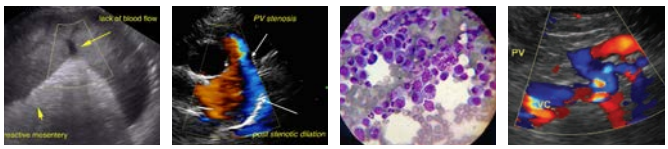
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Berlin Franquiz

SPECIES

Canine

BREED

Dachshund

SEX

Neutered Male

AGE

5 Years

WEIGHT

10.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gabriel Ferrer

HOSPITAL NAME

Pulse: Pet Ultrasound Services

REFERRING VET

Dr. Rafael Lopez

INVOICE

43445

DATE

6/23/23

PRESENTING CLINICAL SIGNS

Presented today for an abdominal ultrasound for evaluation of increased liver enzymes. In March 2023 Blood work was done and noticed that the liver enzymes were elevated. Denamarin was sent home. When recheck again in mid June noticed that values continues to increased.

Abnormal PE/Chem/CBC/UA Results: March 2023: CHEM: ALT : 312. ALT: 1686 June 15th: CHEM: ALT 407 (10 - 125 U/L) ALP 1,720 (23 - 212 U/L) Rest of the values were wnl

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 were noted. Ureteral papillae were normal.

The residual prostate was uniform at 0.66 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Slight pinpoint mineralizations noted. The right kidney measured 4.13 cm. The left kidney measured 3.67 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 1.3 cm x 0.50 cm. The left adrenal gland measured 1.74 cm x 0.34 cm.

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 were noted.

Liver

The **liver** presented a complex cystic mass that occupied the majority of the liver, primarily the left cranial liver but extending to the right cranial liver with a separate mass in the caudate process that may be of lymph node origin with cystic component. The mass impinges upon the gallbladder medially. Free fluid may be owing to portal hypertension or cystic mass leakage.

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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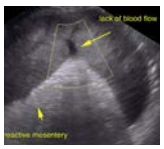
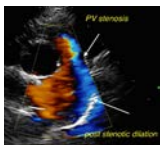
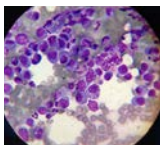
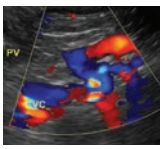

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Pancreas

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.

Free Abdomen

Free fluid noted in the abdomen.

ULTRASONOGRAPHIC FINDINGS

- Cystic hepatic mass with separate caudate liver mass or lymphadenopathy
- Secondary free fluid from mass leakage or possibly portal hypertension
- Age related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT evaluation could be considered for potential attempt at resection. However, this is unlikely. Cystic biliary carcinoma suspected. Parasitic cyst possible if endemic in your region. FNA of the parenchymal portion of the mass could be considered with drainage and cytospin of the cystic portions of the mass as well as abdominocentesis with cytospin. Prognosis is very guarded.

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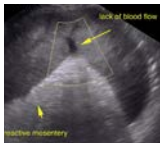
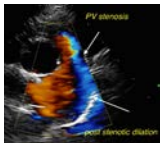
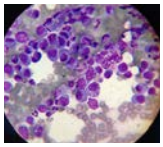
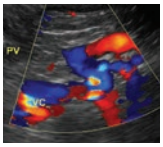

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

info@SonoPath.com