

**PATIENT PRESENTING CLINICAL SIGNS**

River Landers Hepatic enzyme elevation first noted on routine senior lab work last month. Progressive weight loss. Hyporexic. Fever and lethargy noted today. Current meds: Denamarin advanced. Engorged tick removed today.

**SPECIES**

Canine Abnormal PE/Chem/CBC/UA Results: ALT 601, AST 236, total bili 1.2, ALP 796.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

**Urinary System**

Greyhound 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 were noted.

**SEX**

Spayed Female Normal size and margination was 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. The right kidney measured 7.6 cm. The left kidney measured 8.1 cm.

**AGE**

7 Years

**Adrenal Glands**

**WEIGHT**

62 Pounds

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 cm at the cranial pole and 0.48 cm at the caudal pole. The left adrenal gland measured 0.58 cm at the cranial pole and 0.55 cm at the caudal pole.

**Spleen**

**INTERPRETED BY**

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

The spleen presented generalized enlargement with mildly swollen to rounded splenic capsule with areas of minor capsule asymmetry. Medial folding of the cranial and caudal spleen was present. Overall, normal splenic parenchyma echogenicity exhibiting mild parenchyma heterogeneity. Normal splenic vascularity. No splenic masses noted.

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS

**Liver**

**HOSPITAL NAME**

Falmouth AH

The liver exhibited subjective mild enlargement. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were 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**

**REFERRING VET**

Dr. Jennifer Switzer

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. Subtle hyperechoic mucosal speckling noted.

**INVOICE**

42890

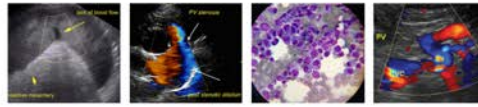
Normal visible colon wall layers were present with apparent formed feces in lumen.

**Pancreas**

**DATE**

11/21/22

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 was evident.



**PATIENT**

River Landers

Several mildly enlarged medial iliac lymph nodes were present. Example measured 1.8 cm x 0.73 cm. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

**SPECIES**

Canine

**Free Abdomen**

No evidence of omental lymphadenopathy. A small pocket of very scant free fluid is noted between the cranial left kidney and adjacent medial spleen. No omental masses.

**BREED**

Greyhound

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Spayed Female

- Hepatopathy, sonographically unremarkable gallbladder – vacuolar hepatopathy, non-specific hepatitis, viral, bacterial, Leptospirosis, toxin, etc., non-obstructive cholestasis, or other hepatopathy. Occult infiltrative hepatic neoplasia considered less likely.
- Generalized moderate splenomegaly exhibiting cranial and caudal folding – hyperplasia, hematopoiesis, splenitis, infiltrative neoplasia possible.
- Overtly normal gastrointestinal tract
- Mild non-specific medial iliac lymphadenopathy – hyperplasia, lymphadenitis. The medial iliac lymphadenopathy is not overtly consistent with neoplastic criteria.

**AGE**

7 Years

**WEIGHT**

62 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Assuming normal clotting status and using 25-gauge needle, hepatic FNA cytology warranted for further assessment. Tick titers/infectious disease serology recommended if clinically indicated.

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 DABVP (Canine and Feline)

A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. As needed gastrointestinal support recommended.

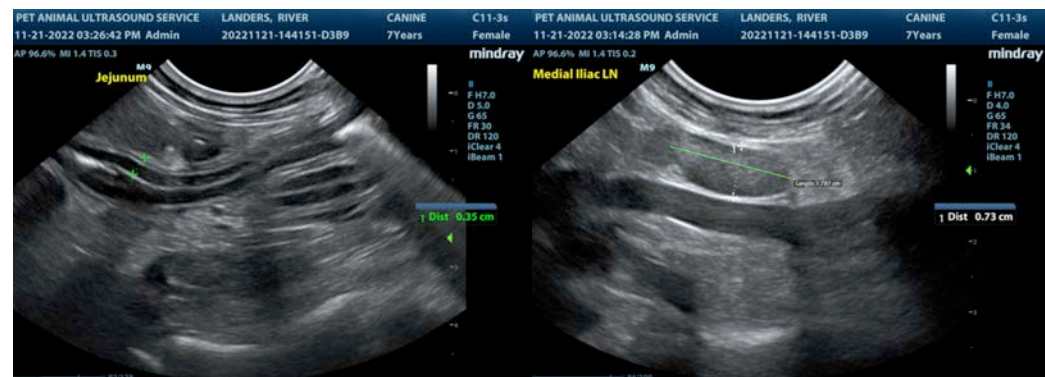
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3-view chest radiographs recommended to rule out occult thoracic pathology as a contributing factor to the patient's weight loss.

**HOSPITAL NAME**

Falmouth AH



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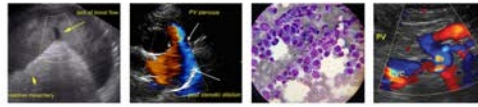
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**PATIENT**

River Landers

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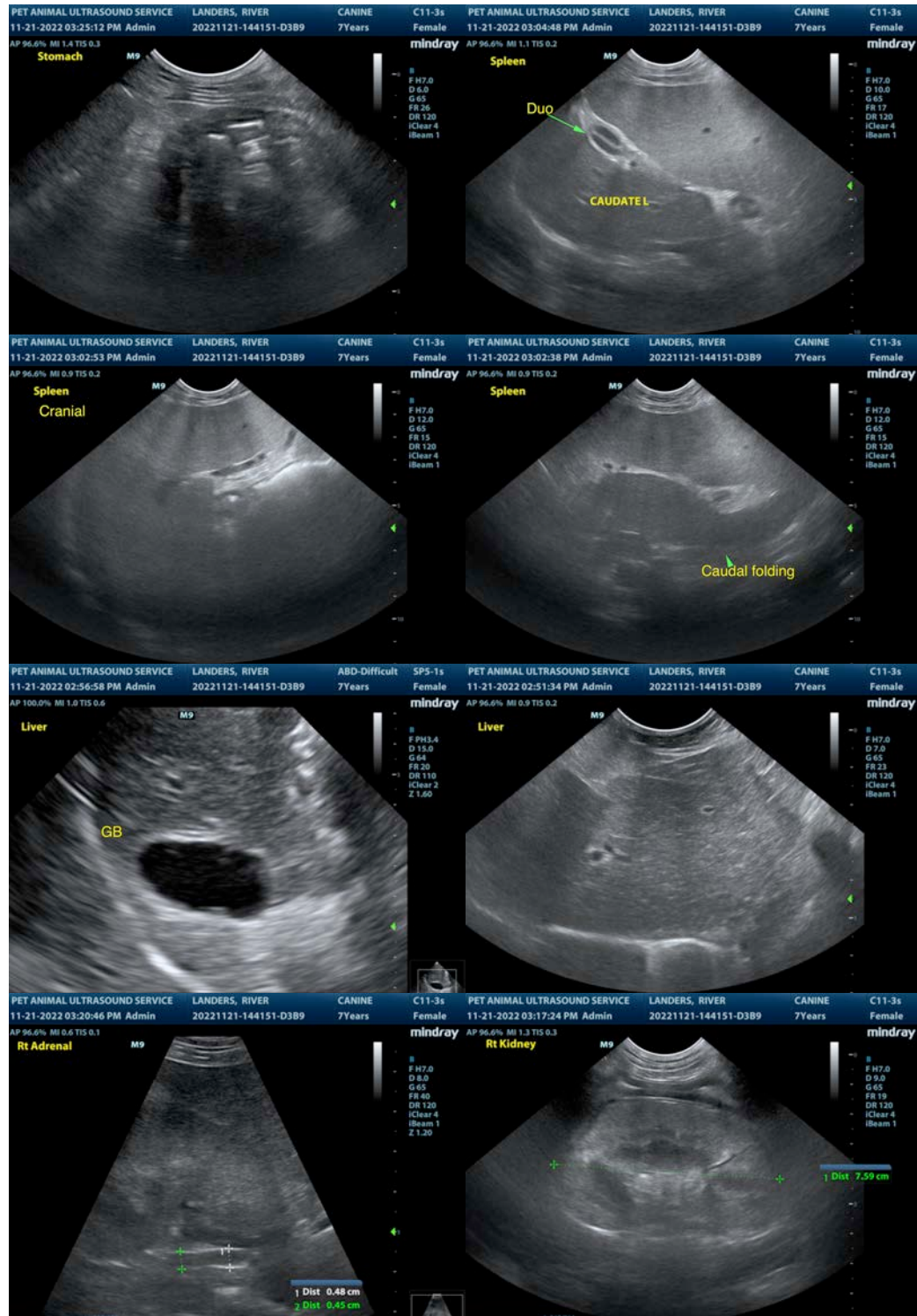
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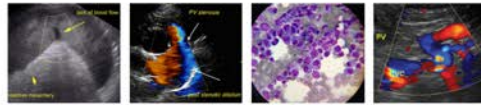
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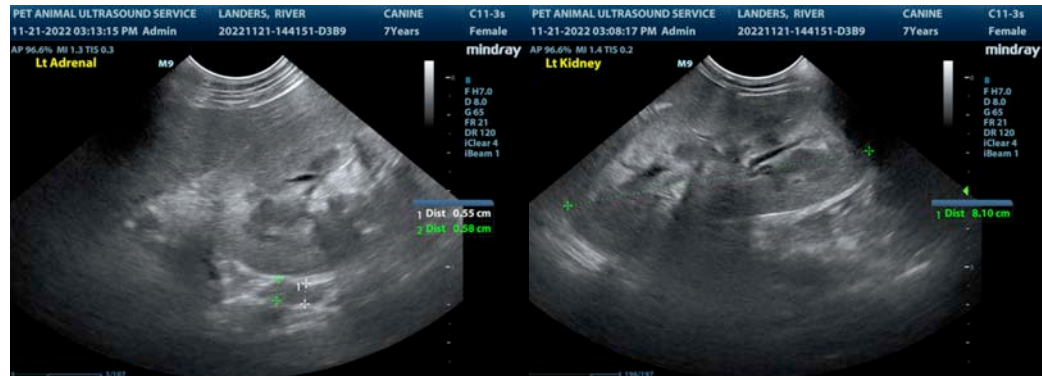
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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