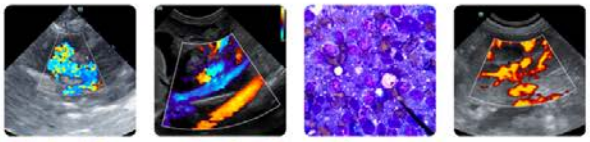


PATIENT

Dozer Williams

SPECIES

Canine

BREED

Lab x

SEX

Neutered Male

AGE

12 Years 4 Months

WEIGHT

111.8

INTERPRETED BY

Kim Radway, DVM, DABVP (Canine/ Feline)

IMAGING PERFORMED BY

Dr. Warner

HOSPITAL NAME

VT-NH Veterinary Clinic

REFERRING VET

Dr. Warner

INVOICE

72159

DATE

1/13/26

PRESENTING CLINICAL SIGNS

Dozer presented for ultrasound due to continue liver enzyme elevations and changes in his comfort level. Owners would not pursue surgery for him, but are looking more for prognosis. He clinically appears Cushingoid with a potbelly, topline muscle wasting, panting. He had hip dysplasia and overall hind end discomfort.

Abnormal PE/Chem/CBC/UA Results: 7/22/22 ALT elevated 132 (125 high) 10/21/22 ALT 111 4/25/24 ALT 142, ALP 347 8/24/24 ALT 150, ALP 581 11/15/24 ALT 191, ALP 928. US - liver enlarged w/increased echogenicity throughout, no discrete masses, GB & biliary tree appear normal. Xrays - mild enlargement of the liver overall. Denamarin started 12/16/24 recheck chem10 - no improvements. ALT 204, ALP 978 1/29/25 Urine Cortisol Creatinine ratio - Cushing's unlikely. USG 1029, urine protein 30mg/dl 10/17/25 K+ 5.8 (upper 5.4), Na:K ratio 26, Cl- 107 (low 108), Anion Gap 27 (high 26), TP 7.8 (high 7.5), Glob 4.1 (4.0), ALT 285 (121), ALP1794 (high 160), GGT 20 (high 13), chol 422 (high 345), lipase 405 (high 250) 11/25/25 ACTH stim performed - does not support Cushing's or Addison's (done rather than LDDS d/t electrolyte changes)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone and pelvic urethra presented with normal wall thicknesses with anechoic urine and normal tone. No uroliths or masses were noted in the lumen of the bladder. No evidence of inflammatory or neoplastic changes were noted. The ureters were not visible and considered normal.

The **kidneys** revealed normal size, corticomedullary definition and ratio with the cortex being 1/3 of medulla. Medullary echogenicity differed distinctly from that of the cortex and no evidence or dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. Left kidney measures 8.58 cm. Right kidney measures 8.9 cm.

Adrenal Glands

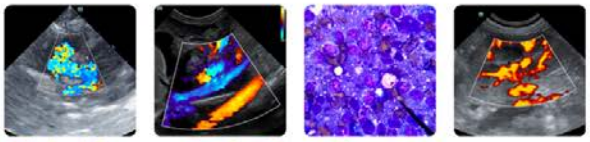
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were acceptable. Left measures 2.36 cm x 0.53 cm x 0.80 cm. Right measures 2.18 cm x 0.72 cm x 0.88 cm.

Spleen

The **spleen** presented with a heterogeneous parenchyma with too numerous to count, ill-defined, hypoechoic nodules and an irregular capsular contour.

Liver

The **liver** presented with a dramatically abnormal and heterogeneous appearance to the parenchyma, with too numerous to count hypoechoic nodules throughout the hepatic parenchyma. There was a discrete hypoechoic nodule in the left aspect of the liver measuring 2.13 cm x 3.57 cm in size. There were also several anechoic cysts, with the most discrete measuring 0.81 cm x 1.1 m in size. The overall liver size was increased, and the capsular contour was considered rounded. The background of the gallbladder contents were anechoic but contained a small amount of hyperechoic, non-shadowing debris.



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Gastrointestinal

The **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was a small amount of gas in the lumen of the stomach. No obstructive or overt infiltrative disease was noted. No abnormal lymphatic activity was noted, and the abdomen was free of gastrointestinal masses and pathological fluid.

Pancreas

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

ULTRASONOGRAPHIC FINDINGS

- Abnormal liver parenchyma with a heterogeneous appearance and too numerous to count hypoechoic nodules.
- Mildly heterogeneous appearance to the splenic parenchyma.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This patient was found to have a dramatically abnormal global appearance to the liver parenchyma, with a general increase in liver size and heterogeneous parenchyma containing too numerous to count hypoechoic and nodules. There was also a heterogeneous appearance throughout the splenic parenchyma. Differentials would include chronic hepatitis, vacuolar hepatopathy, or infiltrative hepatic neoplasia.

It is recommended to pursue a liver biopsy in order to obtain histopathology information for a more definitive diagnosis. The histopathology will guide appropriate treatment recommendations and prognosis in this patient.

If biopsies are declined, then supportive care with Denamarin and continued recheck blood work to monitor the liver enzymes would be recommended.

Since the ALP has recently dramatically increased in this patient, the addition of Ursodiol could be considered for further hepatic support.

There was no overt neoplasia identified. However, with the too numerous to count hypoechoic nodules, neoplasia cannot be excluded with sampling information.

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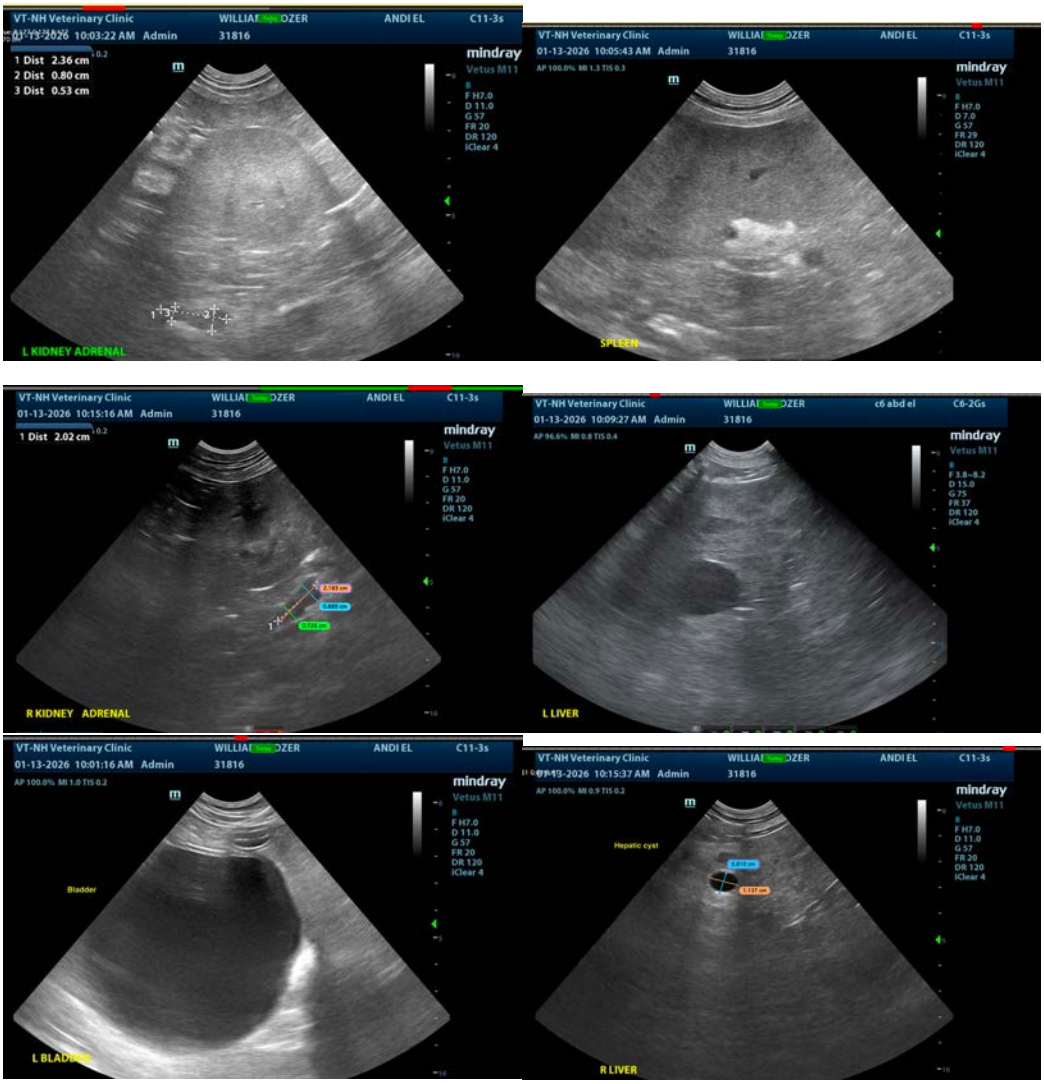

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kim Radway, DVM, DABVP (Canine/ Feline)

info@SonoPath.com