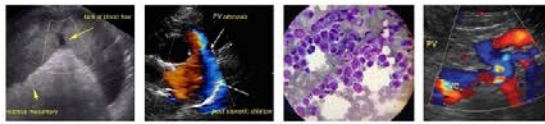


PATIENT	PRESENTING CLINICAL SIGNS
Cookie Sharma	Increased liver enzymes September 9th, 2022 - no clinical signs associated with liver disease. Discussed increase in ALP and ALT from September 9th visit. Suggested considering abdominal ultrasound. Owner would like to repeat blood work one more time. Will switch from Hepato Support to Aventi Liver Complete. Recheck booked. Owners will call back if any clinical signs arise: lethargy, anorexia, vomiting, ascites or change in stool consistency. If liver values do not improve by next blood work they will book U/S. Current Medications Aventi liver, thyro tabs
SPECIES	
Canine	
BREED	
Corgi X	Abnormal PE/Chem/CBC/UA Results: SM: 11-29-22 at 4:17p: Blood shows ALT of 126 (improved from 243) and ALK of 1126 (was 584) Spoke to owner, no signs of Cushings disease or arthritis. It is good that ALT has normalized but concerning that ALK has doubled. Will go ahead with an U/S. Owner notes no PU/PD but the occasional gurgly stomach and off food. Dispense Aventi Liver x 90 tabs
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Neutered Male	Urinary System
AGE	The urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.
10 Years	Prostate is normal in size, echotexture and echogenicity for a neutered male.
WEIGHT	The right kidney is normal in size (4.92 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
8 kg	The left kidney is normal in size (4.64 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.
INTERPRETED BY	Adrenal Glands
Beth Johnson, DVM DACVIM	The right adrenal gland is normal in size (1.5 cm long x 1.0 cm at the cranial pole and 0.42 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
IMAGING PERFORMED BY	The left adrenal gland is normal in size (1.67 cm long x 0.42 cm at the cranial pole and 0.43 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
Kelly Reschny	
HOSPITAL NAME	Spleen
Snelgrove VS	The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.
REFERRING VET	Liver
Dr. McQueen	The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. In the mid caudal liver, adjacent to the gallbladder, there is a 3.0 cm x 4.0 cm heterogeneous, primarily hyperechoic mass. In the ventral caudal liver, there is a 1.5 cm x 1.1 cm anechoic/cystic lesion, consistent with a liver cyst. Visible vasculature and biliary tree appear normal without distension or congestion.
INVOICE	
43117	
DATE	
12/1/22	



PATIENT

Cookie Sharma

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

SPECIES

Canine

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta.

There is no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

BREED

Corgi X

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease.

SEX

Neutered Male

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Pancreas

AGE

10 Years

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

WEIGHT

8 kg

Free Abdomen

There is no evidence of free peritoneal effusion noted in these images.

There is no apparent lymphadenopathy noted in these images.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

ULTRASONOGRAPHIC FINDINGS

- Discrete mid caudal liver mass – concerning for infiltrative neoplasia such as a hepatocellular carcinoma versus round cell neoplasia versus sarcoma versus other. A benign hepatoma/adenoma, marked nodular hyperplasia, etc. is possible, but considered less likely.
- The cystic lesion is most consistent with a benign hepatic cyst.

IMAGING PERFORMED BY

Kelly Reschny

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Snelgrove VS

Three view thoracic radiographs are recommended for further assessment of cardio-pulmonary status as well as to further evaluate for any evidence of metastatic disease, if not recently evaluated.

A fine needle aspirate of the liver mass is recommended if patient's coagulation status is appropriate. Alternatively, an exploratory laparotomy for planned excisional biopsy/mass removal could be considered. Given the discrete nature and location of the mass, resectability is considered likely.

REFERRING VET

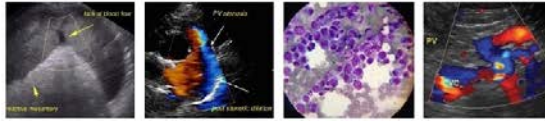
Dr. McQueen

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DATE

12/1/22



PATIENT

Cookie Sharma

SPECIES

Canine

BREED

Corgi X

SEX

Neutered Male

AGE

10 Years

WEIGHT

8 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Snelgrove VS

REFERRING VET

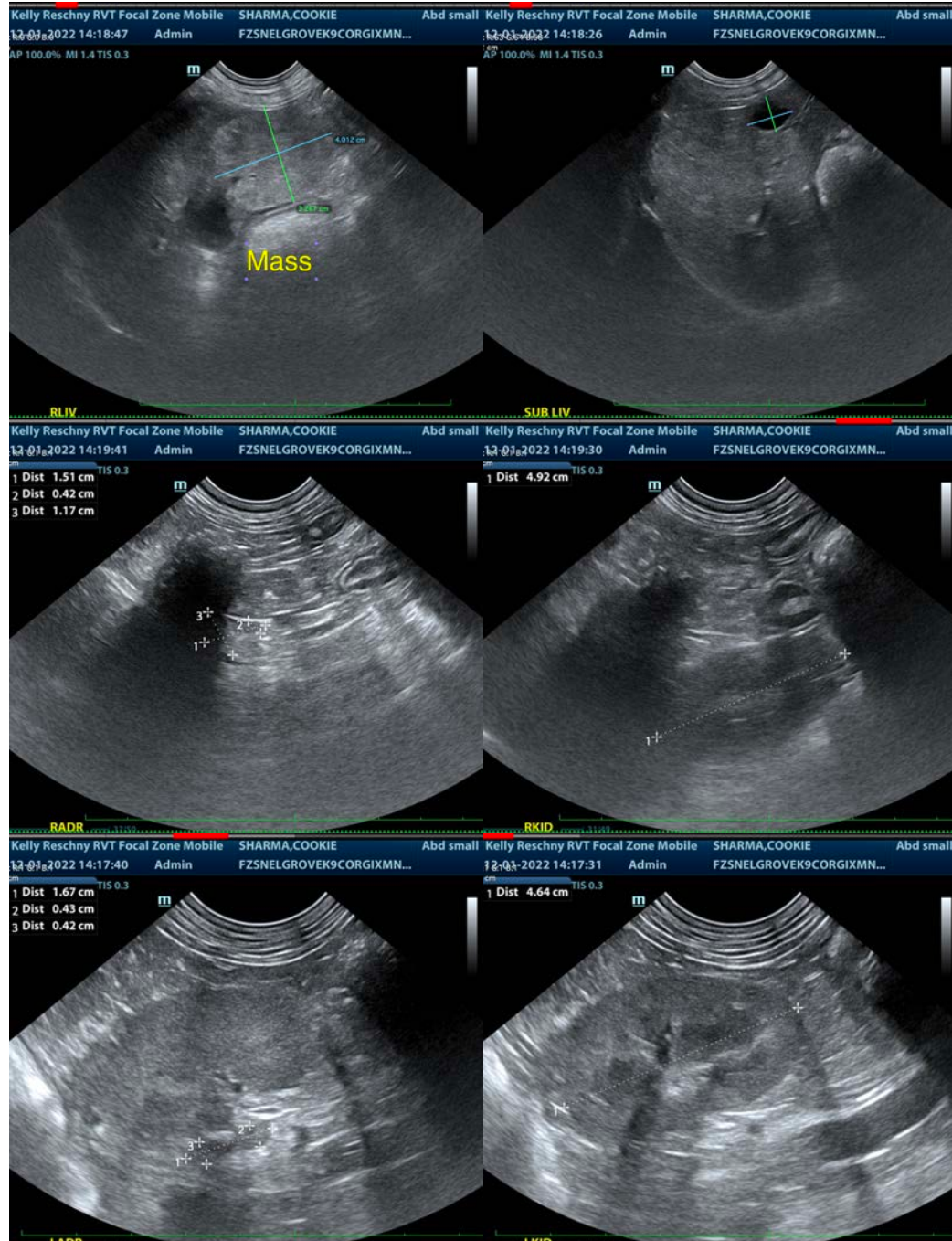
Dr. McQueen

INVOICE

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DATE

12/1/22



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.

Beth Johnson, DVM, DACVIM
Beth.Johnson@sonopath.com