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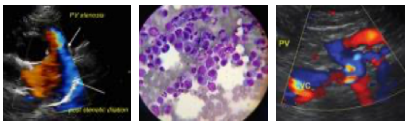

SonoPath
Clinical Sonography & Telecytology
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DATE

8/16/21

PATIENT

Zoey Beckner

SPECIES

Canine

BREED

Maltese

SEX

Female, spayed

AGE

6/4/2012

WEIGHT

14 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Happy Tails Veterinary Hospital

REFERRING VET

Dr. Calpeno

INVOICE

11883

PRESENTING CLINICAL SIGNS

History: History of persistent elevated/elevating liver values.
Current Medications: Ursodiol 10mg/kg/d, Denamarin 1/4 tab of sm/md dog size q24h.
Lab Results: increased alp 478 (previous 3/2021 - 424).
Date of Previous IntraPet Ultrasound: No previous IntraPet scans.
Sedation: Not needed.
Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. 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.

The left kidney is normal size (3.69 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. Renal vasculature is normal.

The right kidney is normal size (4.43 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. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal size (0.61 cm at cranial pole) (0.54 cm at caudal pole) (1.80 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.

The right adrenal gland is normal size (0.60 cm at cranial pole) (0.49 cm at caudal pole) (2.01 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.

Spleen

The spleen is normal in size (1.04 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.

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. The gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated echogenic to mineralized partially dependent debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The proximal duodenal lumen is mildly fluid distended. The remainder of the small intestinal lumen is not dilated. The remainder of 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 body/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. A 0.59 cm hyperechoic to mineralized focus is observed in the pancreatic body. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 0.78 cm sublumbar lymph node is visualized.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- An obvious cause for the elevated ALP is not identified in this study. However, a benign process (i.e., vacuolar hepatopathy, regenerative nodular hyperplasia and/or age-related remodeling) is considered likely, particularly in light of the normal ALT and total bilirubin.
- Gallbladder debris, non-mucocele.

Secondary Findings:

- The prominent sublumbar lymph node is most likely reactive.
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- The mineralized nodule within the pancreatic parenchyma is thought to be a benign incidental finding. However, an early neoplastic process cannot be completely excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Continued monitoring (i.e., every 3-4 months) of the patient's liver values is recommended. If values continue to increase, repeat abdominal ultrasound +/- hepatic tissue sampling may be warranted.


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BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:06:05 PM Admin
HAPPYzbk9maltfs2012abd
mindray
Spleen


IntraPet Imaging SPIILLC IntraPet I...
BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:07:14 PM Admin
HAPPYzbk9maltfs2012abd
mindray
1 Dist 1.80 cm
2 Dist 0.64 cm
3 Dist 0.61 cm
LT


IntraPet Imaging SPIILLC IntraPet I...
BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:08:01 PM Admin
HAPPYzbk9maltfs2012abd
mindray
1 Dist 0.78 cm
sublumbar lymph


IntraPet Imaging SPIILLC IntraPet I...
BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:10:17 PM Admin
HAPPYzbk9maltfs2012abd
mindray
1 Dist 2.01 cm
2 Dist 0.56 cm
3 Dist 0.60 cm
RT


IntraPet Imaging SPIILLC IntraPet I...
BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:04:18 PM Admin
HAPPYzbk9maltfs2012abd
mindray
Liver


IntraPet Imaging SPIILLC IntraPet I...
BECKNER,ZOEY
Abd small I
CYT-36
08-16-2021 12:10:53 PM Admin
HAPPYzbk9maltfs2012abd
mindray
RT

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*)
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