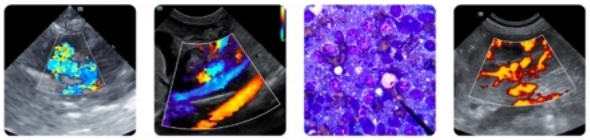


PATIENT

Lilly Loiselle

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed female

AGE

10 years

WEIGHT

16.4 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Cronin

HOSPITAL NAME

Ark AH

REFERRING VET

Dr. Cronin

INVOICE

73821

DATE

3/25/26

PRESENTING CLINICAL SIGNS

- History of chronically elevated liver values, have increased since 2024. Mild weight loss (1/2 lb since 2024).
- CBC - WBCs 3.4, individual cell counts wnl. ALT 507. ALP 163.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is incompletely distended. The wall measures 2.74 mm; however, this may be overestimated due to underdistension. The urine is anechoic. The bladder neck and proximal urethra appear normal. No calculi or sonographic evidence of inflammatory or neoplastic changes are identified.

The left kidney is normal in shape and size, measuring 3.84×2.89 cm. Cortical thickness is 0.55 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio and definition are preserved. No evidence of pyelectasia, nephrolithiasis, or hydronephrosis is identified. Color Doppler shows a normal vascular pattern.

The right kidney is normal in shape and size, measuring 4.23×2.68 cm. Cortical thickness is 0.50 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio and definition are preserved. No evidence of pyelectasia, nephrolithiasis, or hydronephrosis is identified. Color Doppler shows a normal vascular pattern.

Adrenal Glands

Both adrenal glands show normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane: The left adrenal gland measures 0.49 cm at the cranial pole and 0.50 cm at the caudal pole. The right adrenal gland was not confidently visualized.

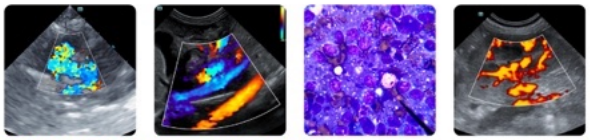
Spleen

Splenic thickness is 1.56 cm. The parenchyma demonstrates normal echogenicity and fine homogeneous echotexture without focal parenchymal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp margins and mildly irregular contour, most notably in the right lobes. The parenchyma is isoechoic relative to falciform fat, with mildly coarse echotexture. Multiple small hypoechoic foci (<1 cm) are scattered throughout the hepatic parenchyma. No hepatic lymphadenopathy is identified.

The gallbladder is normally distended. The wall is thin. The contents are anechoic. No dilation of the cystic duct or common bile duct is observed.



PATIENT

Lilly Loiselle

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed female

AGE

10 years

WEIGHT

16.4 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Cronin

HOSPITAL NAME

Ark AH

REFERRING VET

Dr. Cronin

INVOICE

73821

DATE

3/25/26

Gastrointestinal

The stomach is empty and folded, with a wall thickness of 1.91–2.97 mm and preserved layering. The pylorus measures 4.49 mm.

The duodenum measures 2.44 mm and the jejunum 3.60 mm. Wall layering is preserved. The ileocecal junction was not visualized. No evidence of inflammation, ileus, or intraluminal foreign material is identified.

The colon measures 0.82 mm and contains formed feces in the descending segment.

Pancreas

The evaluated pancreatic areas do not show evidence of overt inflammation or neoplastic disease.

Free Abdomen

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

PRIMARY FINDINGS

- Mildly coarse hepatic echotexture.
- Multiple small (<1 cm) hypoechoic hepatic nodules.
- Mild irregular hepatic contour.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver shows mild parenchymal heterogeneity with multiple small hypoechoic foci and subtle contour irregularity. These findings are nonspecific but indicate underlying structural hepatic disease and likely account for the elevated ALT.

Differential considerations include chronic hepatopathy (chronic hepatitis or nodular hyperplasia). Although less likely, infiltrative or metastatic disease cannot be completely excluded based on imaging alone. Ultrasonographic features are not specific enough to differentiate between these entities.

Recommendations
Further hepatic investigation is warranted, given the degree of ALT elevation and structural changes.

- Consider:
  - Bile acids testing.
  - Ultrasound-guided liver sampling (FNA ± biopsy) depending on clinical decision-making.
- Coagulation profile recommended prior to any invasive procedure.
- Hepatoprotective therapy.
- Ongoing monitoring if invasive diagnostics are deferred.

PATIENT

Lilly Loiselle

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed female

AGE

10 years

WEIGHT

16.4 lbs

INTERPRETED BY

Alicia Angosto Guerrero, DMV, PgDip, MSc.

IMAGING PERFORMED BY

Dr. Cronin

HOSPITAL NAME

Ark AH

REFERRING VET

Dr. Cronin

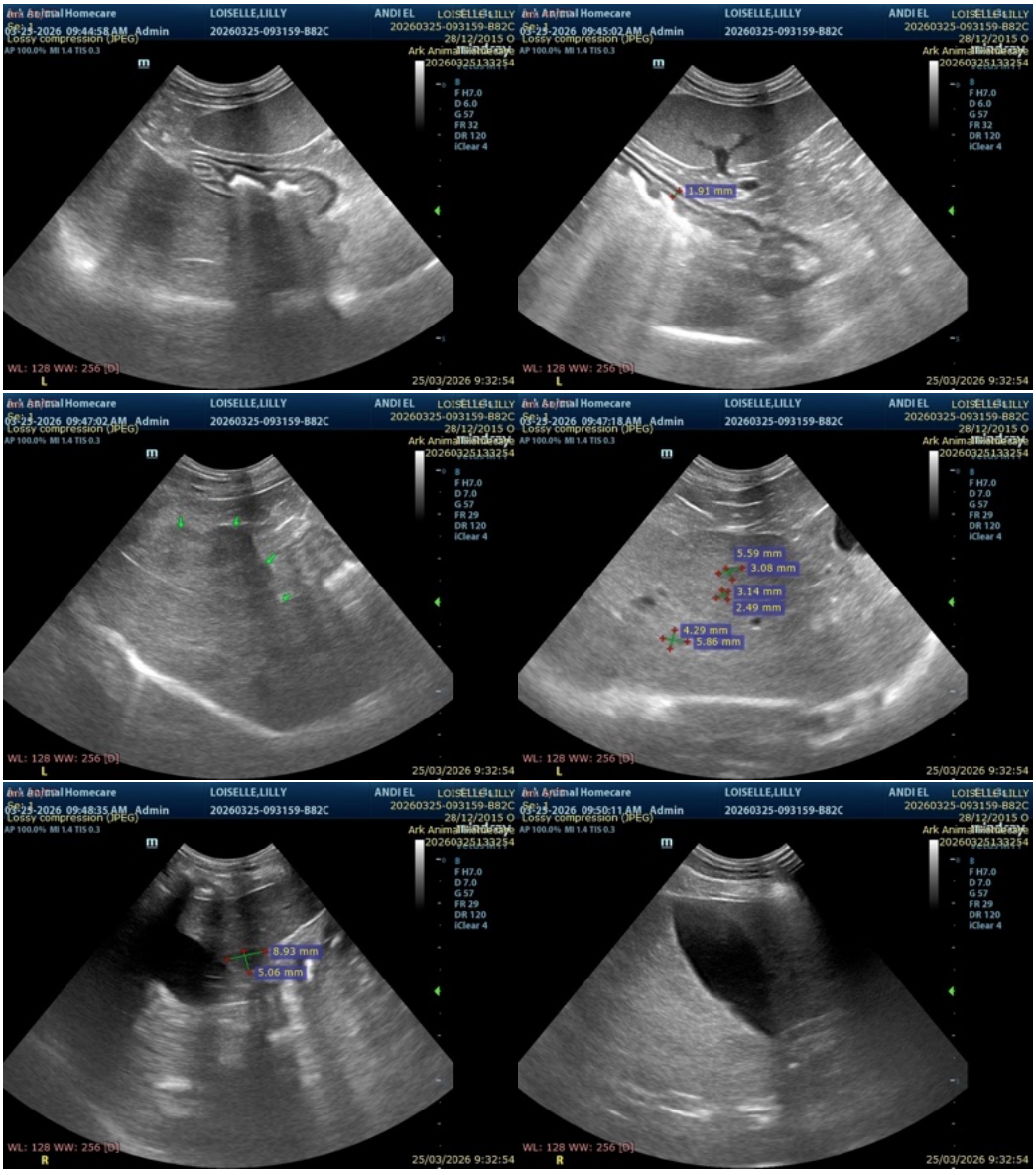
INVOICE

73821

DATE

3/25/26

Final diagnostic and therapeutic decisions should be made by the attending veterinarian, who can best integrate these findings with the patient's clinical status.



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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

info@SonoPath.com