



**PATIENT**

Taylor Myers

**PRESENTING CLINICAL SIGNS**

Presented for a dental. Elevated liver values  
Abnormal PE/Chem/CBC/UA Results: BUN 42, TP: 8.6, ALB: 4.2, ALT: 205 ALK; 247 (ALT on 1/29/21 ALT was 205 and ALK 59)

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Bichon

**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.

**SEX**

Spayed Female

**AGE**

8 years

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. The right kidney measured 4.4 cm. The left kidney measured 4.26 cm.

**WEIGHT**

16.6 lbs

**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 2.12 x 0.45 cm. The left adrenal gland measured 1.36 x 0.44 cm.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Rodriguez

**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.

**HOSPITAL NAME**

Foxfield

**REFERRING VET**

Dr. Rodriguez

**Liver**

The **liver** revealed mild coarse architecture. The gallbladder and common bile duct were unremarkable with a slight increase in portal markings. Minor uniform swelling was noted. This is most consistent with benign hepatopathy with minor inflammatory pattern.

**INVOICE**

95898

**Gastrointestinal**

**DATE**

2/8/22

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



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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.

**BREED**

Bichon

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Spayed Female

Non-specific, mild inflammatory hepatopathy.

Vacuolar hepatopathy pattern.

**AGE**

8 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There are no contraindications to anesthetic procedure. FNA of the liver could be performed at the time of the dental procedure for further definition. Bile acid profile would be ideal, yet is unlikely to be elevated.

**INTERPRETED BY**

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DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

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**HOSPITAL NAME**

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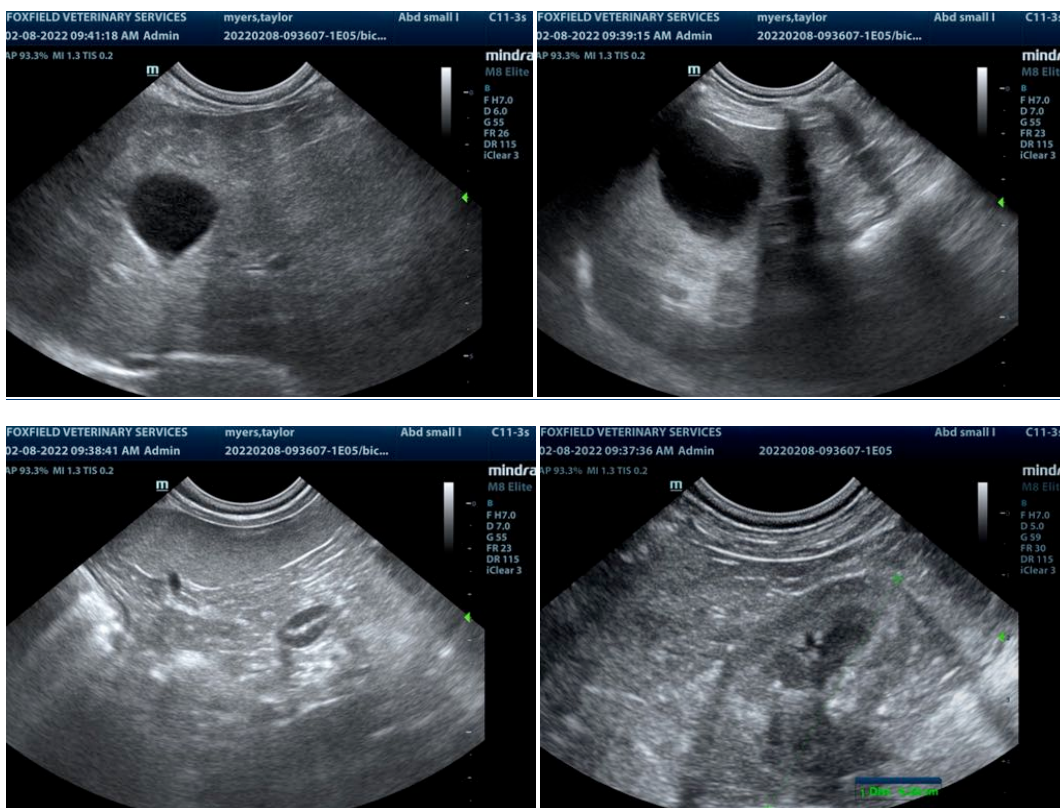
Dr. Rodriguez

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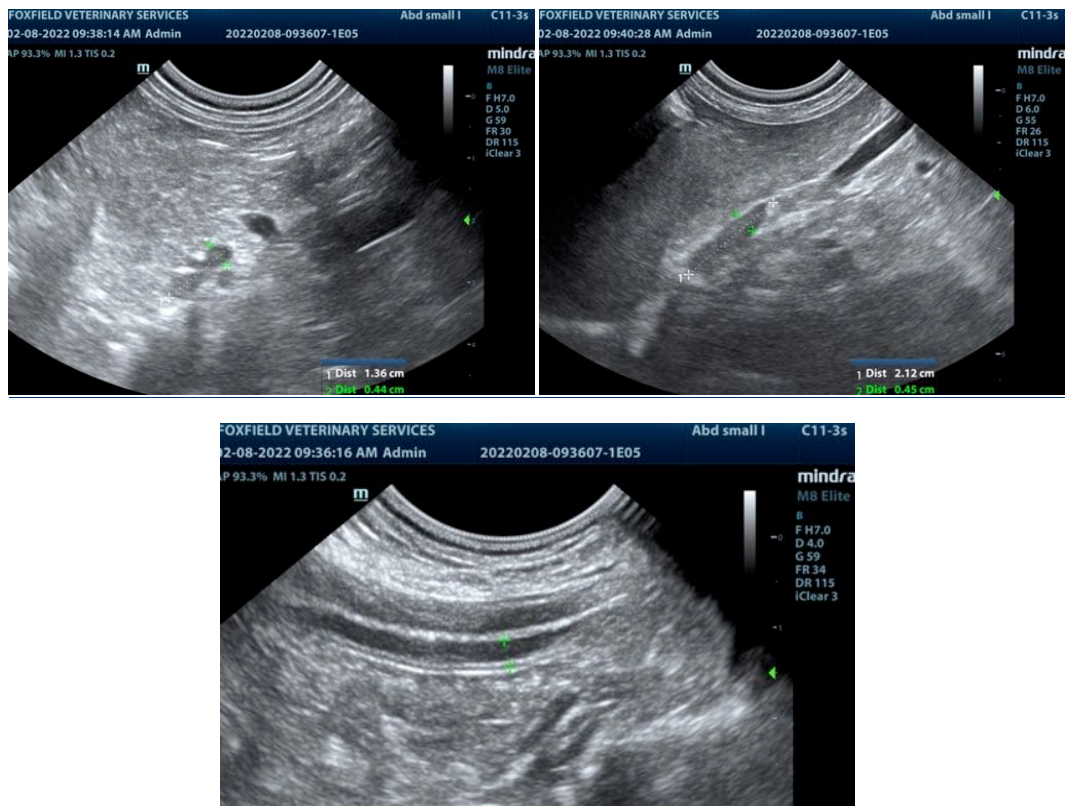
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**DATE**

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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.

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.

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