



**PATIENT**

Sassy Vanderbeck

**SPECIES**

Canine

**BREED**

French Bulldog

**SEX**

Intact female

**AGE**

1 year

**WEIGHT**

20 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kelly Vazquez, CVT

**HOSPITAL NAME**

Ramapo Valley AH

**REFERRING VET**

Dr. Katara

**INVOICE**

42860

**DATE**

12/5/22

**PRESENTING CLINICAL SIGNS**

History: Elevated liver values, PSS vs. other. Started Denamarin yesterday.  
Abnormal PE/Chem/CBC/UA Results: AST 69, ALT 1038. U/A: Ph 8.5, trace protein, 4-10 WBC, USG 1.020.

**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 3.68 cm. The left kidney measured 3.96 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 1.64 x 0.37 cm at the caudal pole and 0.29 cm at the cranial pole. The left adrenal gland measured 1.25 x 0.31 cm at the caudal pole and 0.28 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 mild microhepatica with mildly increased portal markings. There was no macroscoping shunting in the intrahepatic or extrahepatic space. The vena cava to aortic ratio was 1:1. The vena cava measured 0.78 cm. The aorta measured 0.8 cm. The portal vein to vena cava ratio was 1:1. The portal vein measured 0.53 cm and the vena cava measured 0.46 cm at the portal hilus. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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**Gastrointestinal**

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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.

**BREED**

French Bulldog

**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.

**SEX**

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**ULTRASONOGRAPHIC FINDINGS**

Microhepatica, likely portal hypoplasia with inflammatory component.

**AGE**

1 year

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No macroscoping shunting. Given the pyuria urine culture and sensitivity is indicated. Given the ALT elevation Leptospirosis titers are indicated. Core liver biopsy either from surgical or laparoscopy standpoint would be ideal. Ultrasound-guided core biopsy can be considered, but may be challenging given the significant microhepatica. Quantitative copper evaluation is necessary; therefore, larger samples are recommended and may be best from a surgical approach. In the meantime, Ampicillin, Metronidazole. Royal Canin hepatic support or similar diet is indicated as well as bile acid profile prior to and after 4-6 weeks of medical management. Guarded long term prognosis.

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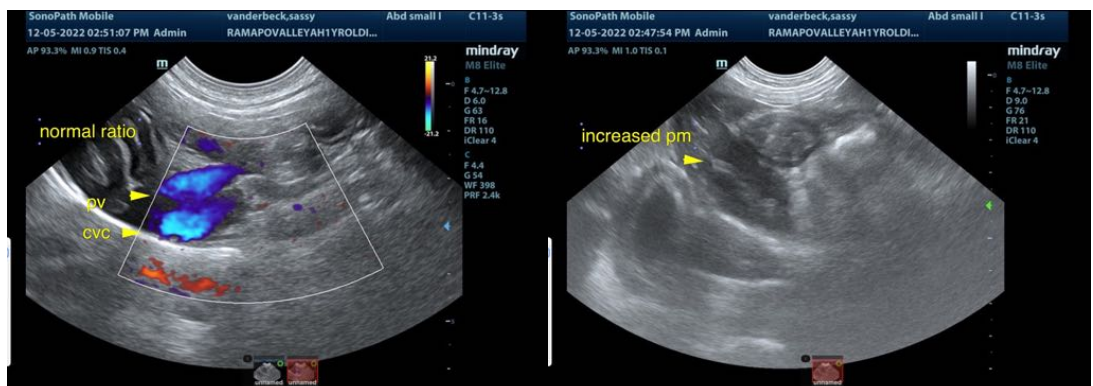
Dr. Katara

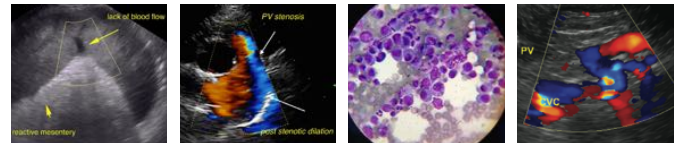
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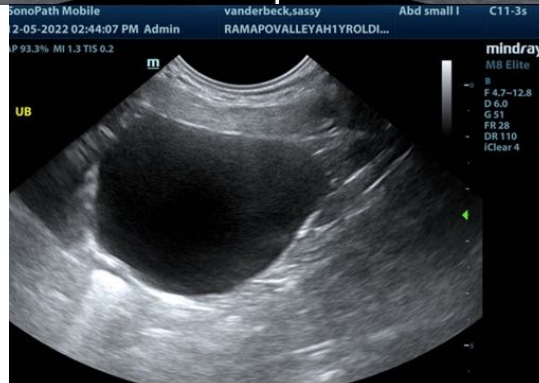
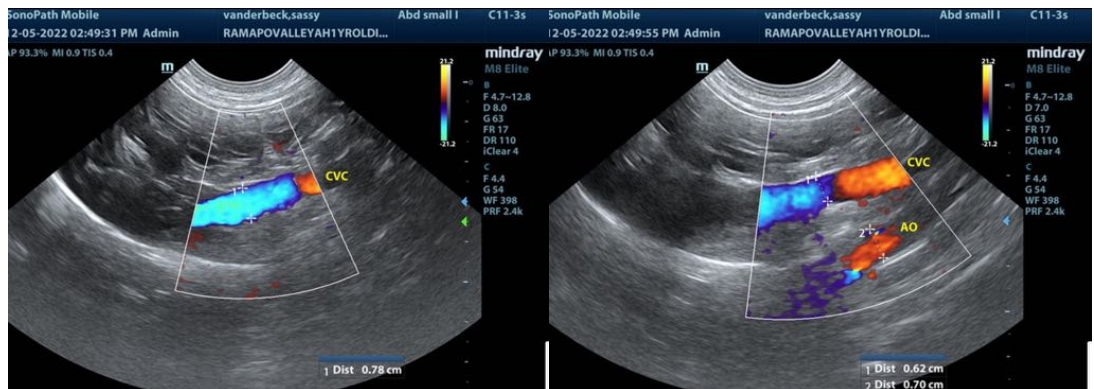
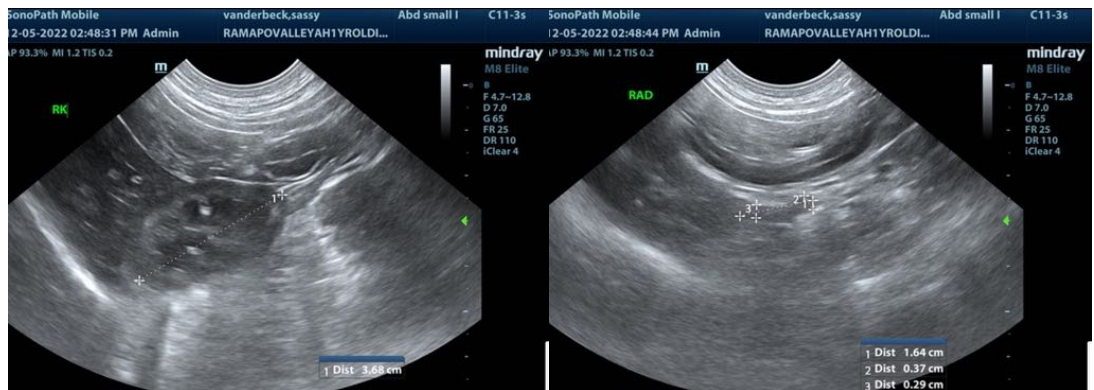
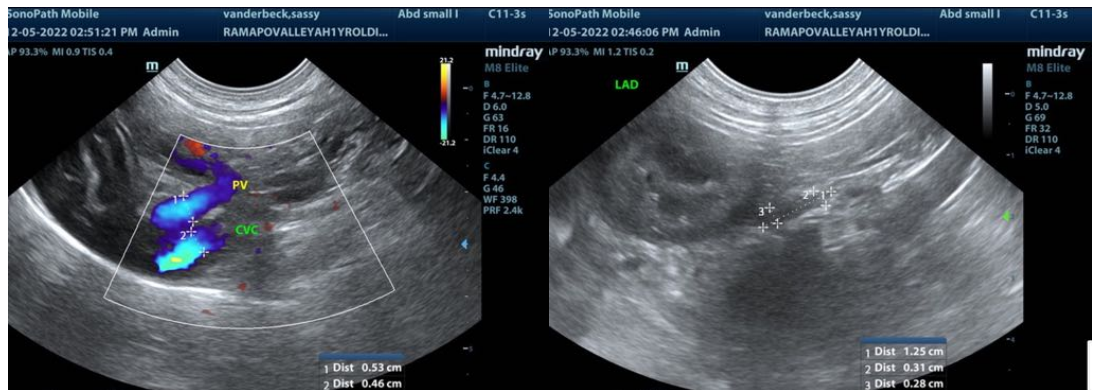
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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