

PATIENT

Nala Mei Yap

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

7 Years

WEIGHT

10.3 kg

INTERPRETED BY

Greg Kuhlman, DVM,
 DACVIM (SAIM)

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Hartzel Animal
 Hospital

REFERRING VET

Dr. Neill

INVOICE

16597

DATE

05/29/26

PRESENTING CLINICAL SIGNS

Reducible umbilical hernia noted. Often very stressed in clinic. Multiple recent episodes of vomiting and hyporexia though the patient is known to be highly food selective. Has been on Ondansetron, Famotidine and Maropitant.

Abnormal PE/Chem/CBC/UA Results: Elevated ALT 1778U/L, ALP 487U/L, Bilirubin 2+ on urine, blood panel did not assess Bilirubin. Rest WNL including T4, renal values, electrolytes and cPLI. No rads.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder is moderately distended with anechoic urine. No uroliths are seen. The bladder wall is normal in appearance and thickness. No masses are seen.

The left kidney presents normal size with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. The left kidney measured 4.4 cm in length.

The right kidney presents normal size with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. The right kidney measured 4.6 cm in length.

Adrenal Glands

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 4.0 mm and the caudal pole measures 4.8 mm.

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 5.5 mm and the caudal pole measures 9.0 mm.

Spleen

The spleen is normal in size, shape, margination and echogenicity. No masses are seen.

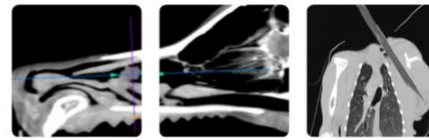
Liver

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern. No obvious evidence of a hepatopathy is seen on this ultrasound.

The gallbladder contains a mild amount of aggregating hyperechoic debris that is adhered to the apical aspect of the gallbladder wall. The gallbladder does not appear obstructed at this time. No evidence of mucocele is seen.

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The stomach is moderately distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. If patient was appropriately fasted, delayed gastric emptying could be considered. Non-shadowing foreign material is considered less



PATIENT

Nala Mei Yap

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

7 Years

WEIGHT

10.3 kg

INTERPRETED BY

Greg Kuhlman, DVM,
 DACVIM (SAIM)

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Hartzel Animal
 Hospital

REFERRING VET

Dr. Neill

INVOICE

16597

DATE

05/29/26

likely but cannot be definitively ruled out. If clinical signs are consistent (vomiting, etc.), recommendations include supportive medical care, 24 hours fasting and re-image.

The duodenum jejunum and ileum all appear to have normal layering and appear normal.

Pancreas

The visible left and right pancreas are normal in size with normal echogenic parenchyma and surrounded by normal peri-pancreatic mesentery.

Free Abdomen

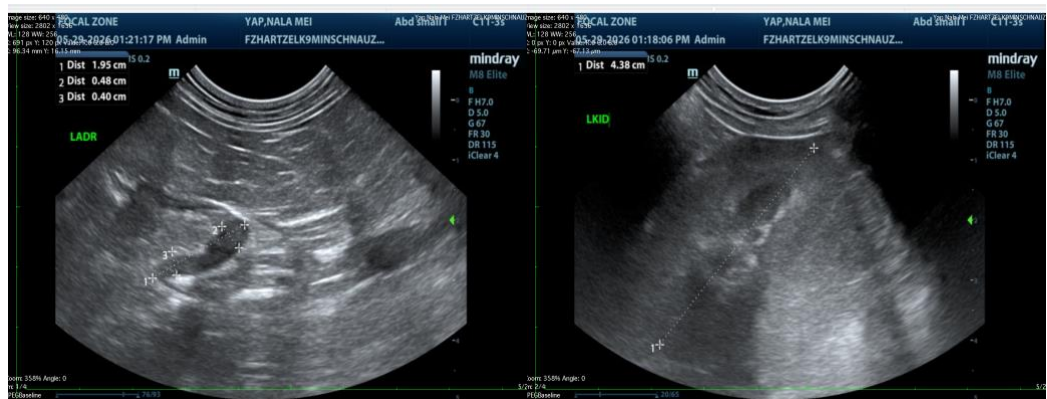
There are no enlarged abdominal lymph nodes seen on this exam. No free abdominal fluid is seen.

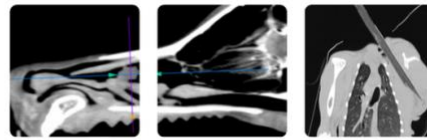
ULTRASONOGRAPHIC FINDINGS

- Full stomach.
- Mild gallbladder debris.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cholangitis does not appear to be the cause of patient's clinical signs and elevated liver values. Pancreatitis does not appear to be a cause of patient's clinical signs and elevated liver values, specifically the markedly elevated ALT. It does appear patient has a hepatopathy. If patient is not vaccinated for leptospirosis, recommend testing for this disease as possible cause of hepatopathy. If leptospirosis is ruled out, recommend fine needle aspirate of the liver to rule out occult infiltrative disease such as lymphoma or mast cell disease. If these diseases are ruled out, the patient's clinical signs and liver value elevations persist, recommend liver biopsy, submitting liver biopsy samples for histopathology to a pathology group that specializes in liver pathology. Submit a liver biopsy sample for copper quantitation to rule out copper storage disease and recommend submitting a liver biopsy sample for aerobic, anaerobic bacterial culture. Prognosis is open pending determination as to etiology of liver enzyme elevations. Would recommend submitting panel that does contain a bilirubin to monitor for hyperbilirubinemia.





PATIENT

Nala Mei Yap

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

7 Years

WEIGHT

10.3 kg

INTERPRETED BY

Greg Kuhlman, DVM,
 DACVIM (SAIM)

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Hartzel Animal
 Hospital

REFERRING VET

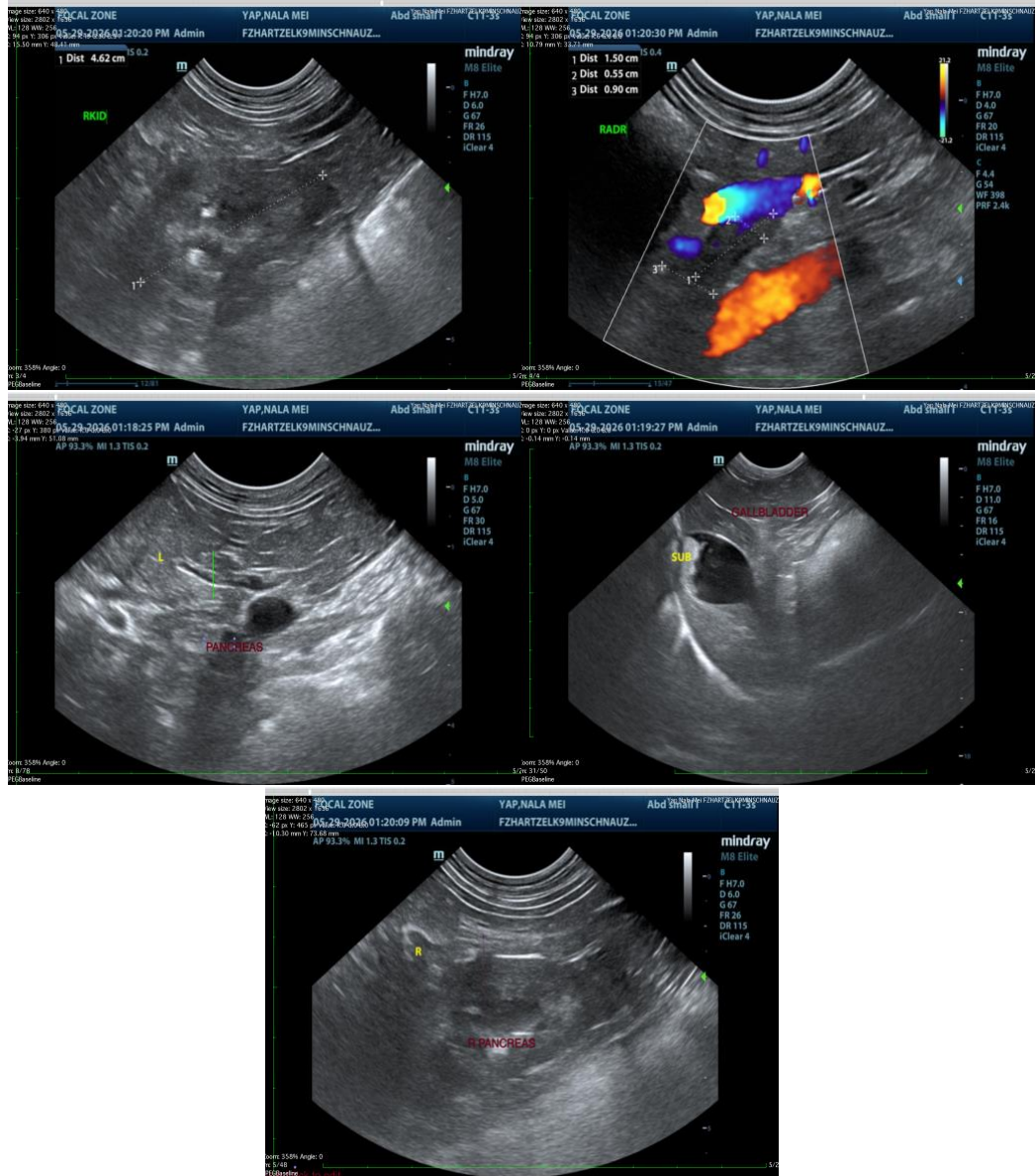
Dr. Neill

INVOICE

16597

DATE

05/29/26



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.

Greg Kuhlman, DVM, DACVIM (SAIM)
 Veterinary Internal Medicine Specialist
info@SonoPath.com