

PATIENT PRESENTING CLINICAL SIGNS

Frankie Marks Elevated ALT and ALKP, distended abdomen.
Abnormal PE/Chem/CBC/UA Results: Alt 254, ALKP 243

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

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.

BREED

Dachshund Prostate (neutered) is normal in size, echotexture and echogenicity for a neutered male.

SEX

Right kidney is normal in size (4.16 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.

Neutered Male

AGE

Left kidney is normal in size (4.22 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.

10 Years

Adrenal Glands

The left adrenal gland is enlarged in size (1.66 cm long, 0.65 cm at the cranial pole and 0.72 cm at the caudal pole. Normal shape and contour are maintained. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

WEIGHT

12.7 Pounds

The right adrenal gland is enlarged in size (1.98 cm long, 1.23 cm at the cranial pole and 0.60 cm at the caudal pole. Normal shape and contour are maintained. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BY

Spleen

Beth Johnson, DVM
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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.

HOSPITAL NAME

Liver

Tranquility VC

Liver is subjectively enlarged. Margins are smooth but round. It has a normal homogenous echotexture. Parenchyma is diffusely hyperechoic characterized by less prominent than normal portal vein walls and increased echogenicity relative to the spleen. A hypoechoic, round, approximately 1.0 cm in diameter nodule is noted in the left liver, which does not disrupt the normal curvilinear architecture. Visible vasculature and biliary tree appear normal without distension or congestion.

REFERRING VET

Dr. Kurapati

GB is moderately distended with anechoic bile and gravity dependent echogenic sediment. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.

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PATIENT *Gastrointestinal*

Frankie Marks The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

SPECIES

Canine The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

BREED

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

Pancreas

SEX

Neutered Male 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.

AGE

10 Years

Free Abdomen

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

12.7 Pounds

- Bilateral adrenomegaly – consistent with adrenal hyperplasia secondary to pituitary depending hyperadrenocorticism vs normal variant.
- Hyperechoic hepatomegaly with hypoechoic nodules – most consistent with benign steroid (endocrine) hepatopathy or reactive or idiopathic hepatopathy. Differentials for the nodule include most likely benign nodular hyperplasia. Infiltrative neoplasia such as round cell neoplasia or metastatic disease cannot be ruled out, but are considered much less likely.
- Gallbladder debris - Cholecystic debris is of unknown clinical significance. It can be seen with biliary stasis from fasting or illness. Cholecystic debris is not necessarily related to hepatobiliary disease. Echogenic bile is most commonly an incidental finding in dogs and should be interpreted in combination with clinical signs such as nausea, inappetence, cranial abdominal discomfort and/or laboratory changes such as increased ALP and/or increased Tbili.

INTERPRETED BY

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Dr. Kurapati

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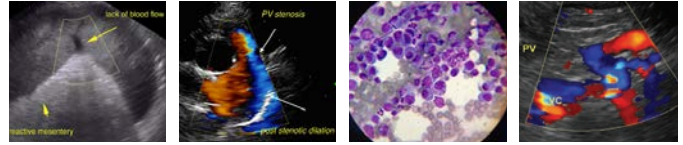
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the reported distended abdomen and the increased liver enzymes, recommendations include a low-dose Dexamethasone suppression test if there are any other clinical signs of hyperadrenocorticism present such as polyuria, polydipsia, polyphagia, panting, etc. If the patient is diagnosed with hyperadrenocorticism, it is most likely pituitary dependent based on this ultrasound. A urinalysis is recommended to further evaluate for possible proteinuria. A blood pressure is also recommended if this patient is diagnosed positively with hyperadrenocorticism.



PATIENT

Frankie Marks

If not, next steps could include a fine needle aspirate of the liver (if patient's coagulation status is appropriate) as well as an empirical course of Ursodiol and Denamarin given the concurrent gallbladder changes. Testing for Leptospirosis should also be considered if diagnosis and management of hyperadrenocorticism does not result in improvement of liver enzymes.

SPECIES

Canine

BREED

Dachshund

SEX

Neutered Male

AGE

10 Years

WEIGHT

12.7 Pounds

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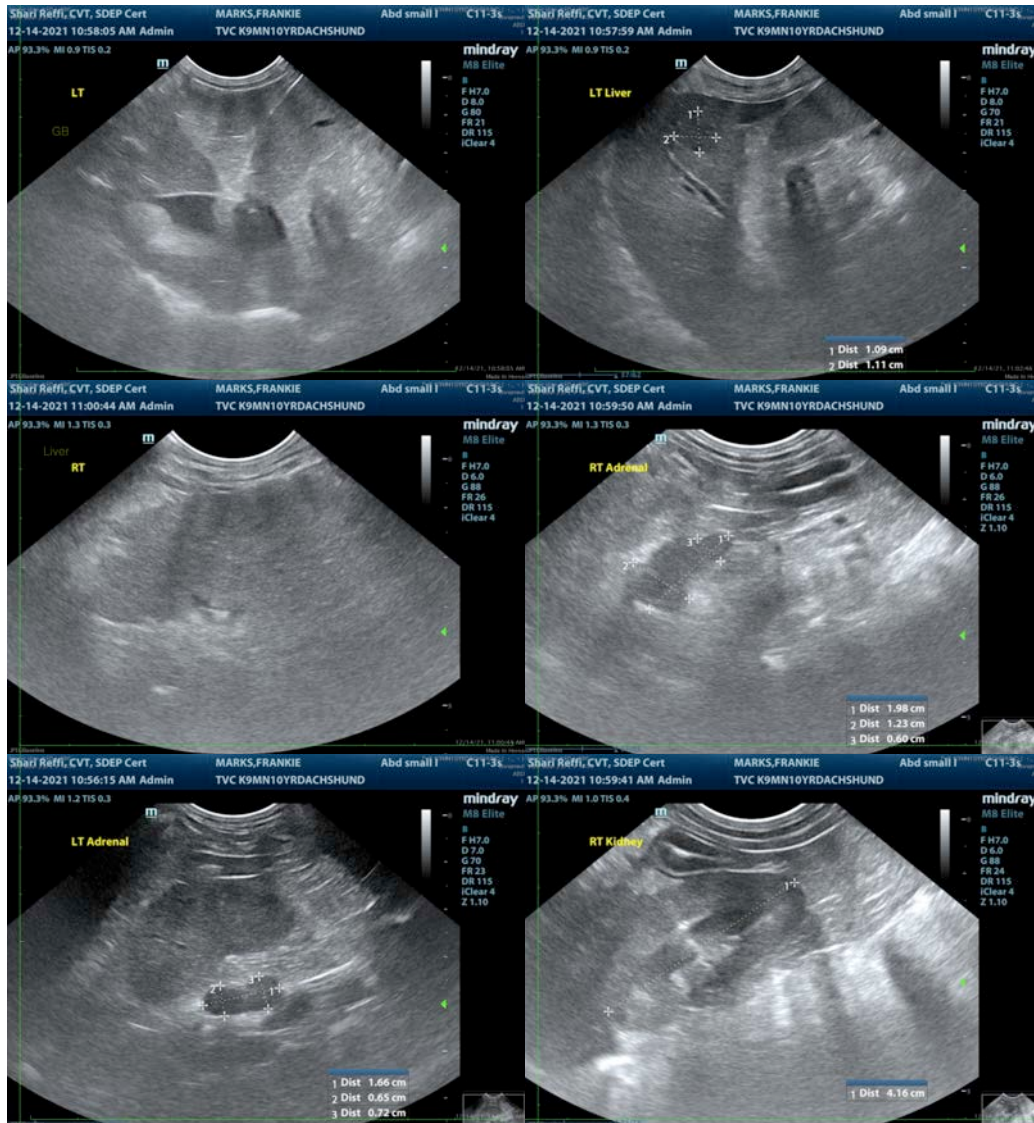
Dr. Kurapati

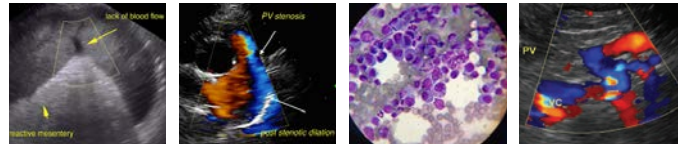
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PATIENT

Frankie Marks

SPECIES

Canine

BREED

Dachshund

SEX

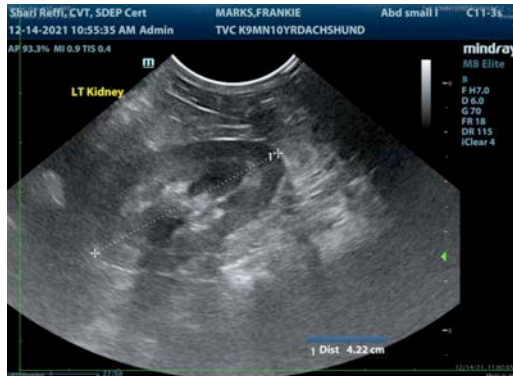
Neutered Male

AGE

10 Years

WEIGHT

12.7 Pounds



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.

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