



PATIENT

Summer Camataro

SPECIES

Canine

BREED

Min Schnauzer

SEX

F/S

AGE

8

WEIGHT

9.1 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Beddington Trail AH

REFERRING VET

Dr. Gaurav

INVOICE

16020

DATE

1/31/23

PRESENTING CLINICAL SIGNS

Non clinical

Abnormal PE/Chem/CBC/UA Results: Mild elevation of liver enzymes on pre surgical blood work. Bile acids pre pre a dial 11 (range 0-20) post 98 (range 11-29)

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 sediment or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation, pyelectasia, or significant renolithiasis. Pinpoint medullary mineral was noted. The left kidney measured 5.2 cm in length. The right kidney measured 4.5 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 0.47 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 0.52 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 was mildly enlarged with symmetrical to mildly rounded hepatic contour. Normal hepatic parenchyma echogenicity exhibiting moderate coarse echotexture was noted with minor parenchymal remodeling and discrete isoechoic parenchymal nodules. Normal to adequate hepatic vascular volume was noted. The visualized portal vein appeared to be sonographically unremarkable. No overt evidence of a portosystemic shunt. The gallbladder was non-distended in size containing primarily anechoic content with moderate, non-dependent yet nonorganized, hyperechoic gallbladder debris. The gallbladder walls were sonographically unremarkable without evidence of gallbladder or peripheral gallbladder inflammatory criteria. The cystic and common bile ducts were normal.



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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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting parenchymal remodeling and discrete intraparenchymal nodules - benign
- Moderate nondependent yet nonorganized gallbladder debris - not consistent with mucocele criteria
- Pinpoint bilateral medullary mineral
- Normal urinary bladder - no evidence of sediment / calculi

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening hepatic FNA cytology could be considered for further assessment, assuming normal clotting status. No evidence of hepatic or intraabdominal neoplastic criteria was noted. Hepatic functionality is likely adequate if normal albumin, glucose, BUN, and cholesterol levels. Hepatic core surgical biopsy is likely required for a definitive diagnosis. Empirically, hepatosupportive medications including Denamarin and Ursodiol, if not currently instituted, are suggested.



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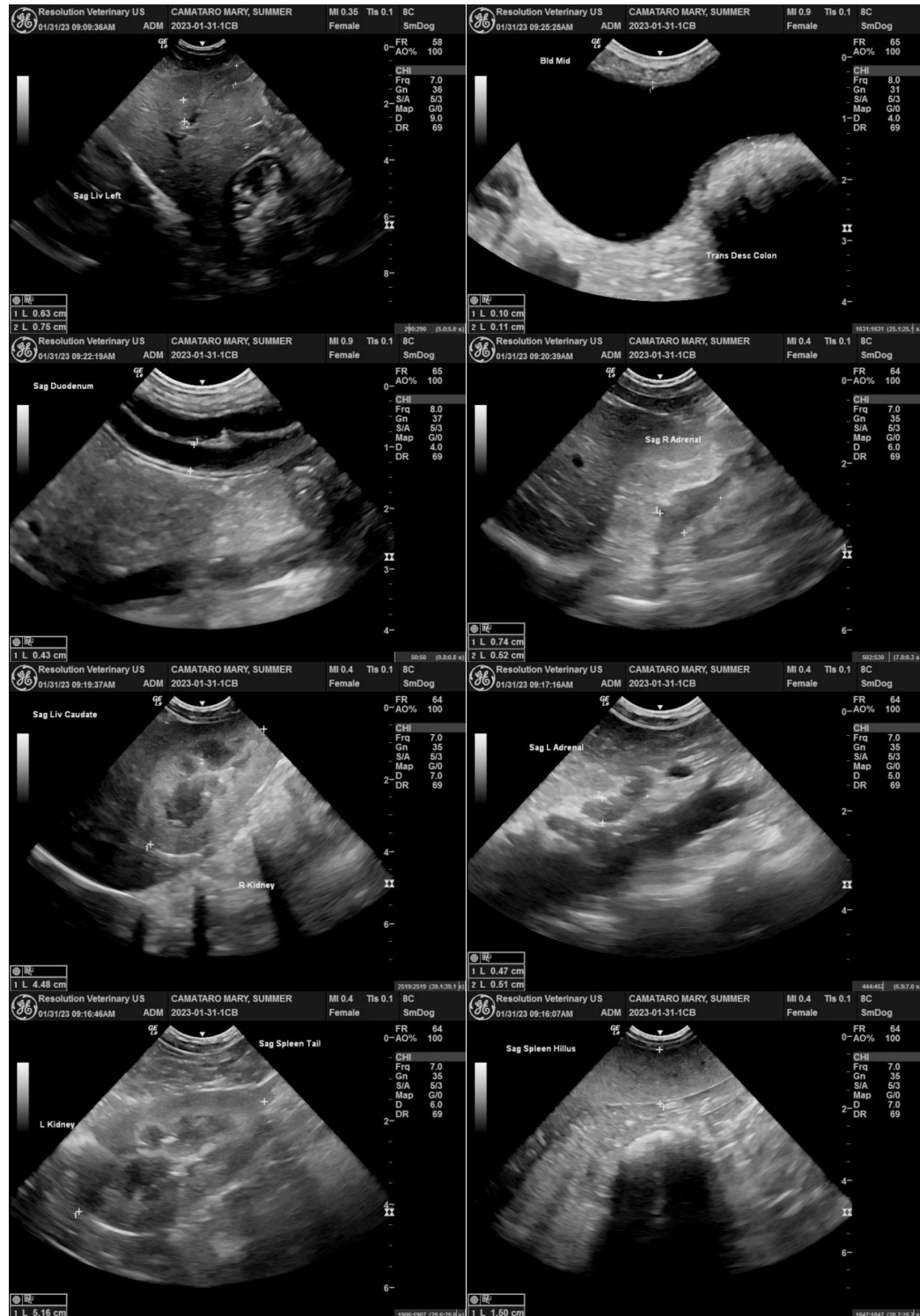
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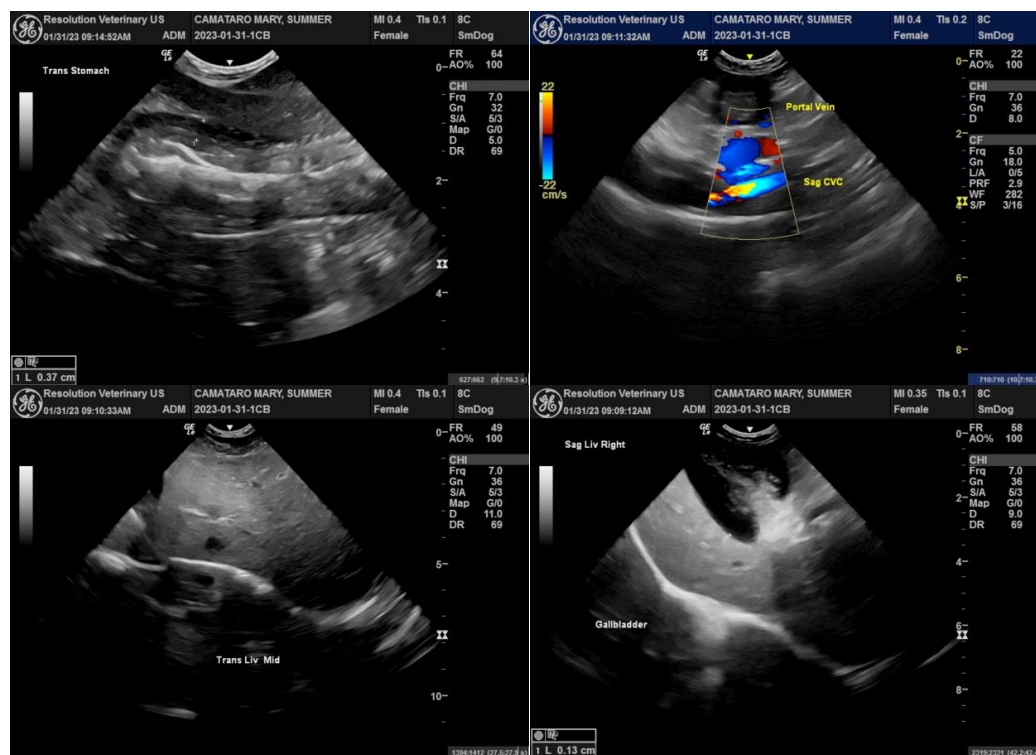
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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