



PATIENT

Gracie Kaires

SPECIES

Canine

BREED

Great Dane

SEX

Spayed Female

AGE

2 Years 9 Months

WEIGHT

152 lbs

INTERPRETED BY

Kim Radway, DVM,
DABVP (Canine/
Feline)

IMAGING PERFORMED BY

Arielle Roldan, CVT

HOSPITAL NAME

Milford Animal
Hospital

REFERRING VET

Aleksandra Ascione,
DVM

INVOICE

72412

DATE

1/23/26

PRESENTING CLINICAL SIGNS

Presented for nausea and diarrhea/ loose stool. Diagnostics revealed elevated liver values (attached). Sent home with Liver support, ursodiol, and cerenia and recommended abd US. Doing better with medications but still having loose stools.

Abnormal PE/Chem/CBC/UA Results: CPL wnl (the rest of the bloodwork attached)

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 of dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. Left kidney measures 7.97 cm. Right kidney measures 8.4 cm.

Adrenal Glands

The regions of the **adrenal glands** did not show any obvious masses. However, they were not specifically identified in the images provided.

Spleen

The **spleen** presented with a smooth homogeneous parenchyma hyperechoic to liver and kidney. The capsule was smooth and linear in its contour. The splenic vasculature demonstrated normal volume without signs of congestion, significant contraction, or thrombosis.

Liver

The **liver** revealed normal size, contour, and structure. Parenchymal echogenicity was smooth and homogenous in appearance. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented with anechoic contents and a thin hyperechoic wall. The cystic and common bile ducts were normal. No periportal lymphadenopathy was evident.

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.



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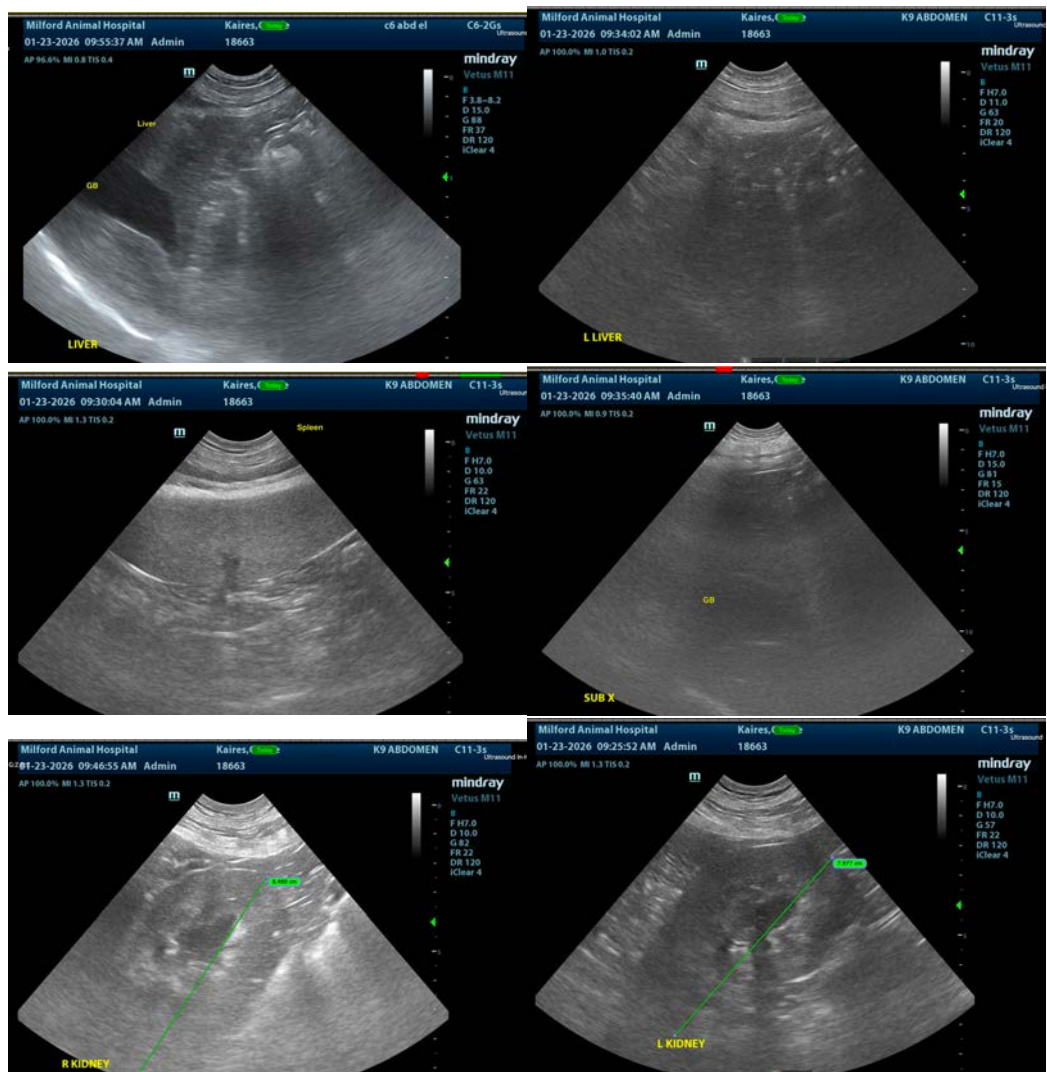
ULTRASONOGRAPHIC FINDINGS

- Normal abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Based on the images provided, there was no evidence of masses, nodules, or enlarged lymph nodes present to explain the elevated ALT on bloodwork. There is also no evidence of pathology within the gallbladder. It is recommended to continue with Denamarin support. However, there is no current indication for treatment with Ursodiol. It is recommended to continue monitoring this patient closely for changes in abnormal liver enzymes over time, and if they maintain an abnormal level, or certainly if they increase, then liver biopsy should be considered.

This patient should be symptomatically treated for the vomiting and diarrhea by feeding a bland diet and giving daily probiotics. Additional supportive care with Cerenia and fluids (if clinically indicated) should be provided.





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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