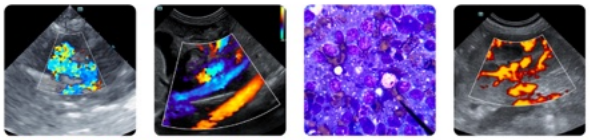


PATIENT

Sprocket Riddell

SPECIES

Canine

BREED

Maltese Mix

SEX

Neutered male

AGE

9 years

WEIGHT

10.2 kg

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Jessica Morgan

HOSPITAL NAME

Oxford County VC

REFERRING VET

Dr. Andratis

INVOICE

72284

DATE

3/6/26

PRESENTING CLINICAL SIGNS

- Elevated liver enzymes
- Feb 25 2026 - ALT 237 u/l 10-125 normal; ALKP 777u/L 23 to 212 normal March 6th - ALT increased to 284, and ALKP increased to 925 and albumin jumped to 42 from 39 g/L

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is markedly underdistended, and the urinary bladder wall measures approximately 3.77 mm. The wall appears subjectively thickened; however, accurate assessment is limited due to underdistension, and the measurement may be overestimated. The urine is anechoic. The bladder neck and proximal urethra appear normal. There are no calculi and no evidence of overt inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 4.47×2.72 cm, and the thickness of the cortex is 0.52 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis. Color Doppler demonstrates a normal vascular pattern.

The right kidney is normal in shape and size: 5.01×3.09 cm, and the thickness of the cortex is 0.55 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis. Color Doppler demonstrates a normal vascular pattern.

The prostate measures 1.05×1.20 cm. The parenchyma is homogeneous and mildly hypoechoic, compatible with post-castration prostatic atrophy.

Adrenal Glands

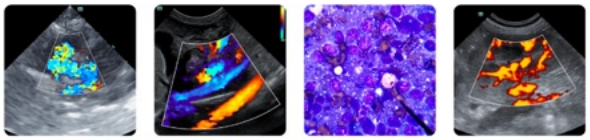
Both adrenal glands show normal shape and echogenicity. Visualization of the left adrenal gland is slightly suboptimal. The left adrenal gland measures approximately 0.55 cm at the cranial pole and 0.38 cm at the caudal pole. The right adrenal gland could not be reliably visualized in the provided images.

Spleen

Splenic thickness measures 1.07 cm. The parenchyma demonstrates normal echogenicity and fine homogeneous echotexture without focal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively increased in size, with rounded edges and a regular contour. The hepatic parenchyma appears uniform and isoechoic relative to the falciform fat, with preserved echotexture. No focal hepatic lesions are identified. No hepatic lymphadenopathy is observed.



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The gallbladder lumen is normally distended. The wall is thin and the contents contain a moderate to large amount of biliary sludge. No ultrasonographic evidence of gallbladder mucocele or mucosal glandular hyperplasia is identified. No dilation of the cystic duct or common bile duct is observed.

Gastrointestinal

The stomach is empty and folded, with preserved wall layering and mural thickness measuring approximately 1.75 mm. The pylorus measures 5.02 mm and contains a small amount of fluid.

The duodenum measures 3.09 mm. The jejunum measures 3.03–3.13 mm with preserved wall layering. The ileum and ileocecal junction were not reliably visualized in the provided images. No ultrasonographic evidence of intestinal inflammation, ileus, or foreign material is identified.

The colon measures 2.14 mm in the transverse segment and 1.27 mm in the descending segment. The lumen contains a small amount of fecal material and the colonic segments appear partially collapsed.

Pancreas

The evaluated pancreatic regions do not show ultrasonographic evidence of inflammation or focal pancreatic lesions.

Peritoneal Cavity

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

ULTRASONOGRAPHIC FINDINGS

- Mild hepatomegaly with rounded hepatic margins
- Moderate to large amount of biliary sludge within the gallbladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver is subjectively enlarged with rounded margins, and the gallbladder contains a moderate to large amount of biliary sludge. In the context of markedly elevated ALP and moderately increased ALT, these findings are most compatible with cholestatic hepatobiliary disease. Common causes of this pattern in small-breed dogs include vacuolar hepatopathy, steroid-associated hepatopathy, endocrine disease (such as hyperadrenocorticism), or chronic hepatobiliary dysfunction.

No ultrasonographic evidence of biliary obstruction, gallbladder mucocele, or focal hepatic mass lesions is identified.

The remainder of the abdominal organs appear within normal ultrasonographic limits, including the left adrenal gland.

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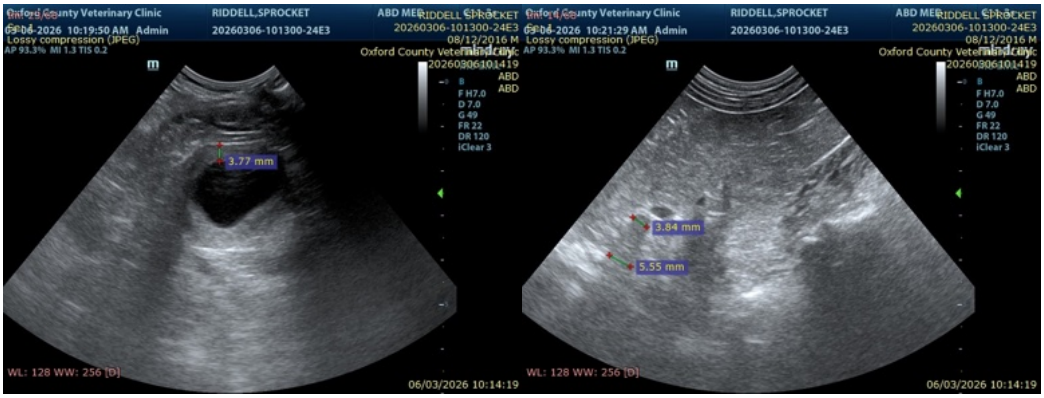
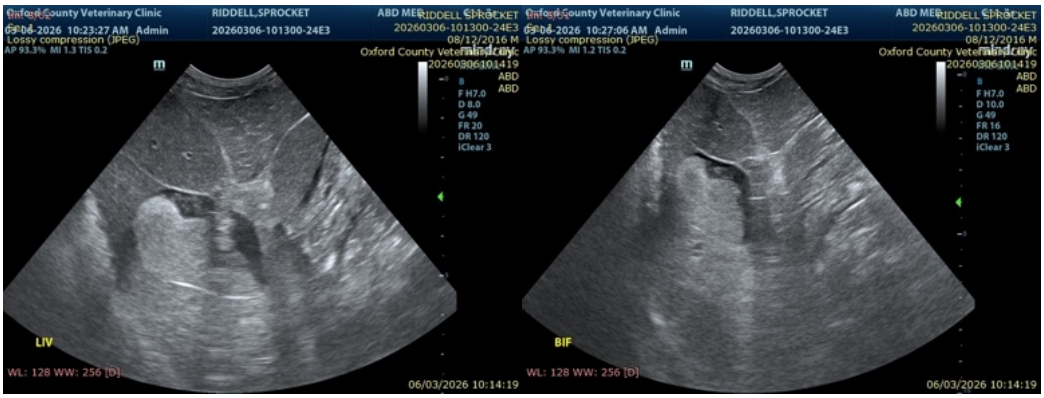
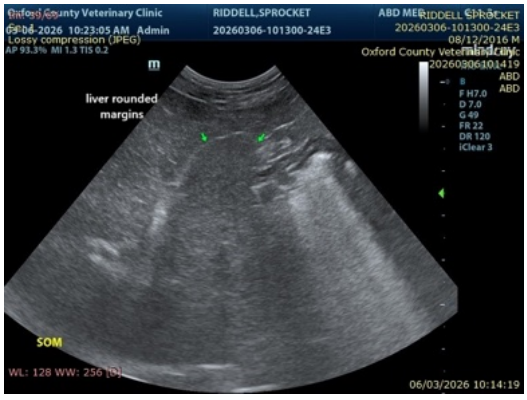
Recommendations

- Correlation with the patient's progressively increasing liver enzymes is recommended.
- Supportive hepatobiliary therapy (hepatoprotectants and ursodeoxycholic acid) may be considered at the clinician's discretion.
- Additional diagnostics to further characterize hepatobiliary disease may be considered at the discretion of the attending veterinarian, including bile acids testing, endocrine screening (hyperadrenocorticism), and hepatic sampling if clinically indicated.







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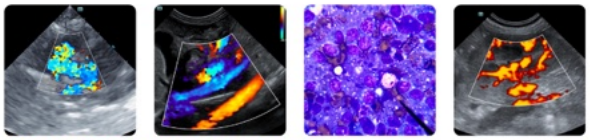

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

MV Esp Ultrasound in Domestic and Wild Animals

info@SonoPath.com