


PATIENT

Mackey Chesney

SPECIES

Canine

BREED

Shih Tzu

SEX

Neutered Male

AGE

14 years

WEIGHT

12.5 kg

INTERPRETED BY

 R. McKenzie Daniel,
 DVM, DABVP

**IMAGING
 PERFORMED BY**

Crystal Hill

HOSPITAL NAME

 Beatties East Hamilton
 PH

REFERRING VET

Dr. Wittenrich

INVOICE

12348

DATE

10/12/21

PRESENTING CLINICAL SIGNS

Concerned about liver disease from abnormal blood values.

Abnormal PE/Chem/CBC/UA Results: Abnormal bloodwork Oct 7, 2021 - increased Platelets, low RBCs, low Hemoglobin and Hematocrit. ALP and ALT elevated.

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

The residual prostate was free of overt pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. Both kidneys exhibited subtle cortical hypertrophy with increased corticomedullary border echogenicity and probable dystrophic mineralization with minor reduced medullary volume. The left kidney measured 4.2 cm in length. The right kidney measured 4.4 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 1.7 cm length x 0.66 cm width in the caudal pole. The right adrenal gland measured 1.6 cm length x 0.9 cm width in the caudal pole.

Spleen

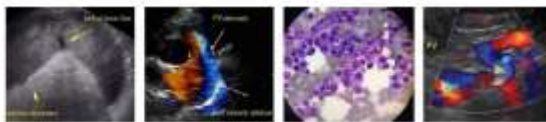
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute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

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Nonhomogeneously echogenic to focally cystic mass occupying the deep mid to left liver, measuring approximately 6.2 cm in diameter, was present. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.

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.


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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.

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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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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Neutered Male

ULTRASONOGRAPHIC FINDINGS
Primary Findings
AGE

14 years

- Hepatopathy with mid to left nonhomogeneous to cystic mass
- Mild gallbladder debris (non-mucocele)
- Bilateral chronic renal changes

WEIGHT

12.5 kg

Secondary Findings

-

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 DVM, DABVP

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hepatic mass was nonspecific with potential considerations including cystic nodular hyperplasia, granuloma, or neoplasia such as carcinoma or other. Neoplasia is favored, although not definitive. Further clarification may include if accessible, ultrasound guided FNA of the mass +/- normal-appearing hepatic parenchyma for screening cytology. Hepatosupportive medications including Ursodiol, given the presence of mild gallbladder debris, may prove beneficial.

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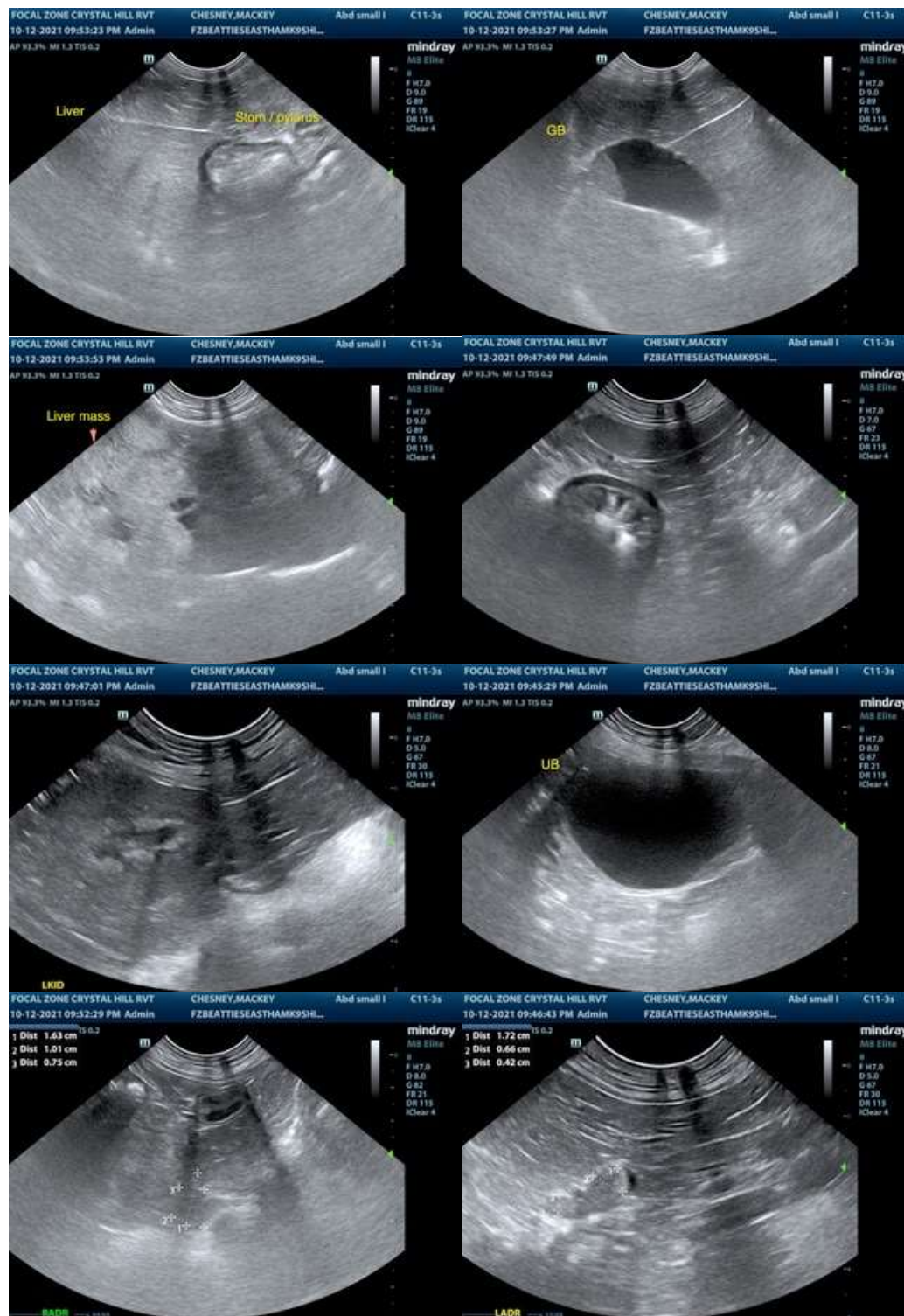
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The information and recommendations provided are based on the images presented by the



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referring veterinarian. 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.

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info@SonoPath.com

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