



## PATIENT

Coco Molina

## SPECIES

Canine

## BREED

Maltese

## SEX

Intact Male

## AGE

1 Year 3 Months

## WEIGHT

5.0 lbs

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

## IMAGING PERFORMED BY

Gabriel Ferrer, DVM

## HOSPITAL NAME

Pulse: Pet Ultrasound

## REFERRING VET

Dr. Nidia Milagros  
Alvarez

## INVOICE

72538

## DATE

1/28/26

## PRESENTING CLINICAL SIGNS

Presented to evaluate elevated ALT. Pt has been having mild elevation of liver enzyme ALT since Sept 2025. It has improved with diet change and Denamarin. Pt likes to go to patio and eats things. Pt is not clinical and acting normally especially after meals

Abnormal PE/Chem/CBC/UA Results: Bloodwork and Bile acids attached as supporting documents.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The prostate is large, hyperechoic and mildly mottled, measuring 1.6 cm in height in the sagittal view.

The left kidney has a normal shape and size (3.55 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (3.94 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

### Adrenal Glands

The left adrenal gland is normal in size measuring 0.27 cm at the cranial pole and 0.28 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.43 cm at the cranial pole and 0.50 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

### Spleen

The spleen is subjectively normal in size (0.82 cm), echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

### Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.



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The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and likely incidental at this time. The cystic and common bile ducts are normal/not visible.

## SPECIES

Canine

### ***Gastrointestinal***

The stomach contains mild fluid. It measures at a normal thickness of 0.30 cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

## BREED

Maltese

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Duodenum wall measures 0.42 cm. Jejunum wall measures 0.28 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

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Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

### ***Pancreas***

## WEIGHT

5.0 lbs

The pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

### ***Free Abdomen***

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Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is no significant lymphadenopathy. Mesenteric lymph nodes are visualized measuring 0.25 cm and 0.29 cm in diameter. A left iliac lymph node is slightly prominent measuring 0.37 cm.

### ***Other***

Both testicles are visualized and appear within normal limits.

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## ULTRASONOGRAPHIC FINDINGS

- Large, hyperechoic prostate – Findings are likely within normal limits for an intact male.

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No focal lesions are visualized associated with the liver to explain the elevation in ALT noted. Generally, the liver appears normal in size, and no definitive shunting vessels are visualized. If a portosystemic shunt is strongly suspected, a contrast CT scan should be considered to further evaluate.

## REFERRING VET

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Alvarez

Post bile acids are mildly elevated. This could be consistent with microvascular dysplasia or similar. Additionally consider the possibility of a reactive hepatopathy if there are chronic GI signs or similar. It is likely that a biopsy of the liver would be necessary to further evaluate (samples for histopathology, culture and copper levels).

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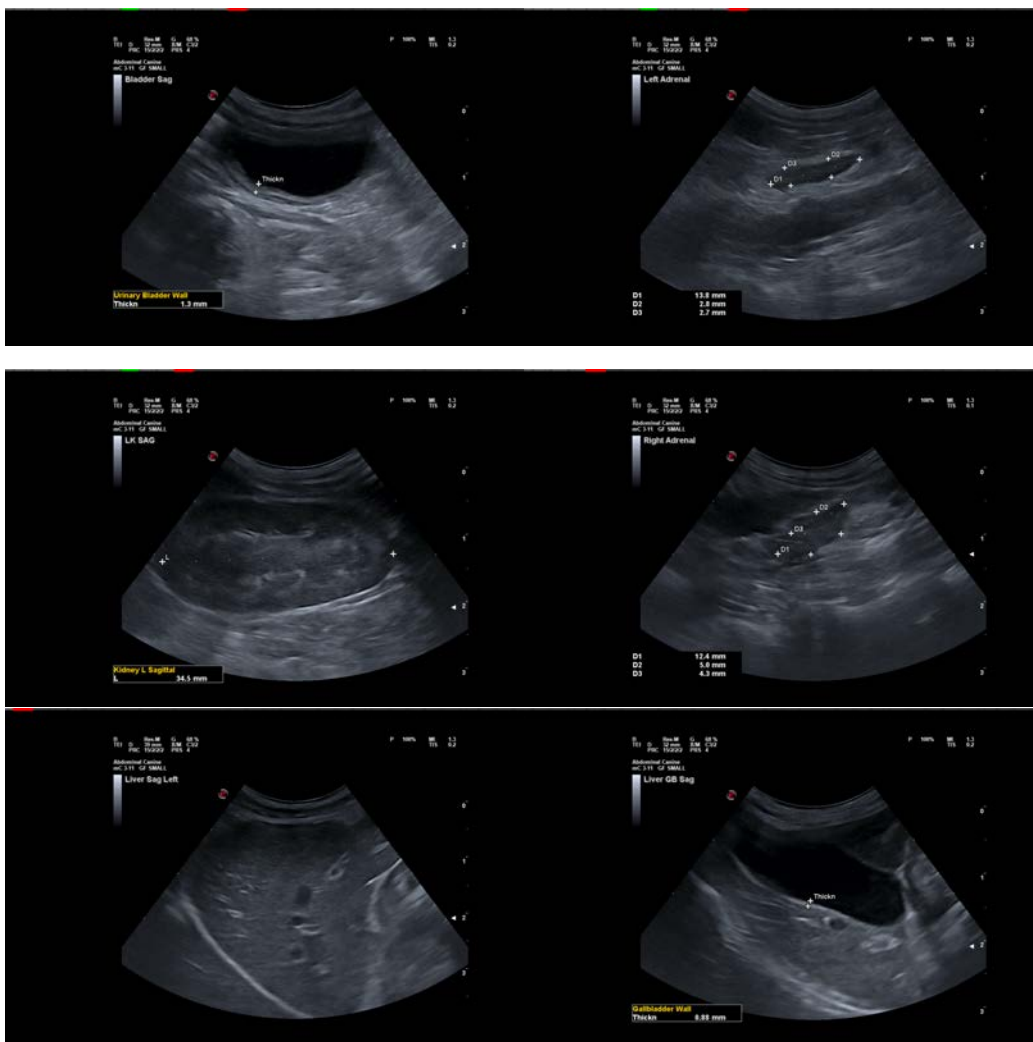
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

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