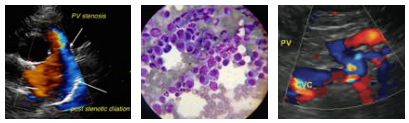
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE
4/18/22

PATIENT
Skylar Thomas

SPECIES
Canine

BREED
Mix

SEX
Neutered male

AGE
8/8/06

WEIGHT
13.6 lbs

INTERPRETED BY
Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME
Banfield Timonium

REFERRING VET
Dr. Kameka

INVOICE
99336

PRESENTING CLINICAL SIGNS

Liver enzyme value and bile acid elevation.
Current Medications: None listed.
Lab Results: Resting bile acids = 36.7 (0-14.9), ALP = 605, ALT = 156.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Declined.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

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 1.0 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. The left kidney measured 4.4 cm with slight pyelectasia that measured 0.34 cm and pinpoint mineralization. The right kidney measured 3.65 cm. Blood flow to the kidneys was adequate on color flow assessment.

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 revealed a 1.27 x 1.22 cm mixed echogenic nodule with a focal area of mineralization that measured 0.4 cm. The right adrenal gland measured 2.32 cm in length and the caudal pole measured 0.66 cm. The left adrenal gland measured 2.09 x 0.58 cm at the caudal pole and 0.6 cm at the cranial 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** revealed slight, coarse hepatic architecture. The intrahepatic and extrahepatic vascularity was normal. There was no evidence of portosystemic shunting. The hepatic size was adequate. The gallbladder was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele. However, the sludge appears to be mildly excessive. No adjunctive inflammation was noted.

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.

Pancreas

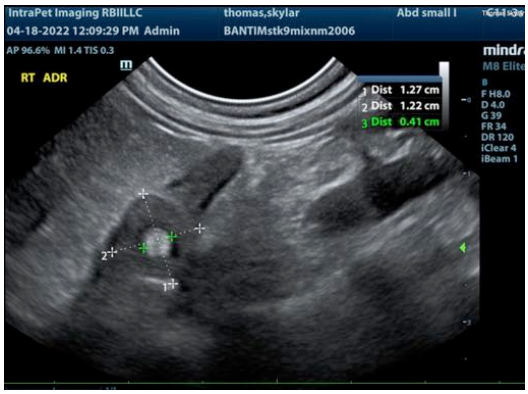
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Low-grade inflammatory/benign hepatopathy.
Minor excessive gallbladder debris.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend Ursodiol therapy over the next 4-6 weeks. FNA of the liver could be considered for further definition; however, it appears benign. A clinical trial of Amoxicillin and Metronidazole is recommended over a 10 day period. I recommend reassessment of the bile acids and liver enzymes in 6 weeks following treatment. Bile acids may be a spurious elevation or owing to poor emptying of the gallbladder.

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thomas,skylar
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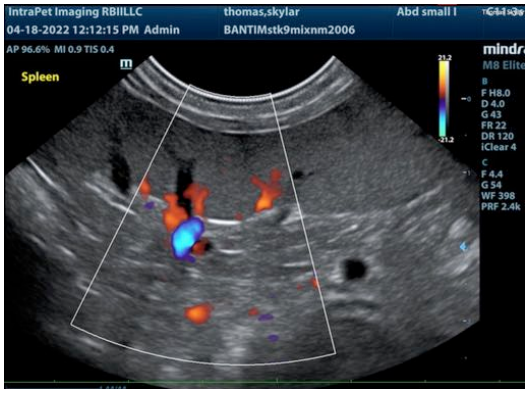
AP 96.6% MI 1.4 TIS 0.3
RT CR
1 Dist 1.18 cm


IntraPet Imaging RBIILLC
thomas,skylar
Abd small I
04-18-2022 12:12:15 PM Admin
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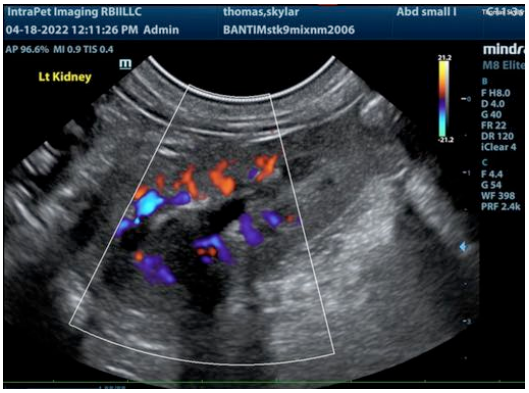
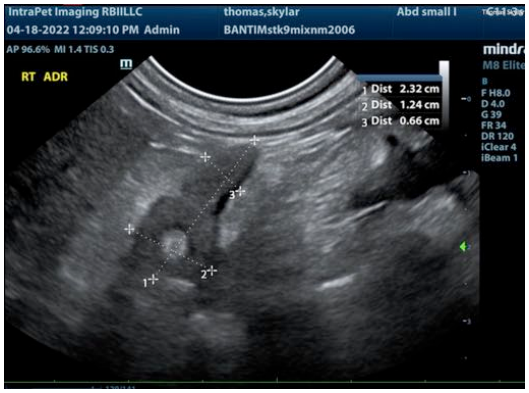
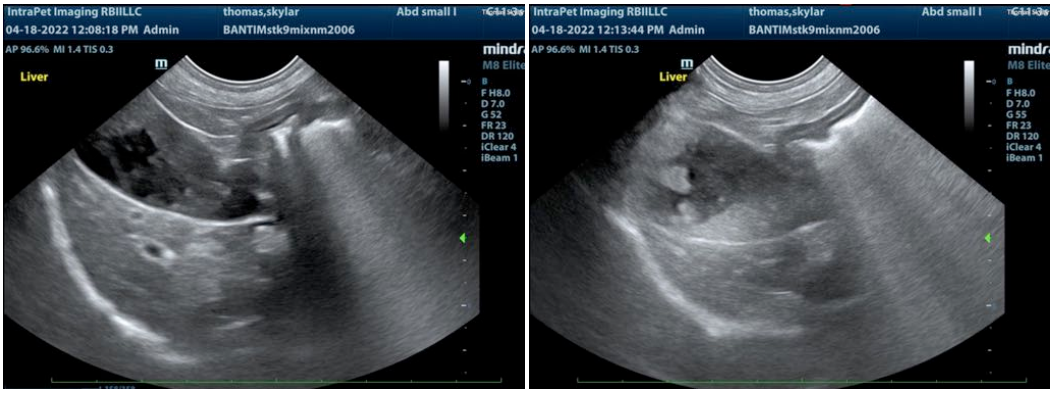
AP 96.6% MI 0.9 TIS 0.4
Spleen


IntraPet Imaging RBIILLC
thomas,skylar
Abd small I
04-18-2022 12:11:46 PM Admin
BANTIMstk9mixnm2006
AP 96.6% MI 1.4 TIS 0.3
Lt adr
1 Dist 2.09 cm
2 Dist 0.58 cm
3 Dist 0.60 cm


IntraPet Imaging RBIILLC
thomas,skylar
Abd small I
04-18-2022 12:10:26 PM Admin
BANTIMstk9mixnm2006
AP 96.6% MI 1.4 TIS 0.3
P
1 Dist 1.00 cm


IntraPet Imaging RBIILLC
thomas,skylar
Abd small I
04-18-2022 12:11:26 PM Admin
AP 96.6% MI 0.9 TIS 0.4
Lt Kidney


IntraPet Imaging RBIILLC
thomas,skylar
Abd small I
04-18-2022 12:09:10 PM Admin
BANTIMstk9mixnm2006
AP 96.6% MI 1.4 TIS 0.3
RT ADR
1 Dist 2.32 cm
2 Dist 1.24 cm
3 Dist 0.66 cm



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.

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