



PATIENT PRESENTING CLINICAL SIGNS

Olive the dog ranch History: Chief Concern / Provisional Diagnosis: ~ 10lb weight loss - not intentional elevated ALT
Relevant Medical History and Physical Exam findings: ~ Addison's disease Recent Diagnostics:
Relevant Laboratory Results / Abnormalities: ~ ALT 818 (10-125)

SPECIES

Canine Current medications (include full name, dosage and frequency): ~ Percorten 25mg/ml, 2.2ml IM
monthly Prednisolone 2.5mg tab, 1/2 tab po Q24h Relevant Radiograph Findings (email radiographs if
available): ~

BREED

Pitbull Additional History: Unintentional weight loss and an elevated ALT of 818. Has Addison's Disease.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

Spayed Female The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is
smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory
changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra,
visible to a depth of 2 cm, are normal.

AGE

5 years The left kidney presented normal size (6.94 cm in length); normal shape and architecture with smooth
peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary
distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

54 Pounds The right kidney presented normal size (7.21 cm in length); normal shape and architecture with smooth
peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary
distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM (Small
Animal Internal Medicine)

Adrenal Glands

The caudal pole of the left adrenal gland is visualized and is small in size (0.38 cm in width) with a
normal shape, glandular echogenicity and detail. Surrounding vasculature are normal.

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

The caudal pole of the right adrenal gland is visualized and is small in size (0.48 cm in width) with a
normal shape, glandular echogenicity and detail. Surrounding vasculature are normal.

HOSPITAL NAME

Mountainview AH

Spleen

The spleen is normal in size (2.13 cm in width at the level of the hilus) with a normal capsular
contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic
vasculature is normal.

REFERRING VET

Dr. Sarah Kalivoda

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate
echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or
regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence
of congestion. No pathological hepatic lymphadenopathy observed.

INVOICE

10232 The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are
anechoic. The cystic and common bile ducts are normal.

DATE

1/27/22

Gastrointestinal

The gastric lumen is not distended. The gastric wall and the region of the fundus are normal in



PATIENT

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thickness with a normal layering pattern. The pyloric outflow tract is questionably thickened. The proximal duodenal lumen is mildly fluid distended. The remaining small intestinal lumen is not dilated. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. The colonic wall is normal. There is no obvious evidence of an obstructive pattern.

SPECIES

Canine

Pancreas

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

BREED

Pitbull

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. One to two prominent mesenteric lymph nodes are observed, the largest measuring 1.94 cm in length.

SEX

Spayed Female

Other

A brief echocardiogram reveals no evidence of pericardial effusion.

AGE

5 years

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- An obvious cause for the elevated liver enzymes is not identified in the study. However, a microscopic hepatopathy (i.e., bacterial cholangiohepatitis, Leptospirosis, chronic active hepatitis, copper-associated hepatotoxicity, infiltrative neoplasia (less likely)) cannot be excluded.

WEIGHT

54 Pounds

Secondary Findings

- The bilaterally small adrenal glands are likely secondary to atrophy due to hypoadrenocorticism.
- Age-related pancreatic remodeling
- The lymph node changes are most consistent with reactive lymphadenitis or lymphoid hyperplasia.
- Questionable wall thickening in the region the pyloric antrum

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Leptospirosis testing (i.e., blood-in-urine PCR, serology) is recommended as well as pre-and postprandial serum bile acids. Also consider hepatic tissue sampling (i.e., fine-needle aspirates) or surgical biopsies. If biopsies are pursued, additional hepatic tissue sampling for copper quantitation should also be obtained as well as aerobic and anaerobic bile cultures. While awaiting test results, empirical treatment for bacterial cholangiohepatitis (i.e., broad-spectrum antibiotics, hepatic antioxidants) is recommended.
- A recheck ultrasound of the gastric outflow tract is recommended in 2-3 weeks to reassess the region.

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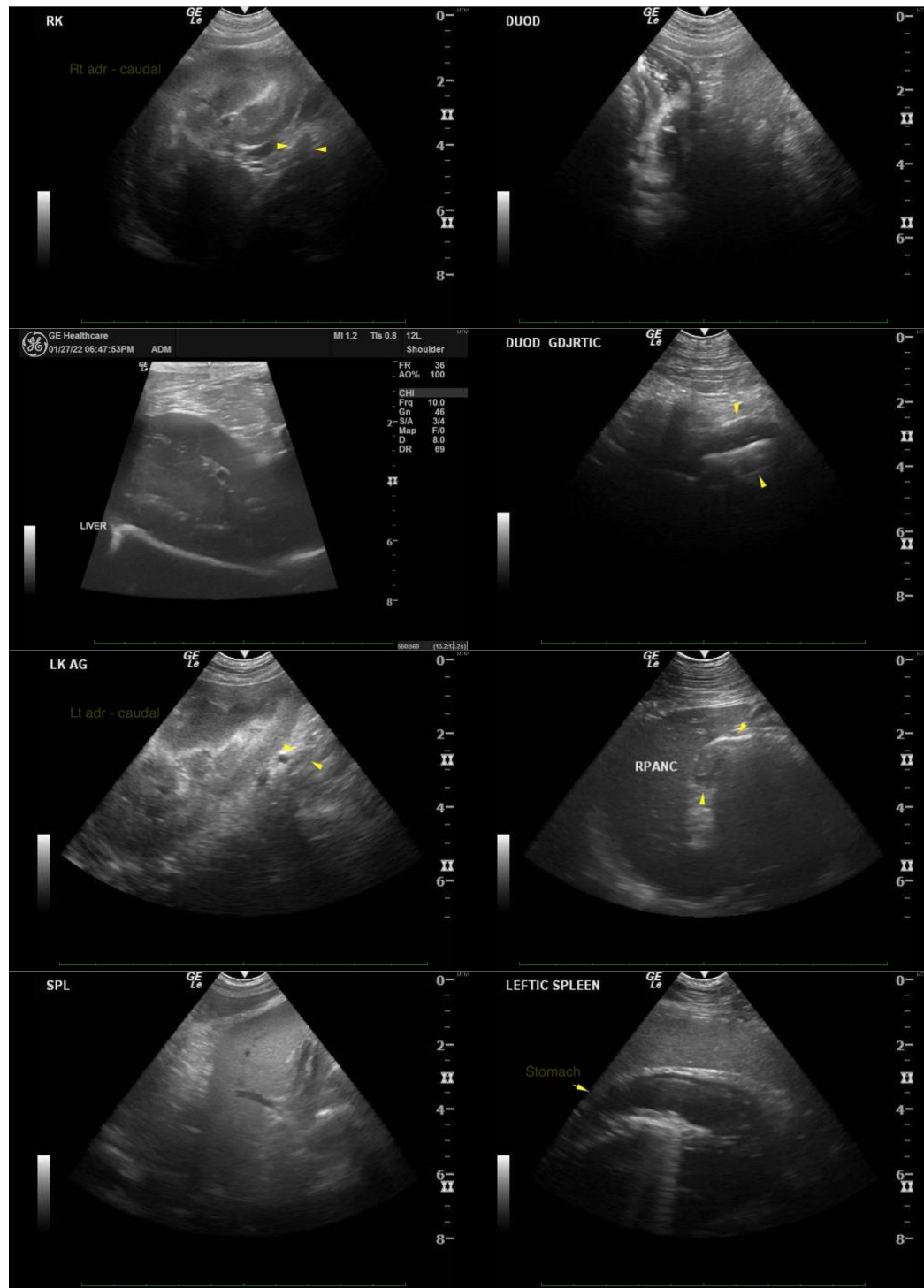
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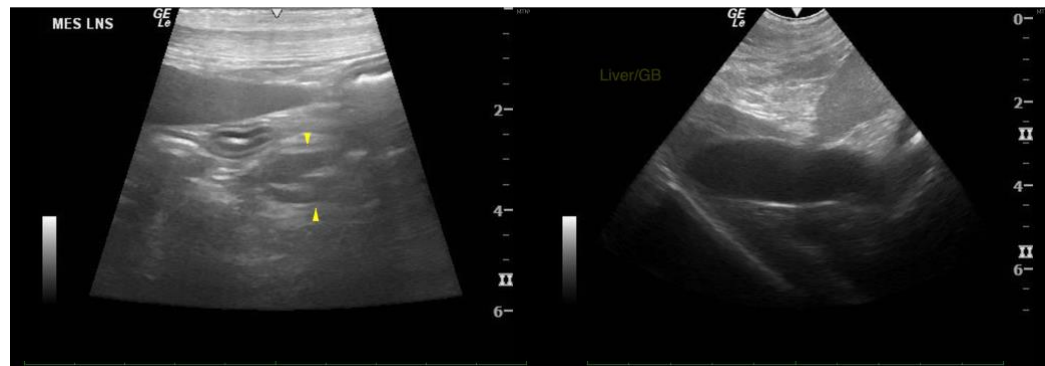
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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