

PATIENT

Ramsay Morris

SPECIES

Canine

BREED

Yorkie

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.4 kg

INTERPRETED BY

Dr Brittany Sinclair,
 BVSc(hons), DACVECC

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Governors Road AH

REFERRING VET

Dr. Dogar

INVOICE

35617

DATE

11/24/25

PRESENTING CLINICAL SIGNS

History: concern for possible liver mass

Abnormal PE/Chem/CBC/UA Results: Radiographic Findings mild spondylosis in thoracic vertebrae Lungs and heart appear fine; normal age related changes in lungs Enlarged liver with possible mass effect in mid to cranial abdomen (round radio-opacity) with caudal deviation of intestine.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

The kidneys have a smooth capsule and with hazing of corticomedullary definition to the point of inability to determine cortical/medullary ratio. No evidence of pelvic dilation was present. The right kidney measured 5.03 cm in length. The left kidney measured 4.86 cm in length. Multiple spherical anechoic fluid accumulation consistent with cortical cyst were noted bilaterally.

Adrenal Glands

Both adrenal glands were visualized and recognized. Both were subjectively prominent. No specific masses or nodules seen. The phrenic vasculature, glandular echogenicity and detail were unremarkable. The left adrenal gland measured 2.47 cm in length and 0.62 cm at the cranial pole and 0.71 cm at the caudal pole. The right adrenal gland measured 2.35 cm in length and 1.73 cm at the cranial pole and 0.74 cm at the caudal pole.

Spleen

The spleen was normal with a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma and smooth capsule, with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

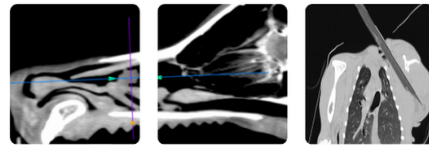
Liver

The liver is diffusely enlarged with rounded hepatic margins. Parenchyma is normal with no masses or specific nodules seen.

The gall bladder is moderately distended with anechoic fluid, with hyperechoic non-shadowing partially organized debris present. There is no surrounding free fluid or signs of active inflammation.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.



PATIENT

Ramsay Morris

SPECIES

Canine

BREED

Yorkie

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.4 kg

INTERPRETED BY

Dr Brittany Sinclair,
 BVSc(hons), DACVECC

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Governors Road AH

REFERRING VET

Dr. Dogar

INVOICE

35617

DATE

11/24/25

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis: mucosa layer ratio. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

The ileocecal junction was not visualized. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The base and limbs of the pancreas were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour and parenchyma were normal. No overt evidence of active inflammatory or neoplastic disease was noted.

Lymph Nodes

No clinically significant lymphadenopathy or abnormalities noted.

ULTRASONOGRAPHIC FINDINGS

- Hepatomegaly with normal echotexture
- Mild gallbladder debris
- Bilaterally prominent adrenal glands
- Degenerative renal changes with multiple cortical cysts

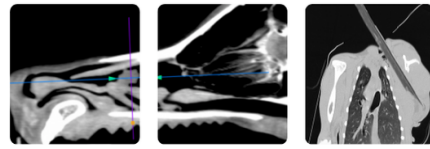
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Adrenomegaly is bilateral and may represent stressful illness or hormonal stimulation as is seen with pituitary dependent hyperadrenocorticism. If corresponding clinical signs are present, a urine cortisol creatinine ratio could be used as a screening test, and subsequent testing for hyperadrenocorticism should be considered (ACTH stimulation test vs LDDST).

Hepatomegaly with normal parenchyma is of uncertain etiology. Endocrinopathy, infectious or inflammatory hepatitis, infiltration with neoplasia, or other benign causes, such as vacuolar hepatopathy without ultrasonographic change are all possibilities. Liver FNA is recommended to further define. Ultimately, liver biopsy may be required for more definitive diagnosis.

Gall bladder debris is likely an incidental finding and is often subclinical and often does not warrant specific treatment or further investigation. Ursodiol could be given as a choleric to reduce to help reduce debris accumulation. Correlate clinical significance with bloodwork findings and clinical signs. Serial imaging for monitoring could be considered especially if liver enzymes subsequently become elevated. If otherwise clinically indicated, investigation for endocrinopathy such as hyperadrenocorticism or hypothyroidism could be considered as an underlying cause predisposing to gall bladder debris accumulation.

Renal changes are likely age-related degeneration. Correlate clinical significance with semi-annual blood work/urinalysis findings and clinical signs.



PATIENT

Ramsay Morris

SPECIES

Canine

BREED

Yorkie

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.4 kg

INTERPRETED BY

Dr Brittany Sinclair,
 BVSc(hons), DACVECC

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Governors Road AH

REFERRING VET

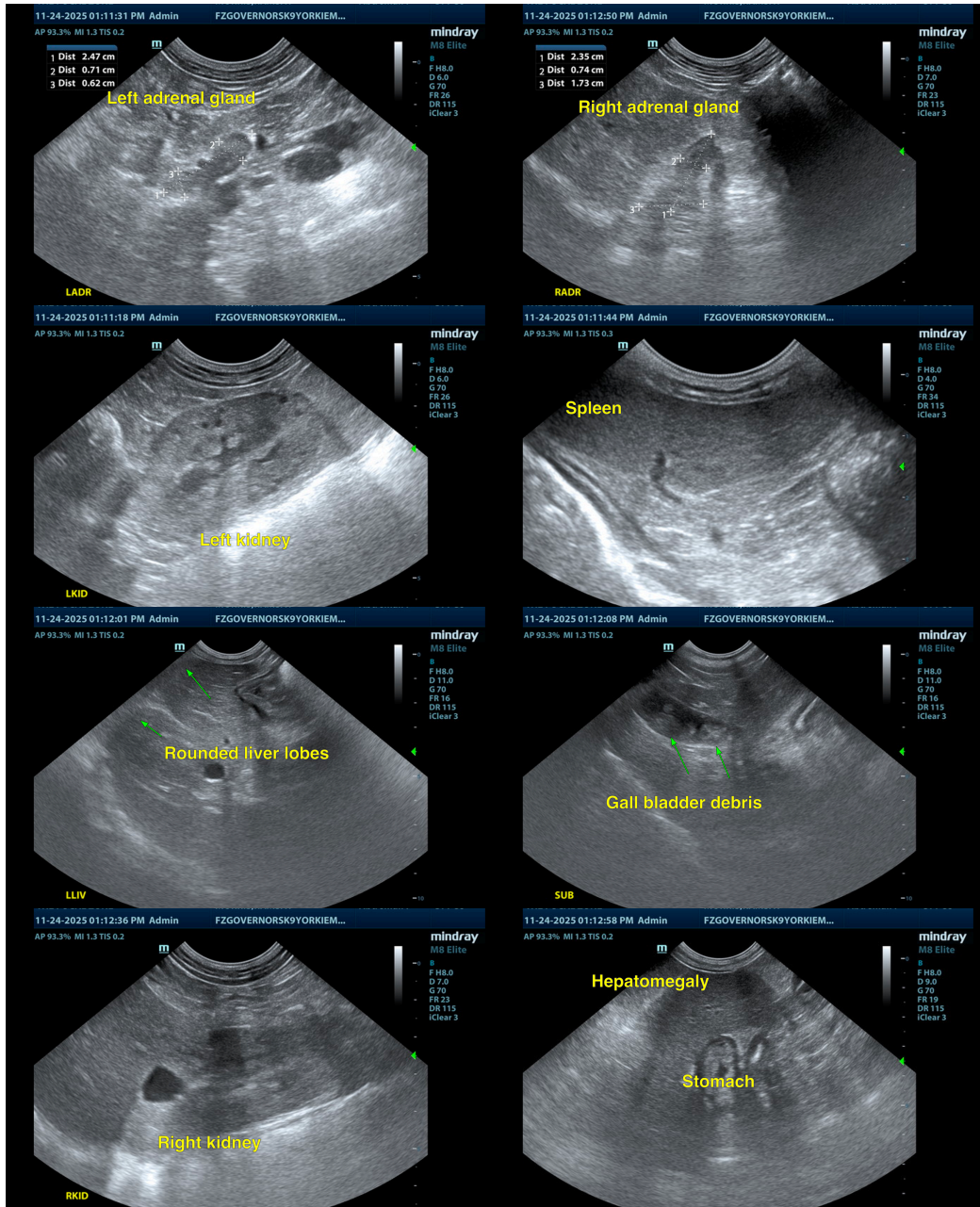
Dr. Dogar

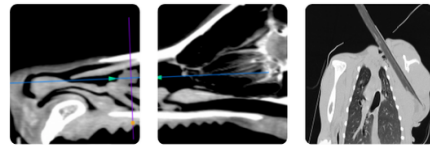
INVOICE

35617

DATE

11/24/25





PATIENT

Ramsay Morris

SPECIES

Canine

BREED

Yorkie

SEX

Neutered Male

AGE

12 Years

WEIGHT

7.4 kg

INTERPRETED BY

Dr Brittany Sinclair,
BVSc(hons), DACVECC

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Governors Road AH

REFERRING VET

Dr. Dogar

INVOICE

35617

DATE

11/24/25

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC

info@SonoPath.com