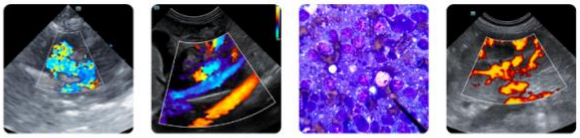

PATIENT

Kai Siegfried

SPECIES

Canine

BREED

Australian Cattle Dog

SEX

Spayed Female

AGE

12 Years 1 Month

WEIGHT

22.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

Pet Stat Animal Urgent Care

REFERRING VET

Dr. Doug Payne

INVOICE

13321

DATE

01/22/26

PRESENTING CLINICAL SIGNS

- Continued elevated liver values
- Intermittently vomits bile, otherwise clinically doing great.
- Prev. U/S 2/2024: Liver subjectively mildly enlarged, diffusely hyper/heteroechoic w/irregulat echogenicity-overall brighter appearing tissue w/non-well demarcated smaller hypoechoic regions. Architecture appears overall diminished.
- Current Meds: Ursodiol 300mg sid, Incuran 1/2-tab eod, Denamarin Adv.; Dasuquin Adv.
- Lab Abnormalities: AST 85 ALT 869 ALKP 871

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Nondependent particulate mild sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

The area of the aortic trifurcation was free of pathology.

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 6.2 cm in length. The right kidney measured 6.0 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.66 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.64 cm width at 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 & Gallbladder

The liver revealed generalized hepatomegaly primarily owing to large irregular expansive nonhomogenous to cystic liver mass measuring approximately 11.0 to 12.0 cm in diameter. The mass appeared to occupy a majority of the mid to caudal hepatic parenchyma extending into the level of the gastric axis with subjective mild secondary gastric displacement. The deep liver parenchyma exhibited nonhomogenous remodeled echotexture and intermittent subtle noncapsule deforming nodules.

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The gallbladder was non distended in size with mild nonorganized nondependent mildly congealed biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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

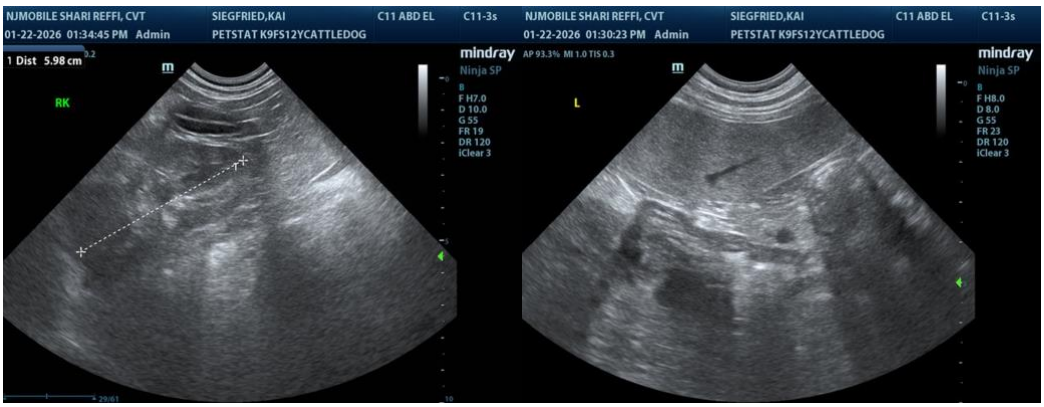
Minor pocket of ventral abdomen peri-intestinal effusion was present. No visualized significant omental lymphadenopathy. Mild increased perihepatic omental echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Liver mass with concurrent lobar nonhomogenous subtle nodular hepatic parenchyma.
- Nonorganized gallbladder debris (non-mucocele).
- Age-related renal changes.
- Normal bilateral adrenal glands.
- Normal gastrointestinal tract with suspect secondary mild gastric displacement owing to liver mass.
- Sonographically normal spleen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status, liver mass FNA cytology could be considered for further clarification The liver mass likely involves more than one liver lobe with potential extension into the area of the porta hepatis likely precluding complete surgical resection. Continued hepatosupportive medications with concurrent as needed gastrointestinal support is recommended.



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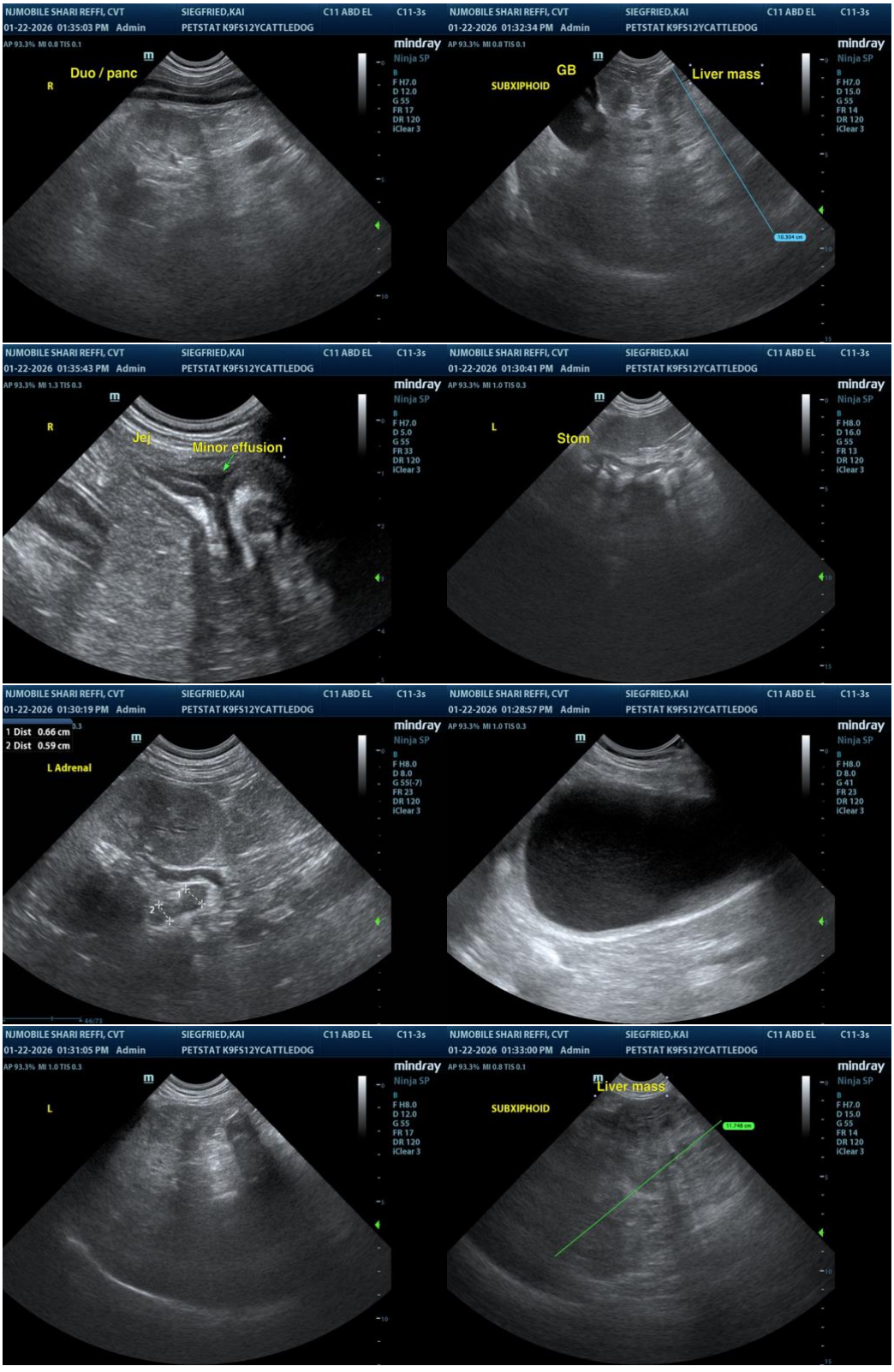

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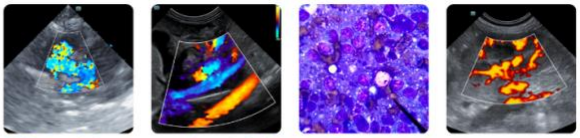

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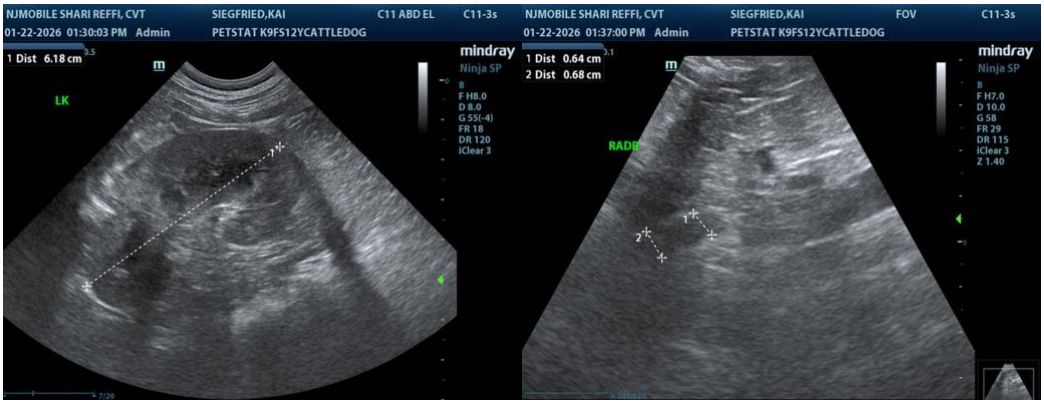

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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