



PATIENT

Hobo Berry

SPECIES

Canine

BREED

Pit Bull Mix

SEX

Spayed Female

AGE

13 years

WEIGHT

75 lbs.

PRESENTING CLINICAL SIGNS

-PU/PD, pot belly developing over the past several months.

Abnormal PE/Chem/CBC/UA Results: ALT 161, ALP 342, GGT 23, CA 11.5, USG 1.009

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. 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 area of the uterine stump and aortic trifurcation were 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 pyelectasia or overt pyelonephritis. The left kidney measured 7.2 cm in length. The right kidney measured 8.4 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 2.9 cm length x 0.96 cm width in the caudal pole. The right adrenal gland measured 3.1 cm length x 0.96 cm width in the caudal pole. No evidence of adrenal hyperplasia or tumors was noted.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

Liver/ Gallbladder

The liver presented increased in size. The liver exhibited generalized mild nonuniform echogenic parenchyma with intermittent subtly hypoechoic parenchymal nodules. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder debris. No evidence of gallbladder or peripheral inflammation was noted. The cystic and common bile ducts were normal.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Q Street AH

REFERRING VET

Dr. Hoerauf

INVOICE

12359

DATE

10/4/21



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Gastrointestinal

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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 gastric body wall measured 0.58 cm width.

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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. The duodenum wall measured 0.68 cm width.

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

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The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This is likely age-related pancreatic changes and is considered incidental.

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Free Abdomen

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No intraabdominal masses, lymphadenopathy or peritoneal effusion was present. The omentum was of uniform echogenicity.

INTERPRETED BY

ULTRASONOGRAPHIC FINDINGS

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

Primary Findings

- Hepatomegaly with echogenic to subtly nodular parenchyma
- Mild gallbladder debris (non-mucocele)
- Sonographically unremarkable bilateral adrenal glands
- Minor age-related kidneys

IMAGING PERFORMED BY

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The appearance of the liver was nonspecific but may indicate steroid or other vacuolar hepatopathy, chronic hepatitis/cholangiohepatitis, lipidosis, or emerging fibrosis with indistinct areas of nodular to regenerative hyperplasia or hematopoiesis, while hepatic neoplasia cannot be excluded. Assuming normal coagulation parameters, ultrasound-guided FNA of the liver using a 25-gauge needle would be warranted for cytology, primarily to assess for evidence of inflammatory cells and to rule out round cell neoplasia. Vitamin K administration would be suggested prior to FNA if elected. Serum cobalamin levels may be considered if lipidosis is confirmed.

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Although the bilateral adrenal glands were sonographically unremarkable for age, screening UCCR +/- LDDST, given the patient's clinical signs and urine specific gravity (<1020), may be considered. Leptospirosis titer / PCR Is indicted if potential exposure.

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Hepatic functionality is likely normal assuming normal albumin, glucose, cholesterol, and BUN levels.



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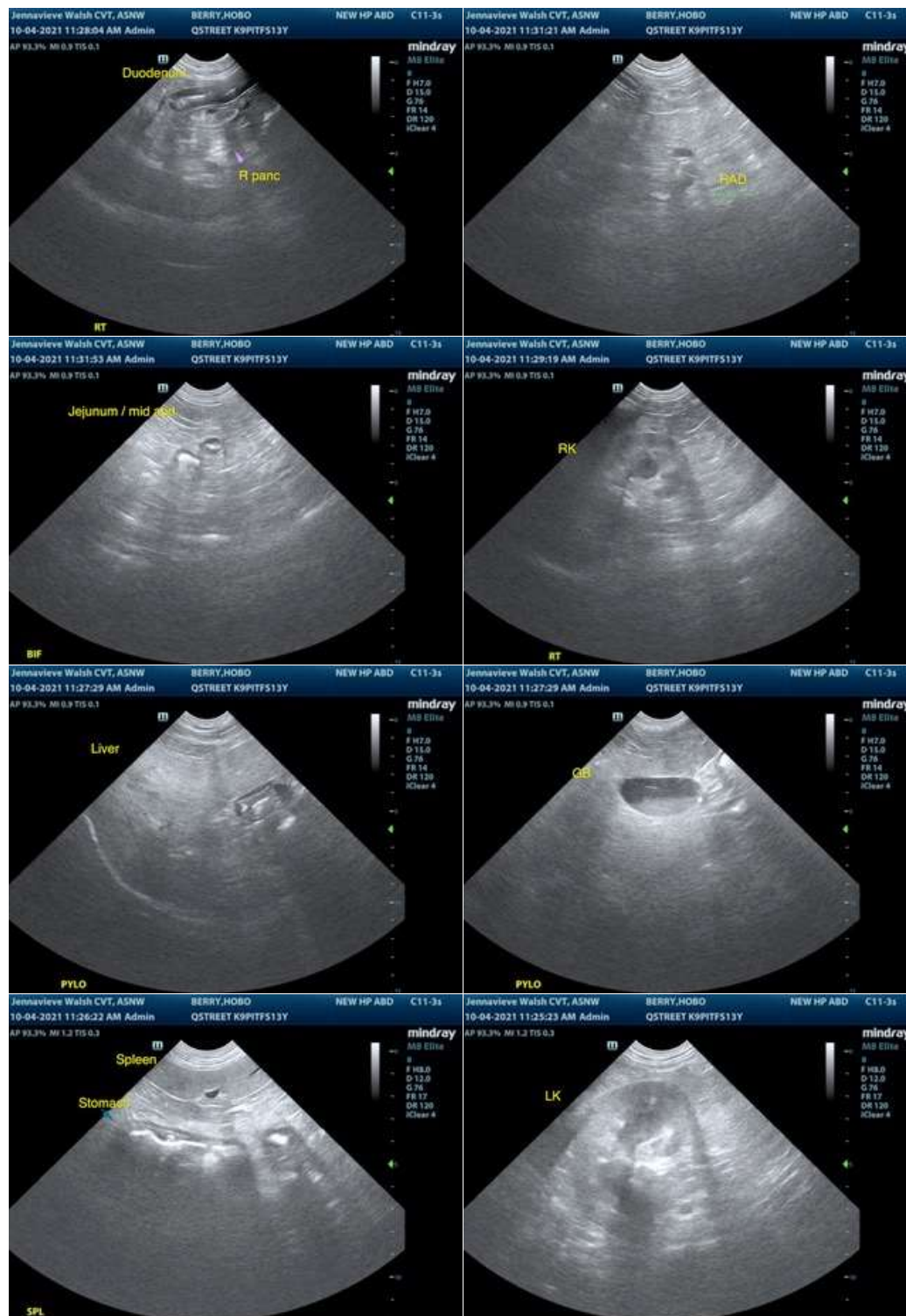
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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