



PATIENT

Willow O'Hanlon

SPECIES

Canine

BREED

Australian Shepard

SEX

Female Spayed

AGE

11y

WEIGHT

58.4 lbs

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Banfield - Salem

REFERRING VET

Dr. Marcberg

INVOICE

13067

DATE

1/13/26

PRESENTING CLINICAL SIGNS

History: Clinical Exam Findings: tooth root abscess, client would like dental with oral surgery, did not pass blood work or bile acid, see values bellow. otherwise, unremarkable ABNORMAL Lab work Values 10/08/2025: ALT 493 H (10-125), validation ALT 478 H (10-125) 10/14/2025 Pre-prandial 43.2umol/L <13 Postprandail 26.1umol/L <25

Current Medications: Galliprant 60mg SID, Hip and joint supplement, fish oil

Radiographic Findings: n/a

Notes to Specialist (if any): n/a

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment, mineral or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.0 cm in length. The right kidney measured 6.2 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.77cm width in the caudal pole. The right adrenal gland measured 0.53 cm width in the caudal pole.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver

The liver exhibited generalized hepatomegaly with symmetrical mildly rounded contour and normal vascular volume. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and mild heterogeneous remodeled generalized hepatic parenchyma. The hepatic and portal vasculature were normal in appearance without signs of congestion. Focal to intermittent, subtle, hyperechoic, well-demarcated intraparenchymal nodule was present measuring 1.2 cm in diameter. The gallbladder was non distended in size with mild, non-organized, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

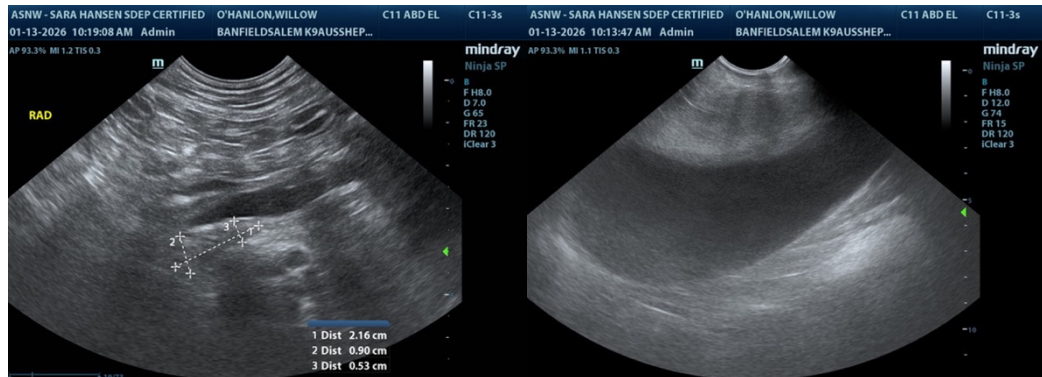
No omental lymphadenopathy or peritoneal effusion was present. Ventral caudal abdomen lipoma ventral to the urinary bladder was noted.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting normal vascular volume
- Mild, non-organized gallbladder (non-mucocele)
- Age-related renal/adrenal changes with normal adrenal size

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although nonspecific, the hepatopathy is most consistent with benign criteria and suspicion for nonspecific inflammatory hepatopathy given elevated ALT. No evidence of intrahepatic or extrahepatic macroscopic shunt. Further assessment may include, assuming normal clotting status, FNA cytology to assess for inflammatory cell type and +/- leptospirosis titer/PCR. Hepatic anesthetic risk is considered mild if markers of adequate hepatic function, i.e. normal albumin, glucose, BUN and cholesterol levels. Hepato-supportive medications may prove beneficial.





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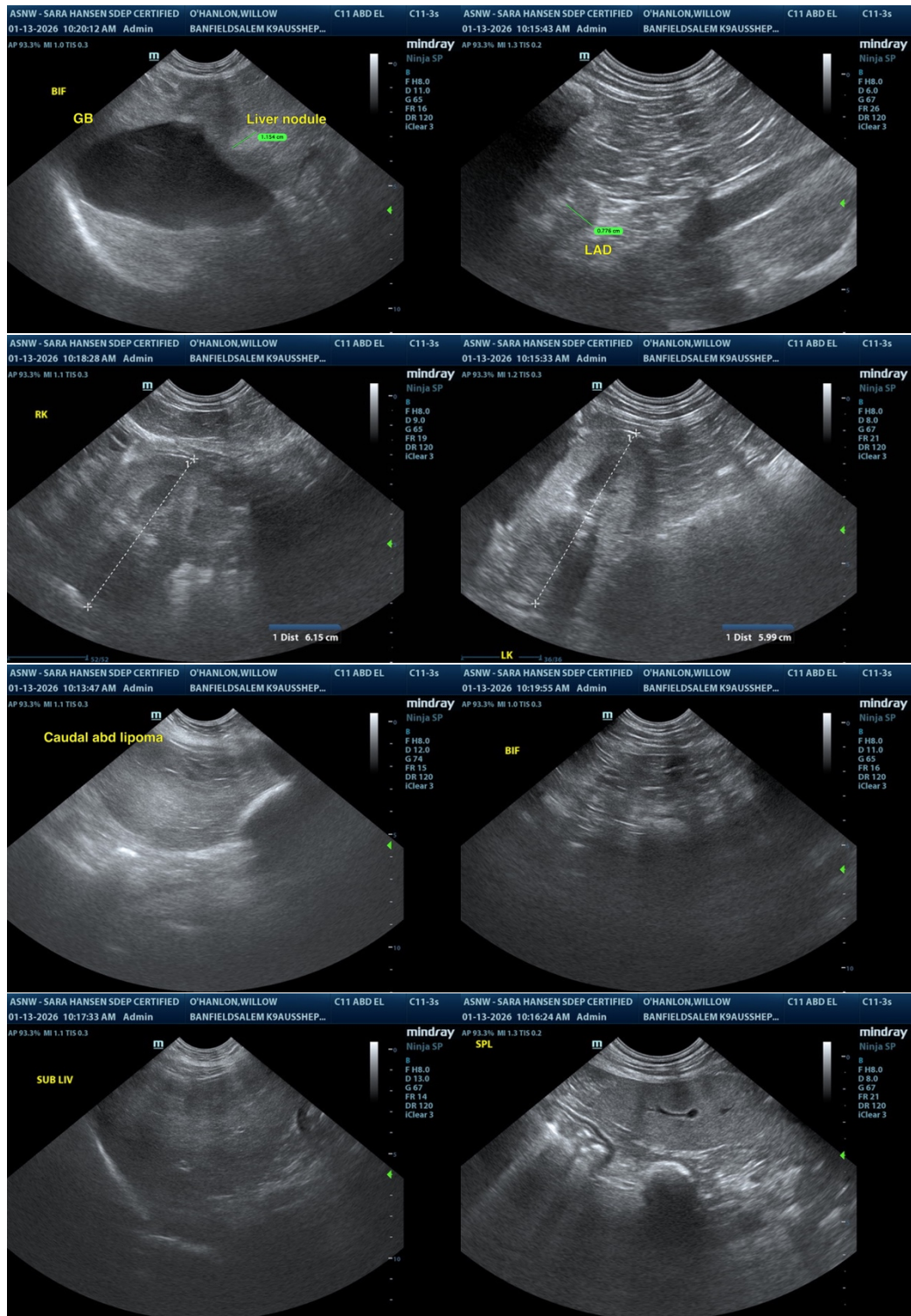
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com