



**PATIENT**

Rusty Oneil

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

MN

**AGE**

11 years

**WEIGHT**

26.4 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Loetitia Saint-Jacques,  
LVT

**HOSPITAL NAME**

MountainView Animal  
Hospital

**REFERRING VET**

Dr. Pablo Mendoza

**INVOICE**

10791

**DATE**

11/21/2025

**PRESENTING CLINICAL SIGNS**

AUS: Patient presented for general evaluation, on labwork noted elevation in LE, K, Ca and ALB, slight elevation in UPC concerning of liver vs adrenal vs neoplasia vs other disease and recommend perform AUS with possible sampling of liver or other findings during US. ECHO: Recheck echocardiogram, last performed on 9/19/24. Degenerative Valve Disease; ACVIM B1, moderate MR, normal LV dimension in diastole to borderline LVEH, normal LV systolic function, normal LA size, 9/8/22. Progressive, B2 with severe LAE, mild LVEH, normal systolic function, moderate MR, mild TR; 7/6/23. Improved/normal LV dimensions, improve LA dimensions, mild/mod LAE remains, mod MR, trivial TR, normal R heart size; 9/21/24. Linear structure (vs artifact) within RV, 9/8/22 Patient presented for wellness evaluation, on physical exam patient appeared grossly healthy, marked grade 4 systolic murmur noted, patient has history of DVD. On routine labwork noted abnormalities that raise concern of liver vs adrenal disease vs neoplasia. Current medications Pimobendan (Vetmedin) 5 mg tablets: Give 1/2 tablet(s) (2.5 mg) by mouth every 12 hours.

Abnormal PE/Chem/CBC/UA Results: LABs attached.

**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, or masses. There's pinpoint hyperechoic mineralization in the dependent portion of the urinary bladder measuring 0.16 cm.

The prostate is normal in size (0.58 cm) and shape for this neutered male dog. The parenchyma is homogenous and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

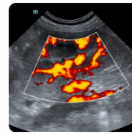
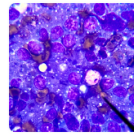
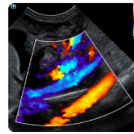
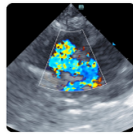
The left kidney has a normal shape and size (5.65 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There are occasional small cortical cysts noted. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (5.05 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 borderline plump in size measuring 0.67 cm at the cranial pole and 0.72 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 0.58 cm at the cranial pole and 0.69 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.



**PATIENT**

Rusty Oneil

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

MN

**AGE**

11 years

**WEIGHT**

26.4 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Loetitia Saint-Jacques,  
LVT

**HOSPITAL NAME**

MountainView Animal  
Hospital

**REFERRING VET**

Dr. Pablo Mendoza

**INVOICE**

10791

**DATE**

11/21/2025

**Spleen**

The spleen is subjectively normal in size (1.48 cm) and the echotexture is homogenous. The splenic capsule is smooth with no visible irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

**Liver**

The liver is large in size, irregular, and rounded. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. There are diffuse, poorly defined hyper- and hypoechoic nodules throughout the parenchyma. In particular the left caudal aspect of the liver is rounded and irregular. There is a slightly more pronounced hyperechoic mixed echogenicity nodule in the right side of the liver measuring 1.88 cm x 2.79 cm.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Some of the debris has hyperechoic shadowing foci most consistent with small choleliths. Examples measure 0.37 cm, 0.45 cm, and 0.43 cm in diameter. There is a moderate amount of non-organized echogenic debris. The cystic and common bile ducts are normal/not visible.

**Gastrointestinal**

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.7cm 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.

The visualized areas of duodenum (0.3 cm), jejunum (0.42 cm) and ileum have a uniform diameter with minimal fluid distension. Wall appears subjectively, mildly increased. Bowel loops follow a typical curvilinear path with distinct wall layering. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed

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**

The pancreas is prominent and mottled in the right limb. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

**Free Abdomen**

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

**ULTRASONOGRAPHIC FINDINGS**

- Large, irregular, rounded, heterogenous liver with hypoechoic nodules. The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, nodular hyperplasia, inflammatory/immune-mediated disease, infiltrative neoplasia (less likely) or other hepatopathy. The lesions observed could represent benign lesions such as regenerative nodules, etc. A neoplastic lesion cannot be ruled out but at this time there's minimal criteria



**PATIENT**

Rusty Oneil

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

MN

**AGE**

11 years

**WEIGHT**

26.4 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Loetitia Saint-Jacques,  
LVT

**HOSPITAL NAME**

MountainView Animal  
Hospital

**REFERRING VET**

Dr. Pablo Mendoza

**INVOICE**

10791

**DATE**

11/21/2025

for malignancy.

- Moderate gallbladder debris with gallbladder choleliths. Recommend starting chronic ursodiol therapy and continued monitoring of the gallbladder.
- Pancreatic changes most consistent with pancreatic remodeling.
- Borderline plump left adrenal with a normal right adrenal. Findings could represent normal anatomic variation or early hyperplasia.
- Mildly diffuse small intestinal thickening. The mild small intestinal wall changes may be a normal variant in this patient or could be consistent with an inflammatory process (e.g., inflammatory bowel disease).

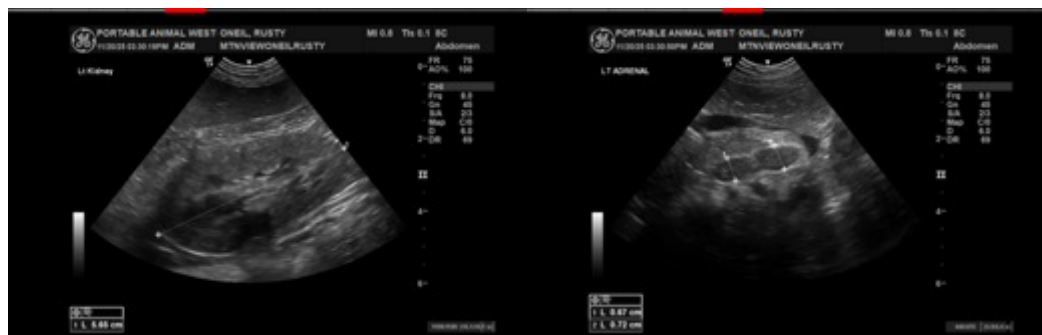
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The liver is large and very heterogenous with too numerous to count ill-defined hypo- and hyperechoic nodules. Generally, I suspect the majority of these represent benign regenerative nodules and similar. Although some are more pronounced and an early neoplastic lesion cannot be ruled out. The left caudal aspect of the liver is rounded and irregular and should be monitored. Recommend a liver function test and a fine needle aspirate of the liver (ideally, several locations.) If liver function is abnormal or liver enzymes continue to rise, it's likely that biopsies of the liver (for histopathology, culture, and copper levels) would likely be warranted to further evaluate.

The left adrenal gland is plump, and the right appears normal. If signs of Cushing's are present, you could consider adrenal function testing to further evaluate.

There's a moderate amount of gallbladder debris and some small choleliths. No evidence of an obstruction is present. Consider starting chronic ursodiol therapy and continued monitoring of the gallbladder.

The small intestine is subjectively mildly thickened. In the absence of underlying gastrointestinal symptoms the significance of this is uncertain.



Imaging performed by



MountainView Animal Hospital, Inc.  
pawsonography@gmail.com  
530-786-8340



Clinical Sonography & Telectology  
Educational Teleconsultation Services™

# SonoPath

FOSTERING THE ART OF VETERINARY MEDICINE™

SonoPath.com info@sonopath.com 1.800.838.4268

## PATIENT

Rusty Oneil

## SPECIES

Canine

## BREED

Chihuahua Mix

## SEX

MN

## AGE

11 years

## WEIGHT

26.4 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Loetitia Saint-Jacques,  
LVT

## HOSPITAL NAME

MountainView Animal  
Hospital

## REFERRING VET

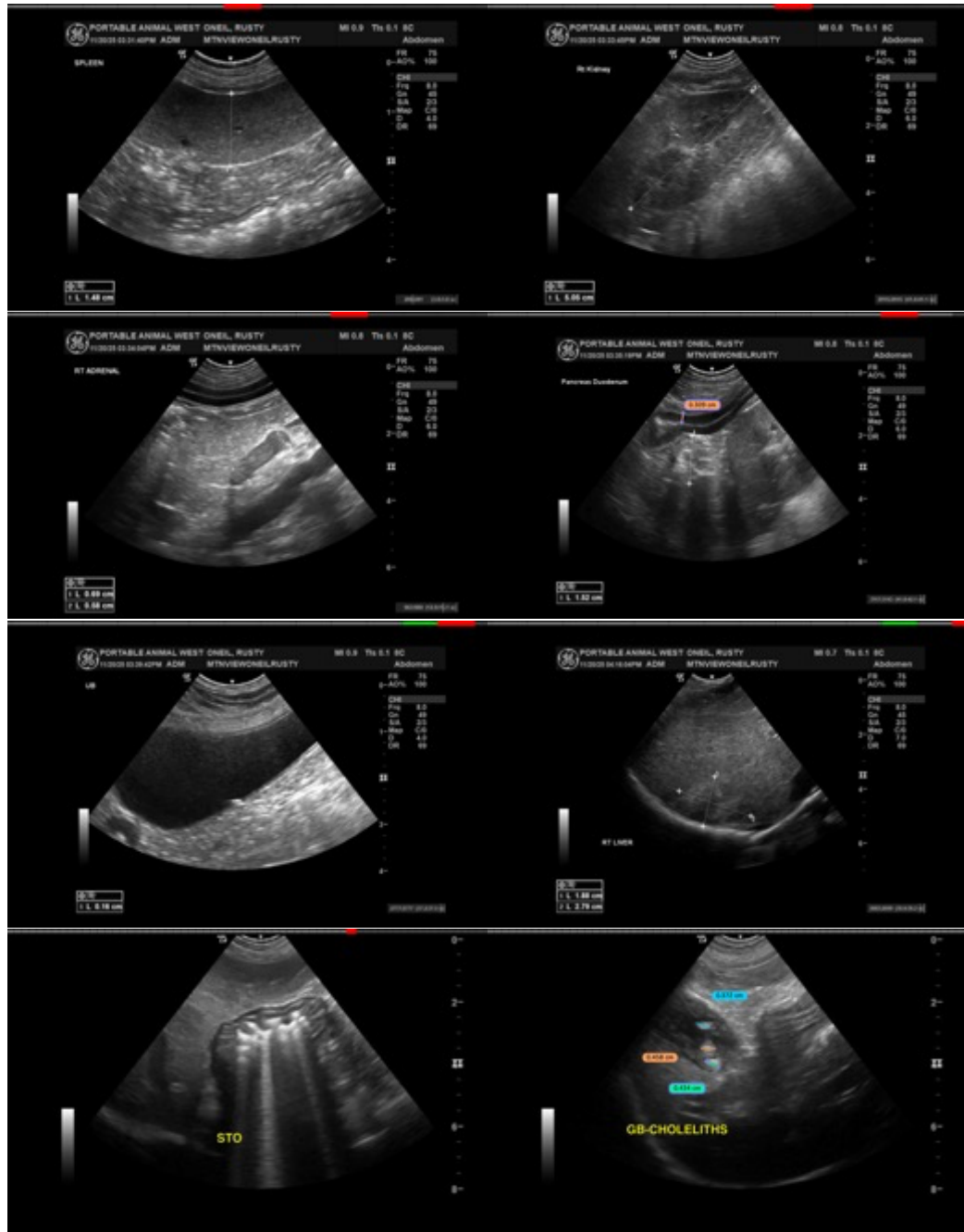
Dr. Pablo Mendoza

## INVOICE

10791

## DATE

11/21/2025



Imaging  
performed by



MountainView Animal Hospital, Inc.  
pawsonography@gmail.com  
530-786-8340



**Clinical Sonography & Telectology**  
Educational Teleconsultation Services™

**SonoPath**

FOSTERING THE ART OF VETERINARY MEDICINE™

SonoPath.com [info@sonopath.com](mailto:info@sonopath.com) 1.800.838.4268

**PATIENT**

Rusty Oneil

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

MN

**AGE**

11 years

**WEIGHT**

26.4 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Loetitia Saint-Jacques,  
LVT

**HOSPITAL NAME**

MountainView Animal  
Hospital

**REFERRING VET**

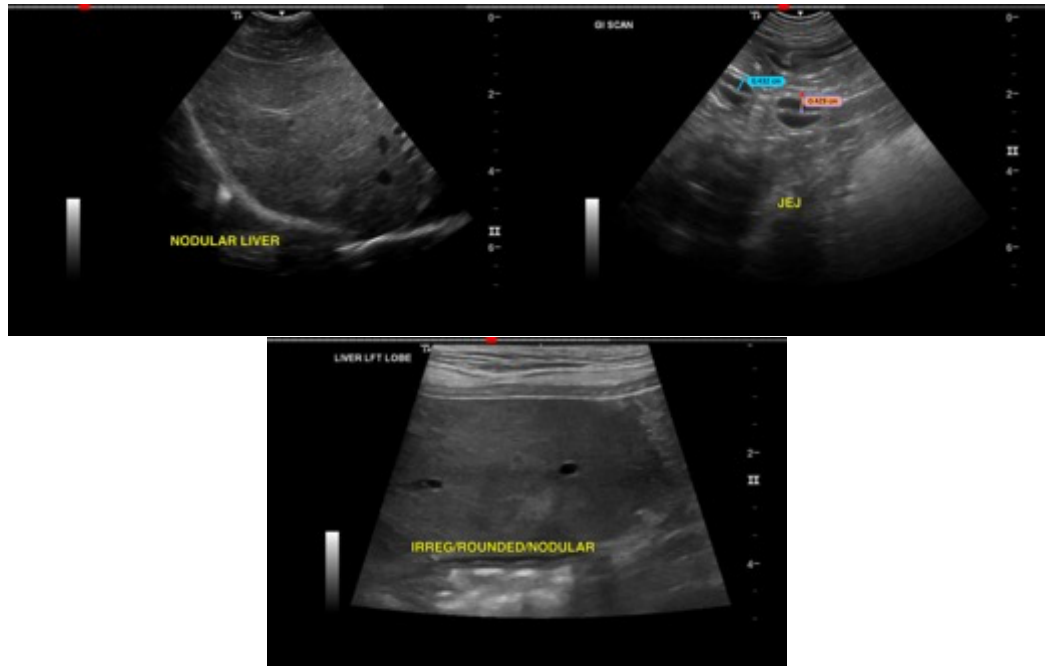
Dr. Pablo Mendoza

**INVOICE**

10791

**DATE**

11/21/2025



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)

[info@sonopath.com](mailto:info@sonopath.com)