



PATIENT
Franklin Roosevelt
Harmann

SPECIES
Canine

BREED
Pitbull X

SEX
MN

AGE
9 years

WEIGHT
66.5 lbs.

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME
VCA Salem AH

REFERRING VET
Dr. Reed

INVOICE
15118

DATE
10/6/22

PRESENTING CLINICAL SIGNS

Care Club Preventative work up. No Current concerns.

Abnormal PE/Chem/CBC/UA Results: Historic progressive elevation in ALP; marked elevation in ALP today (previously 777 on labs 11/12/2021); ALT stable--r/o cushing's disease vs. cholestatic disease vs. gallbladder mucocele vs. other; AUS needed to better assess BUN decreased (30 on labs 1/18/22), CRE stable/mildly increased (1.1 on labs 1/18/22); urine to provide more info No other obvious abnormalities 06-Jul-2022 2:37 PM (olivia.reed) Current Medications Trazadone and Galliprant

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction 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 pathology.

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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and minor loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint medullary mineral was noted. The left kidney measured 5.8 cm in length. The right kidney measured 6.2 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 2.8 cm length x 0.98 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 3.4 cm length x 0.72 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 subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were



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normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. 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.

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.

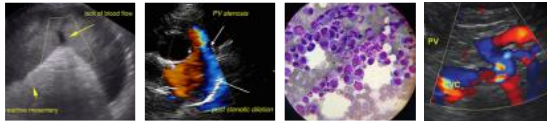
ULTRASONOGRAPHIC FINDINGS

- Benign hepatopathy
- Sonographically unremarkable gallbladder
- Normal bilateral adrenal glands - no evidence of adrenomegaly or tumors
- Early minor age-related renal changes with pinpoint medullary mineral

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although nonspecific, the sonographic appearance of the liver is suggestive of benign vacuolar hepatopathy pattern with hepatic inflammatory parenchymal disease considered a less likely differential diagnosis. Potential for mild hepatic cholestasis without evidence of post hepatic obstructive criteria or evidence of neoplastic criteria.

Screening ultrasound-guided hepatic FNA for cytology could be considered for further assessment. If evidence of lymphoplasmacytic inflammation or antigenic stimulation on hepatic cytology, novel protein or hydrolyzed diet trial, as well as hepatosupportive medications may prove beneficial.



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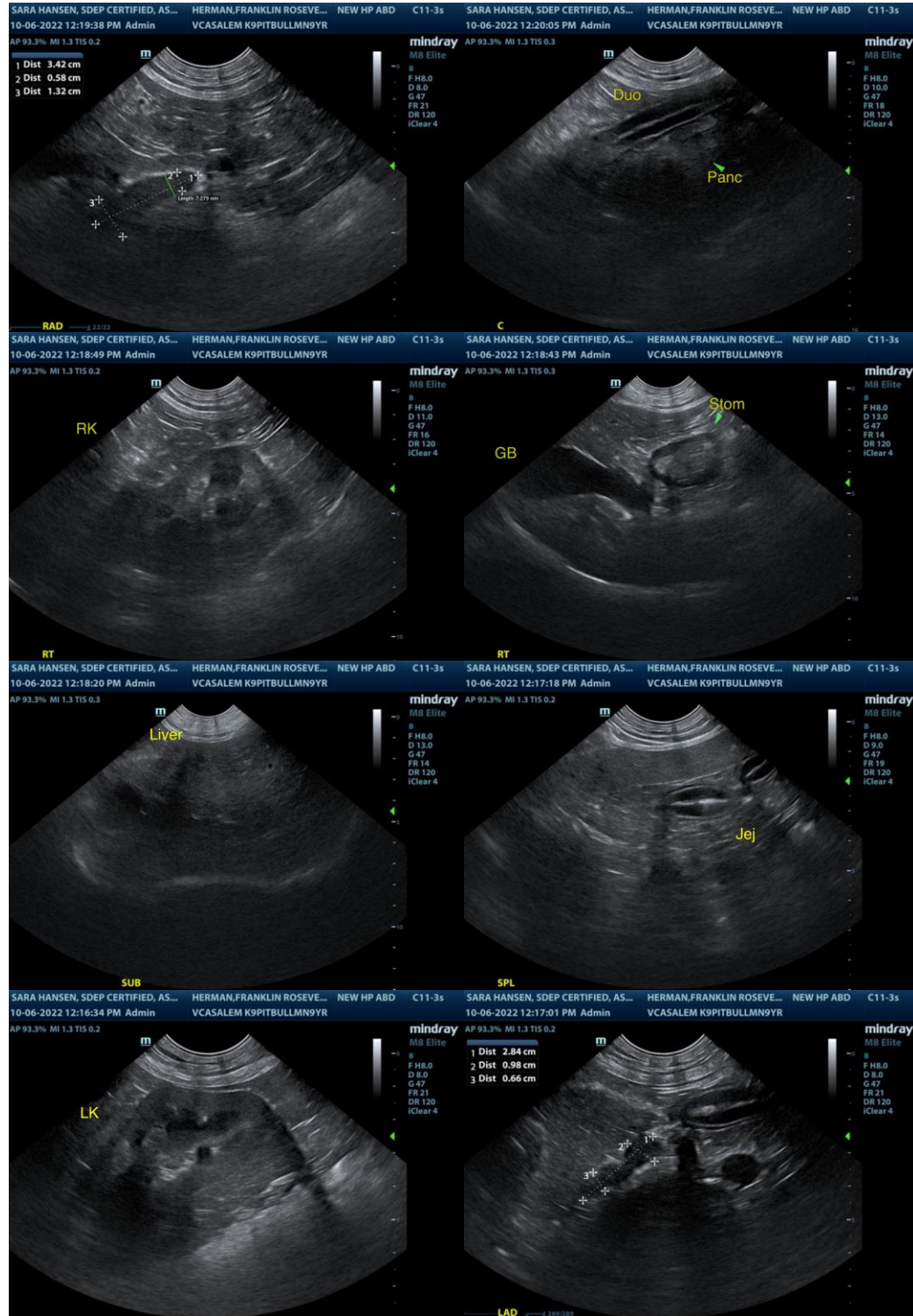
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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