



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Sassy Hansen
SPECIES Canine
BREED Boston Terrier
SEX Spayed Female
AGE 13 years
WEIGHT 23.8 lbs

Weight loss, tremors, history of elevated liver enzymes and spec cPL. Recent onset of PU/PD and polyphagia despite weight loss.
 Abnormal PE/Chem/CBC/UA Results: Weight loss, PU/PD, thin skin, increasing ASP,ALT,GGT
 Tenderness in R cranial abdomen on US. ALP 899U/I ALT 234 U/I GGT 24 U/I Spec cPL 817 ug/l. Normal CBC, normal glucose

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. The right kidney measured 5.24 cm. The left kidney measured 5.04 cm.

Adrenal Glands

Both **adrenal glands** were slightly swollen. The left adrenal gland measured 2.06 x 0.67 cm at the cranial pole and 0.74 cm at the caudal pole. The right adrenal gland measured 2.46 x 0.67 cm at the cranial pole and 0.67 cm at the caudal pole.

Spleen

The **spleen** revealed expansive, hypoechoic nodule that measured 1.5 cm at the caudal pole. Minor micronodular changes were noted elsewhere in the spleen. Other nodular changes were noted in the spleen.

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no overt suspicion of neoplasia.

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

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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.

SPECIES

Canine

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

Boston Terrier

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

Concerning splenic nodules.

Subjectively benign hepatopathy.

Upper limits of normal in the adrenal glands.

AGE

13 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

23.8 lbs

If the urine specific gravity is less than 1.020 then work-up for PDH is indicated. FNA of the spleen is strongly recommended and liver +/- splenectomy. The expansive nodular changes in the spleen are concerning for underlying neoplasia; however, the liver appears uniform and subjectively benign. Chest radiographs and echocardiogram are recommended to screen for comorbidities.

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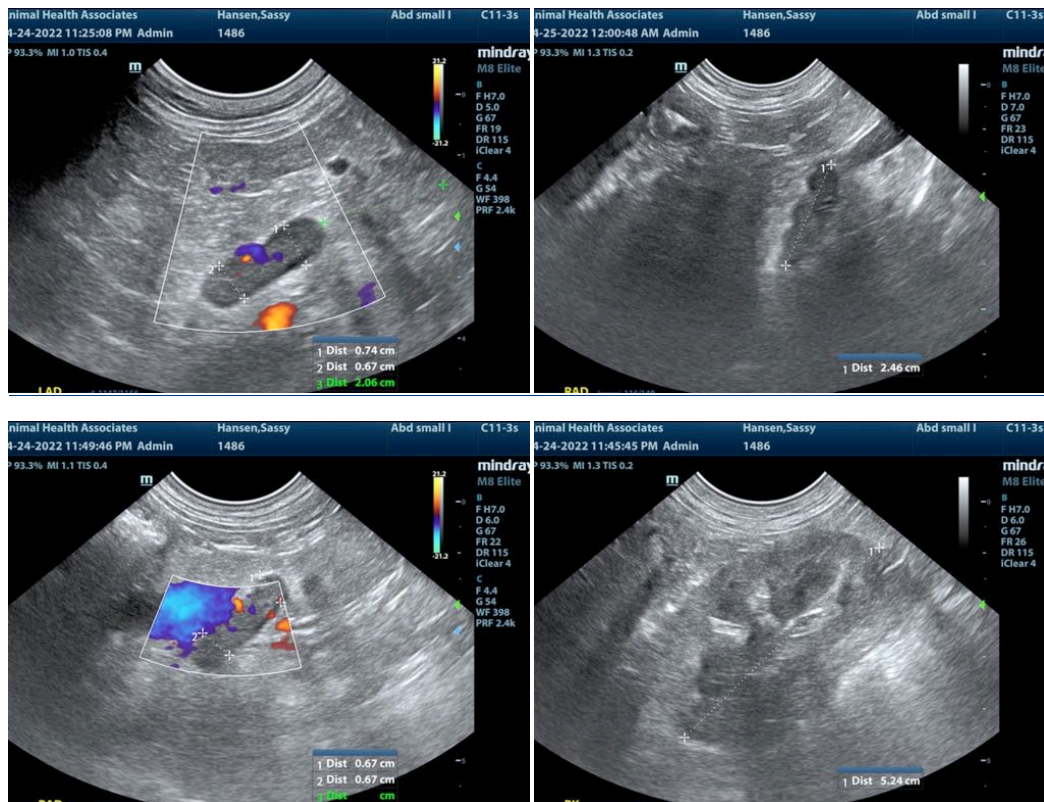
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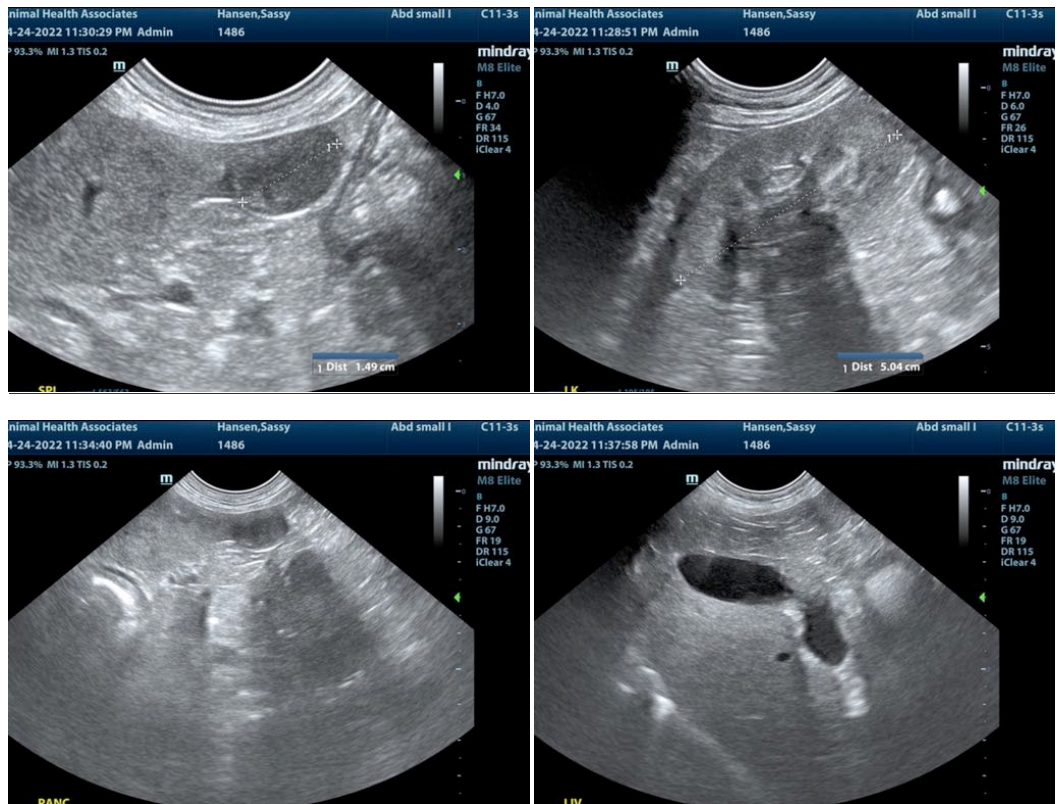
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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