



## PATIENT

Reese Little

## SPECIES

Canine

## BREED

Maltese Mix

## SEX

Female Spayed

## AGE

11 years 10 months

## WEIGHT

8.2 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Ashley Whitesell

## HOSPITAL NAME

Dickson AC

## REFERRING VET

Ashley Whitesell

## INVOICE

12856

## DATE

11/25/25

## PRESENTING CLINICAL SIGNS

History: Yearly Ultrasound to monitor - Hyperechoic renal cortex with small cortical cysts. - Hypoechoic, homogeneous lesion (1 cm) in the liver parenchyma. - Gallbladder with organized sediment and possible polyploid cholecystitis

Abnormal PE/Chem/CBC/UA Results: 8-15-2025: Alkp 433, potassium 5.7, Hct 65%

## 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 were noted.

Normal size and margination was 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 indistinct loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Minor medullary mineral and intermittent small cortical cysts were present. The left kidney measured 4.1 cm in length. The right kidney measured 3.8 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 0.51 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 0.58 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

The liver was enlarged in size with symmetrical contour and normal vascular volume. Mild heterogeneous parenchyma and parenchymal remodeling. Non-disruptive, non-homogeneous, focally cystic intraparenchymal nodule right lateral to caudate liver lobe measuring ~2.0 cm in diameter. The gallbladder was non-distended in size with normal wall without evidence of inflammation or edema. Mild to moderate, non-dependent, mildly congealed yet non-organized gallbladder debris present. 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.

## 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 was evident.

## Free Abdomen

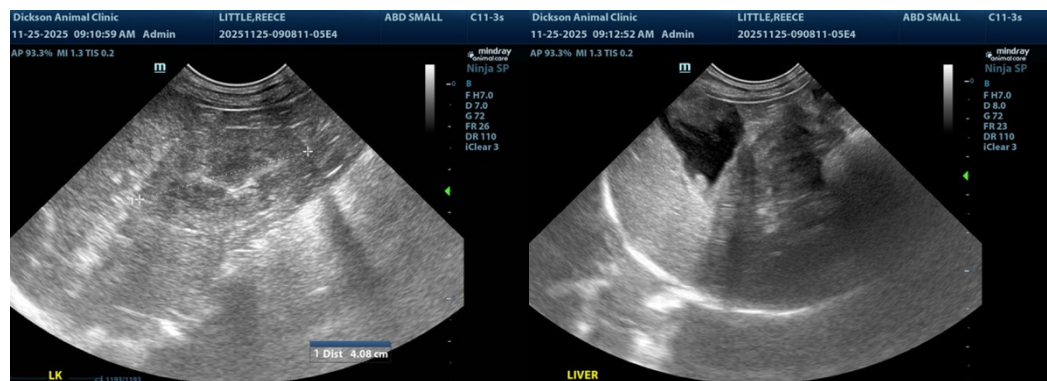
No overt lymphadenopathy or peritoneal effusion was present.

## ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting mild parenchymal remodeling and non-disruptive intraparenchymal nodule – most consistent with benign criteria, chronic vacuolar hepatopathy, nodular hyperplasia, hematopoiesis, non-obstructive cholestasis in conjunction with ALP elevation probable
- Non-organized gallbladder debris (non-mucocele)
- Mild chronic renal changes exhibiting mild medullary mineral and small cortical cysts

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given probable static hepatic presentation and without evidence of progressive nodular changes, no suspicion of hepatic neoplastic criteria. Hepato-supportive medications with monitoring of hepatic and renal parameters is recommended.





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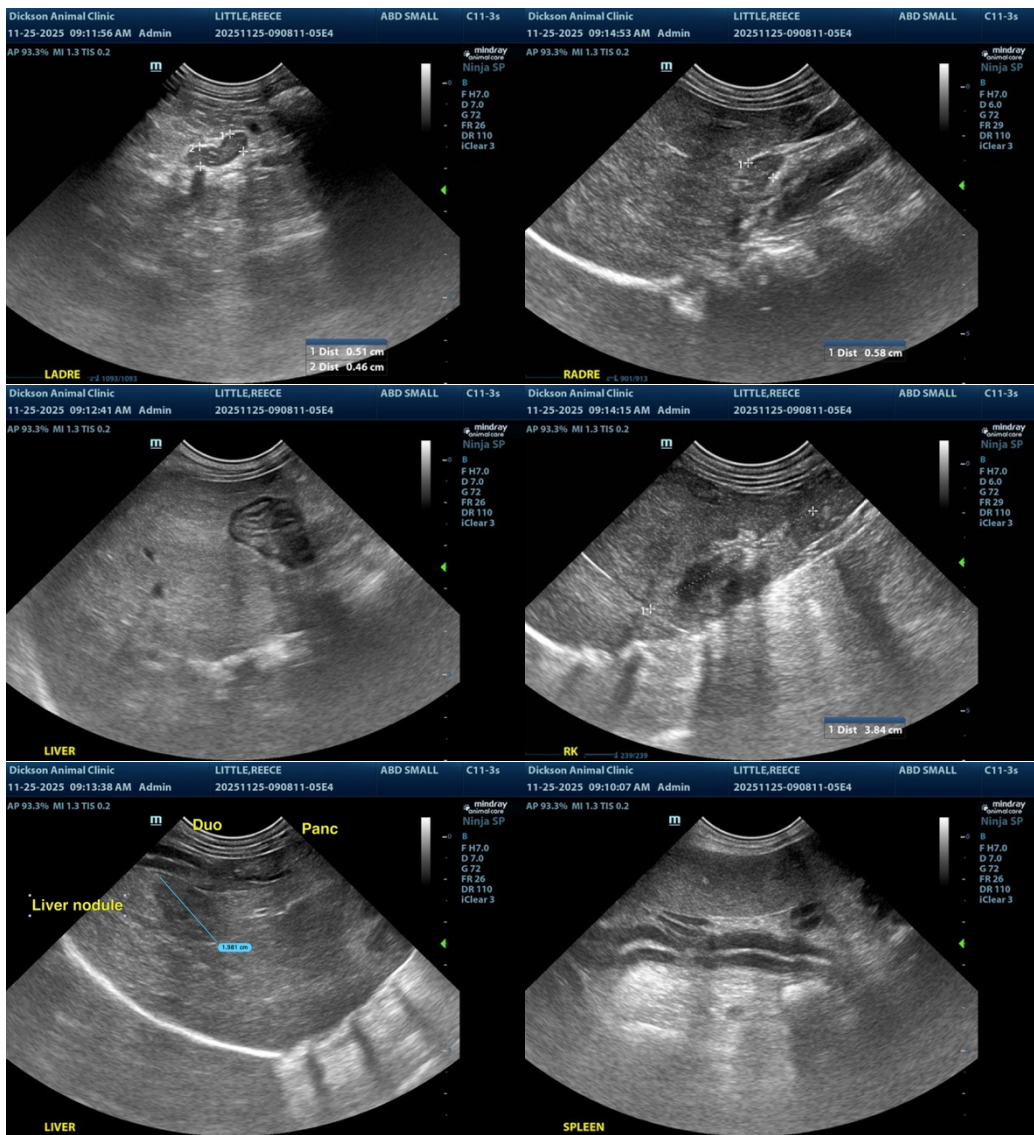
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)