

**DATE PRESENTING CLINICAL SIGNS**

4/11/22

Rechecking elevated ALKP.

PATIENT

Current Medications: Dasuquin with MSM, Nordic Naturals fish oil- both daily.

Lab Results: ALKP 6/2021 567, ALKP 11/2021 658, ALKP 3/2022 764. Resting cortisol checked 11/6/21 was 1.3. ACTH 11/9/21 pre 5.1, post 17.1.

Elby Williams

Radiographs:

Date of Previous IntraPet Ultrasound: 10/25/21. See attached.

SPECIES

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Canine

Imaging Performed By: Andi Parkinson, RDMS.

BREED

Westie

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System****SEX**

The urinary bladder and visible portion of the pelvic urethra are normal for the degree of luminal distension. The urine is anechoic with no evidence of debris. Cystic calculi and discrete masses are not observed. The region of the trigone is normal.

Male, neutered

AGE

The prostate is not definitively visualized due to its pelvic location.

4/1/2012

WEIGHT

18 lbs.

The left kidney is normal in size (4.47 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

The right kidney is normal size (4.76 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.33 cm at cranial pole) (0.45 cm at caudal pole) (1.74 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

HOSPITAL NAME

Warm & Fuzzy VC

The right adrenal gland is normal size (0.50 cm at cranial pole) (0.42 cm at caudal pole) (1.88 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

REFERRING VET

Dr. Williams

Spleen

The spleen is normal in size (1.16 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.

INVOICE

13177

Liver

The liver is subjectively prominent in size with normal curvilinear peripheral contours. The parenchyma is isoechoic relative to the spleen and subtly heterogeneous in appearance with one ill-defined hyperechoic nodule (0.60 cm) in the caudal aspect, one ill-defined hypoechoic area (2.17 cm) near the diaphragm and a 0.98 x 0.62 cm anechoic cyst approximately mid-liver. The gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated echogenic sludge is observed within the lumen, some of which is partially dependent and some of which is suspended/stranding. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The gallbladder changes could be consistent with cholestasis, early mucocele formation or secondary to fasting (less likely). Changes are similar-to-slightly progressed since the previous sonogram.
- Suspected benign diffuse hepatopathy. Top differentials include regenerative nodular hyperplasia and vacuolar hepatopathy. Inflammatory disease is considered unlikely given the normal ALT. Infiltrative neoplasia is possible but also considered unlikely given the sonographic appearance. Changes are similar to the previous sonogram.

Secondary Findings:

- Bilateral, age-related renal changes with dystrophic mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the gallbladder changes, Ursodiol therapy can be considered with serial monitoring of the patient's liver values and gallbladder (via ultrasound) every 3-4 months to assess for progression. These parameters should be measured more frequently if liver values are rising quickly and/or if the gallbladder appears to be progressing towards a mucocele.



The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com