



**PATIENT**

Jackson Cameron

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Neutered male

**AGE**

13 years

**WEIGHT**

81.5 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Myers

**HOSPITAL NAME**

Hershire AH

**REFERRING VET**

Dr. Gallisdorfer

**INVOICE**

42544

**DATE**

2/2/23

**PRESENTING CLINICAL SIGNS**

History: presenting for ultrasound due to significant elevation of liver enzymes since last year. Pet has been on chronic carprofen for 5+ years due to bilateral CCLR - has had annual bloodwork showing very mild increase in ALT/ALKP, this year significant increase in liver values ALT/AST/ALKP along with very mild non regenerative anemia. O reports history of soft stool for the last 2-3 months, did make switch manufacture of carprofen at that time switched from Carprovet to Novox - no change in dose. O reports no other changes made at home. Physical exam - tense on palpation and multiple lipomas inhibiting palpation of abdomen

Abnormal PE/Chem/CBC/UA Results: Bloodwork Results Jan 2023 Hct 37.9 (38.3-56), Hgb 13.2 (13.4-20.7), ALT 831 (18-121), AST 87 (16-51), ALP 744 (5-160), Chol 1085 (131-345), T4 1.6 (1-4) Bloodwork Results March 2022 Hct 39.8 (38.3-56), Hgb 13.4(13.4-20.7), ALT 282 (18-121), AST 43 (16-51), ALP 192 (5-160), Chol 559 (131-345), T4 1.4 (1-4)

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities.

**Adrenal Glands**

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 1.0 cm at the cranial pole and 0.8 cm at the caudal pole. The region of the left adrenal gland was imaged with no overt pathology.

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

**Liver**

The **liver** revealed coarse architecture with increased portal markings. Isoechoic nodular changes were noted. Irregular contour was noted. Macronodular changes were noted and measured up to 4.0 cm.



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Generalized hepatomegaly was present. The gallbladder was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. Gallbladder polyps were also present. No adjunctive inflammation was noted.

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**Gastrointestinal**

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

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**Pancreas**

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

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**Free Abdomen**

The iliac trifurcation was unremarkable. Sublumbar fat and remodeling was noted. This is likely benign.

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**ULTRASONOGRAPHIC FINDINGS**

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Hepatic remodeling with macronodular changes. Fibrosis, emerging cirrhosis pattern.

Age related abdominal changes.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Bile acid profile is warranted. Ultrasound-guided FNA of the general parenchyma and macronodular changes are indicated. I recommend Leptospirosis titers. There is a minor potential for neoplasia.

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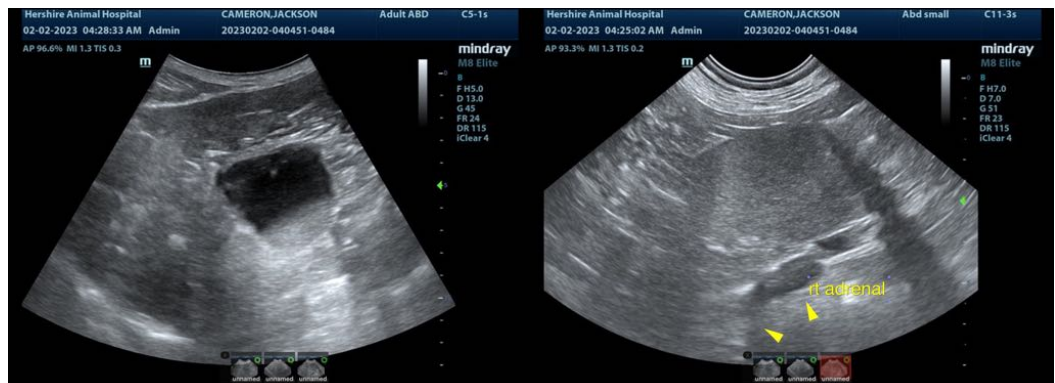
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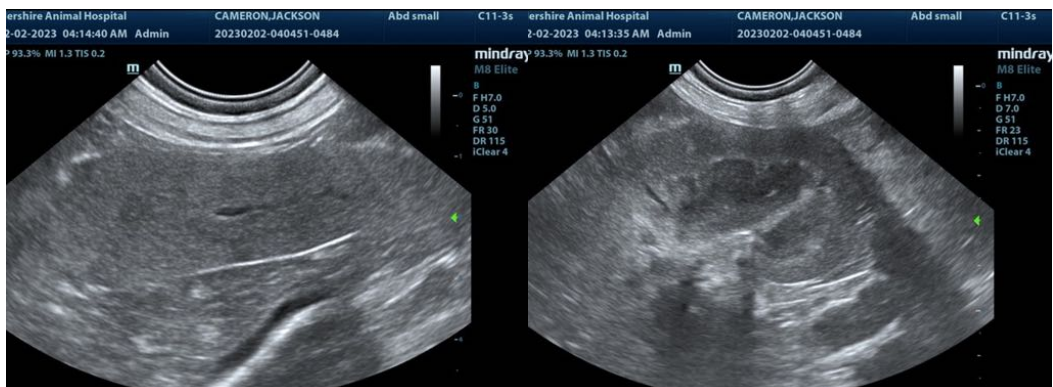
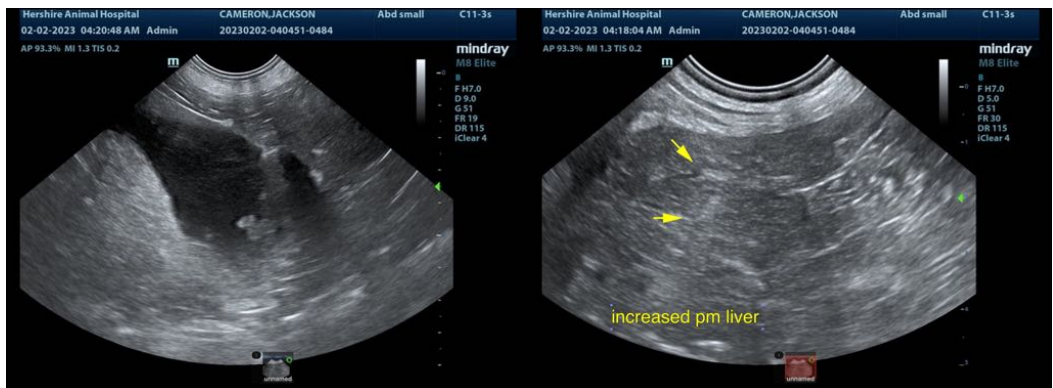
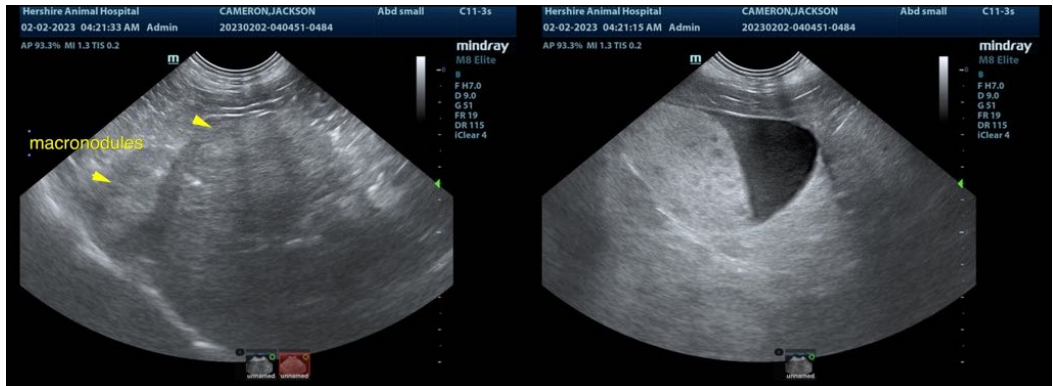
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

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