**PATIENT**

Stark Jeppson

**SPECIES**

Canine

**BREED**

Terrier

**SEX**

Neutered Male

**AGE**

9-10 years

**WEIGHT**

9.62 Pounds

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**IMAGING  
PERFORMED BY**Potomac Mobile  
Veterinary Ultrasound**HOSPITAL NAME**

BPH Gainesville

**REFERRING VET**

Dr. Jarrett

**INVOICE**

96766

**DATE**

3/10/22

**PRESENTING CLINICAL SIGNS**

Recheck of possible Mucocele. Patient has been on Denamarin, Ursodiol and completed 2 weeks of antibiotics. History for previous ultrasound: Elevated liver values and elevated bile acids. No improvement in liver values while on Denamarin. Polyuric and polydipsic with polyphagia, per owner. Abnormal PE/Chem/CBC/UA Results: (03/10/2022) CHEM: ALKP 262, ALT 511, GGT 13. (01/10/2022) CHEM: CHOL 405, ALT 351, ALKP 309.

**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 residual prostate was uniform and measured 1.19 cm.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 5.77 cm. The left kidney measured 4.89 cm.

**Adrenal Glands**

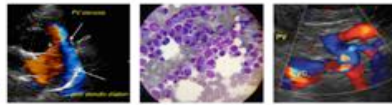
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.39 cm at the cranial pole and 0.39 cm at the caudal pole. The left adrenal gland measured 0.4 cm at the cranial pole and 0.53 cm at the caudal pole.

**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** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Hyperechoic lipogranulomatous change was noted in the left liver and measured 1.2 x 0.86 cm. This is not pathological. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder was mildly to moderately over distended with



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immobile debris. Minor striation was noted. This is consistent with immature mucocele. There was no evidence of inflammation present. This appears to be stable and measures 4.7 x 2.86 cm.

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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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**ULTRASONOGRAPHIC FINDINGS**

Immature gallbladder mucocele.

**WEIGHT**

9.62 Pounds

Minor hepatic lipogranuloma.

Otherwise, benign abdomen.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Gallbladder motility study would be ideal in this patient given the ALT values and non-specific inflammatory hepatopathy. Emerging PDH is possible; however, it would be fairly rare as only a small percentage of patients have normal adrenal glands and Cushing's disease/PDH. Ursodiol typically necessitates 4-6 weeks to have any visible effect upon the gallbladder. FNA of the liver is indicated along with work-up for Cushing's if the urine specific gravity is less than 1.020, yet the criteria should be solidly present prior to potential treatment for Cushing's disease. Recheck sonogram is recommended in 4-6 weeks.

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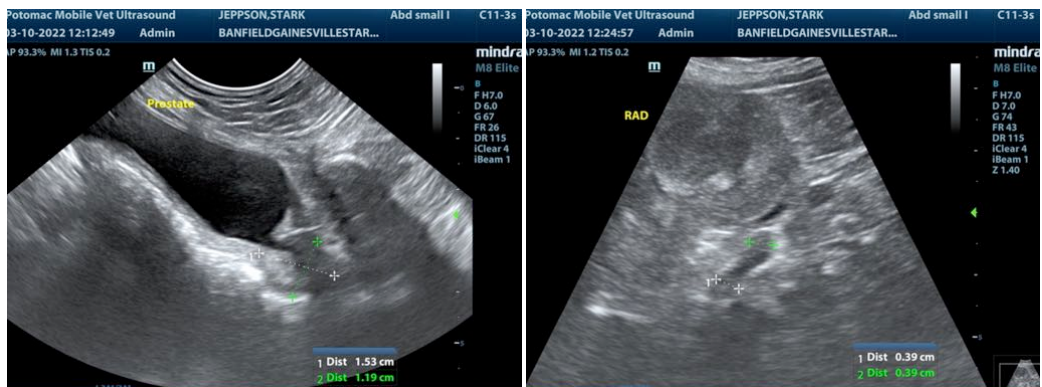
Dr. Jarrett

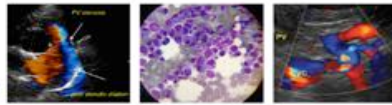
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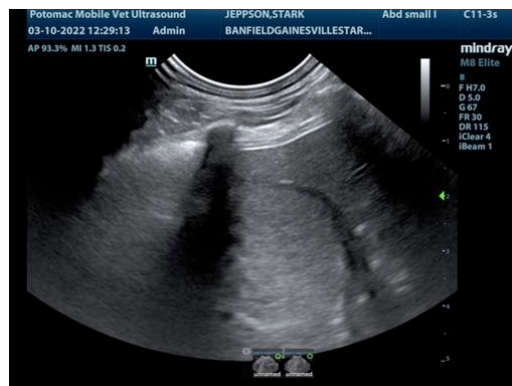
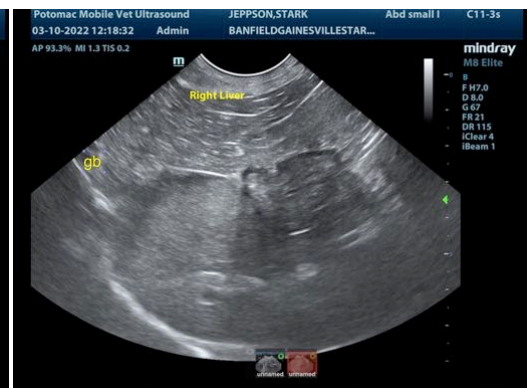
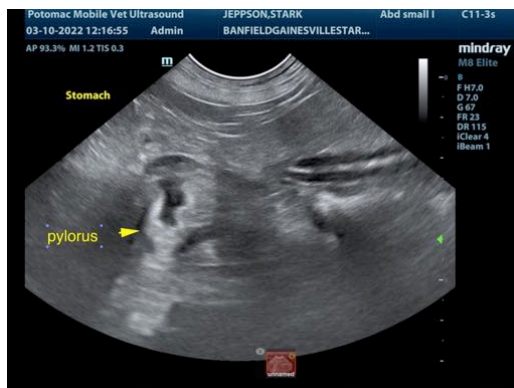
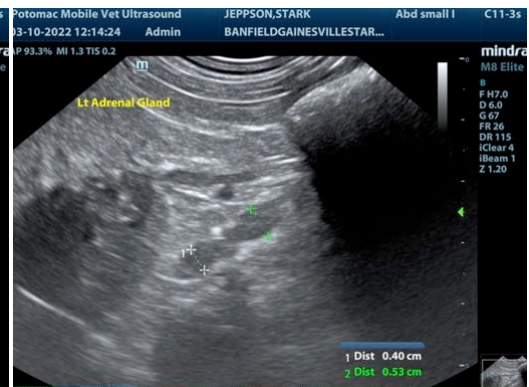
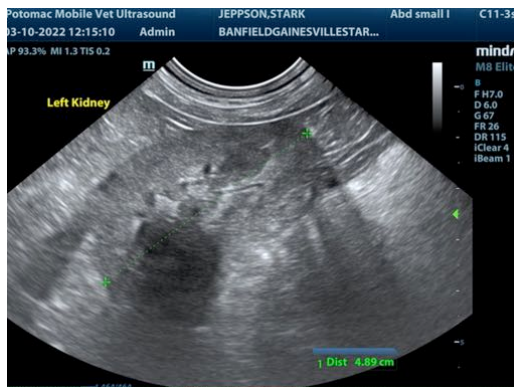
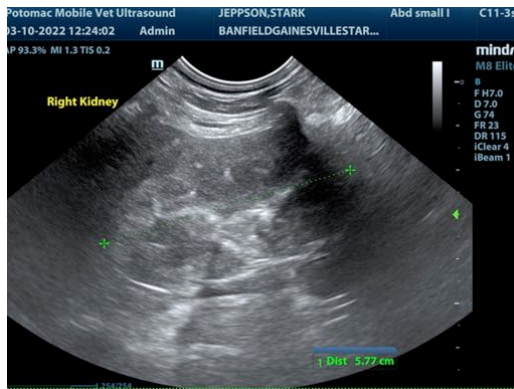
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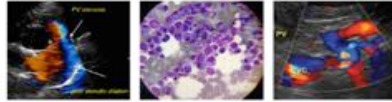
The information and recommendations provided are based on the images presented by the referring

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

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