



**PATIENT PRESENTING CLINICAL SIGNS**

Molly Johnson

History: distended abdomen, good appetite

**SPECIES**

Abnormal PE/Chem/CBC/UA Results: TOTAL PROTEIN 7.5g/dL ALT (SGPT) 324IU/L Alk Phosphatase 1,052IU/L GGT 29IU/L BUN 41MG/DL BUN/CREAT RATIO 51 TRIGLYCERIDE 319mg/dL AMYLASE 1,336IU/L Precision PSL 753U/L Platelet Count 418X1000/UL UA -Pending

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Yorkie

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 were noted.

**SEX**

Spayed Female

Normal size and margination were 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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of medullary mineral were noted. The left kidney measured 4.9 cm in length. The right kidney measured 4.8 cm in length.

**AGE**

12 Years

**Adrenal Glands**

**WEIGHT**

15.4 Pounds

The bilateral adrenal glands exhibited mild enlargement based on caudal pole width measurement in light of patient body weight. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.49 cm width in the cranial pole and 0.62 cm width in the caudal pole. The right adrenal gland measured 0.74 cm width in the cranial pole and 0.77 cm width in the caudal pole.

**INTERPRETED BY**

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

**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.

**IMAGING PERFORMED BY**

Dr. Mychajlonka

**Liver**

**HOSPITAL NAME**

Craig Road AH

The liver exhibited mild to moderate generalized enlargement with normal 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. The hepatic and portal vasculature were normal in appearance without signs of congestion.

**REFERRING VET**

Dr. Mychajlonka

The gallbladder was non distended in size with moderate nondependent yet nonorganized variably echogenic debris primarily in the caudal lumen and the area of the gallbladder neck. The cystic duct and common bile ducts were normal without evidence of dilation.

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17691

**Gastrointestinal**

**DATE**

10/14/22

The stomach presented intact wall layering with a normal wall layer ratio. The visualized gastric walls were sonographically normal. The lumen of the stomach contained mild echogenic, nonshadowing ingesta without signs of obstruction or foreign material. Concurrent mild luminal gas was present.



**PATIENT**

Molly Johnson

The small intestine presented intact wall layering with segmental propensity for prominent mucosa, along with segmental nonspecific hyperechoic mucosal speckling to striations. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The duodenum wall measured 0.48 cm.

**SPECIES**

Canine

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

***Pancreas***

**BREED**

Yorkie

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

***Free Abdomen***

**SEX**

Spayed Female

No overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

12 Years

- Hepatomegaly, exhibiting mild parenchymal remodeling- subjectively benign
- Mild to moderate gallbladder debris (non-mucocele)
- Bilateral chronic renal changes, exhibiting minor medullary mineral

**WEIGHT**

15.4 Pounds

- Intact yet segmentally prominent small bowel walls exhibiting nonspecific hyperechoic mucosal speckling to striations
- Mild bilateral adrenomegaly

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- Heterogeneous pancreas- patient/age-related variant, minor benign remodeling, potential for low grade to chronic pancreatitis

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Full adrenal work up is recommended as strong clinical suspicion of Cushings syndrome, i.e., PU/PD, polyphagia or similar clinical signs. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. Hepatosupportive medications, including Denamarin and Ursodiol may prove beneficial. The intestinal mucosal changes, assuming normal albumin levels, are nonspecific and may indicate patient or age-related variant or low grade mild enteritis. No overt evidence intestinal neoplastic criteria. Potential for protein-losing enteropathy may be a consideration if historical gastrointestinal signs and/or if evidence of hypoalbuminemia going forward is documented.

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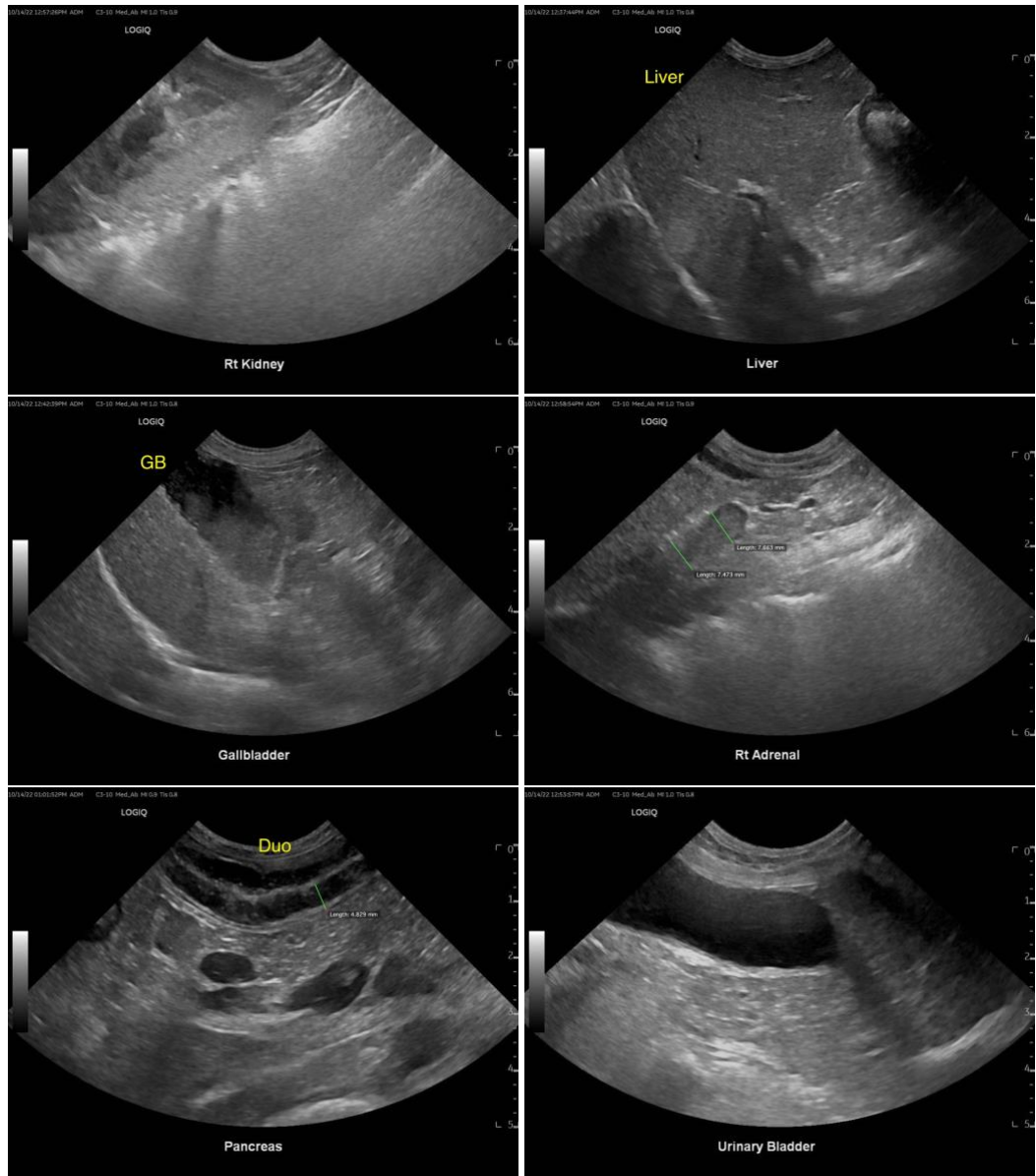
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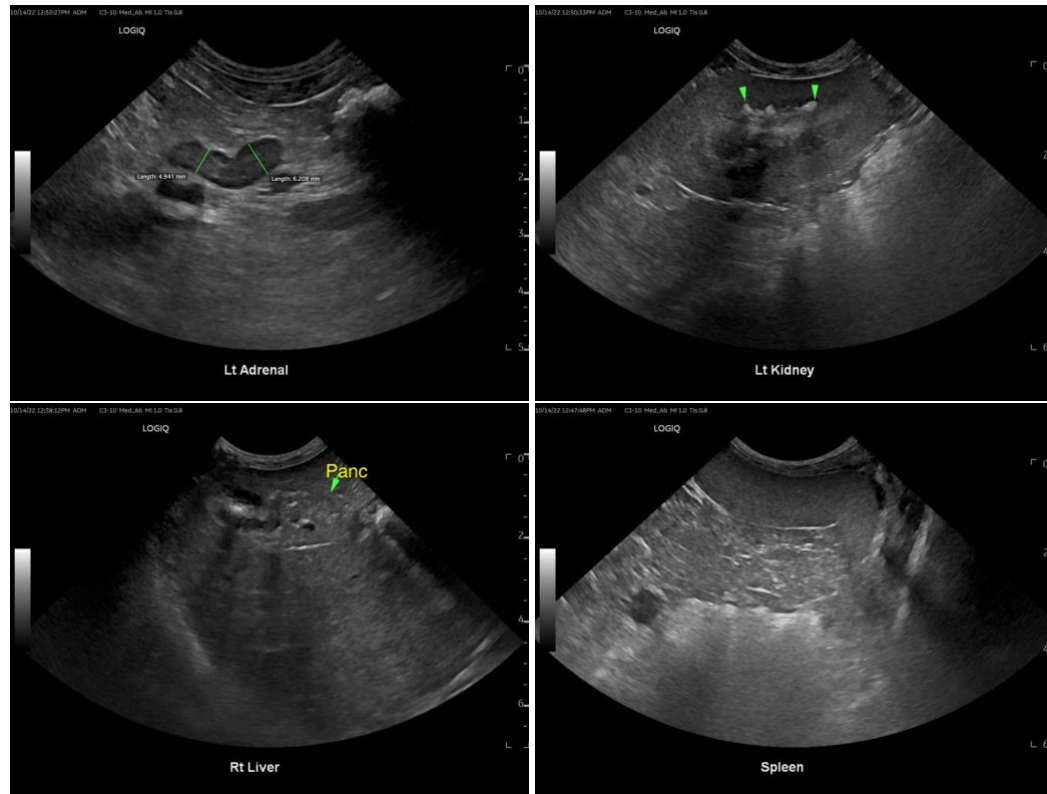
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**WEIGHT**

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