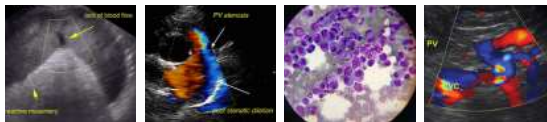


PATIENT	PRESENTING CLINICAL SIGNS
Cleopatra (Cleo) Meza	Persistent mild elevation in ALT despite Denamarin. Normal appetite and energy level. No vomiting or diarrhea.
SPECIES	Abnormal PE/Chem/CBC/UA Results: 10/28/21: ALT 192. 12/2/21: ALT 197
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	<i>Urinary System</i>
Dachshund Mix	The urinary bladder was sonographically unremarkable yet exhibited mild subnormal size owing to lack of urine distension. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. No evidence of 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	No evidence of pathology in the area of the aortic trifurcation.
FS	
AGE	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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of minor dystrophic medullary mineralization were present. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.
12 Years	
WEIGHT	<i>Adrenal Glands</i>
14.04 lbs	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 1.4 cm length x 0.53 cm width in the caudal pole. The right adrenal gland measured 2.1 cm length x 0.62 cm width in the caudal pole.
INTERPRETED BY	<i>Spleen</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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	<i>Liver</i>
Jenna Walsh, CVT	The liver was subjectively normal in size with generalized subtle increased hepatic parenchyma echogenicity comparable to the spleen with mild coarse echotexture. Intermittent variably echogenic intraparenchymal nodules were present. The intraparenchymal nodules were discreet and nonexpansive ranging from hypoechoic to mildly hyperechoic in appearance. No hepatic masses noted. The hepatic and portal vasculature were normal in appearance without signs of congestion.
HOSPITAL NAME	
West Eugene Animal Hospital	
REFERRING VET	
Dr. Powers	
INVOICE	The gallbladder was non distended in size with mild echogenic, nonmineralized gallbladder debris. The cystic duct and common bile ducts were normal without evidence of dilation.
48920	<i>Gastrointestinal</i>
DATE	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.
12-10-21	



PATIENT
Cleopatra (Cleo) Meza

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.

SPECIES
Pancreas

Canine

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.

BREED

Dachshund Mix

Free Abdomen

SEX
No overt lymphadenopathy or peritoneal effusion was present.

FS

ULTRASONOGRAPHIC FINDINGS

AGE

12 Years

Primary

- Hepatopathy exhibiting intermittent variably echogenic intraparenchymal nodules.
- Mild gallbladder debris (nonmucocele).

WEIGHT

14.04 lbs

Secondary

- Bilateral mild chronic renal changes.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall liver, in addition to the intermittent intraparenchymal nodules, although nonspecific, was most consistent with generalized benign hepatopathy as well as likely benign nodules such as areas of nodular to regenerative hyperplasia, lipogranulomas, or minor hematopoiesis. No overt evidence of hepatic neoplastic criteria which is considered unlikely. Potential for low grade inflammatory hepatopathy possible given the ALT elevation.

IMAGING PERFORMED BY

Jenna Walsh, CVT

Assuming normal clotting status, ultrasound guided FNA of the hepatic parenchyma for screening cytology primarily to assess for evidence of inflammatory cells could be considered. However, given the low grade ALT elevation and lack of clinical signs, continued monitoring at this stage would be appropriate. Hepatosupportive medications including current denamarin as well as ursodiol, given the presence of gallbladder debris as well as its antioxidant and immunomodulatory effects within the liver, may prove beneficial.

HOSPITAL NAME

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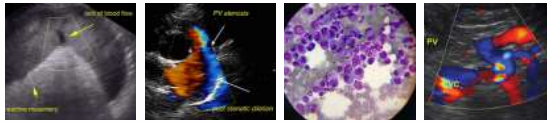
Dr. Powers

INVOICE

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DATE

12-10-21



PATIENT

Cleopatra (Cleo) Meza

SPECIES

Canine

BREED

Dachshund Mix

SEX

FS

AGE

12 Years

WEIGHT

14.04 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

West Eugene Animal
Hospital

REFERRING VET

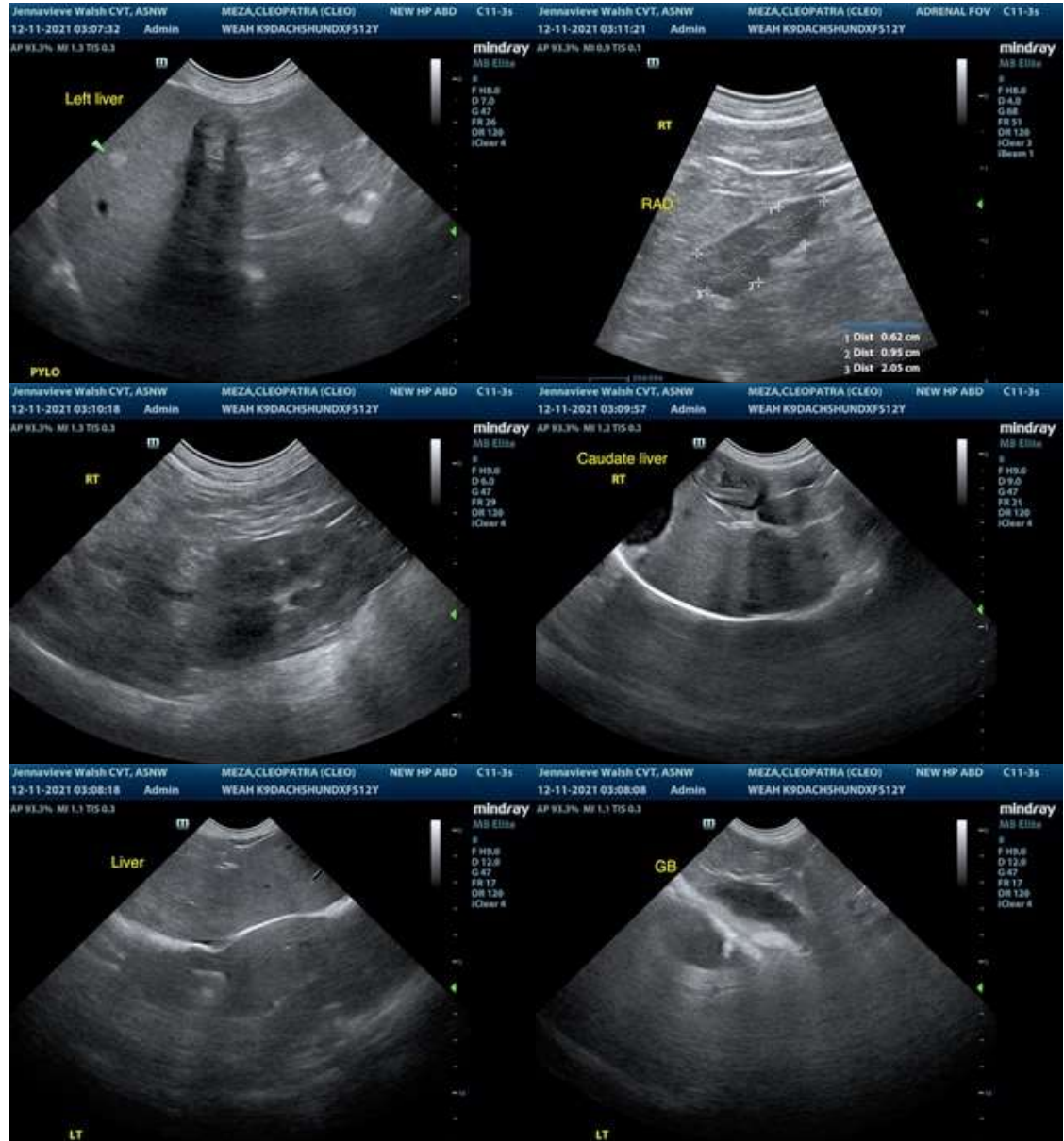
Dr. Powers

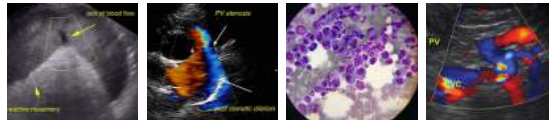
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DATE

12-10-21





PATIENT

Cleopatra (Cleo) Meza

SPECIES

Canine

BREED

Dachshund Mix

SEX

FS

AGE

12 Years

WEIGHT

14.04 lbs

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

West Eugene Animal
Hospital

REFERRING VET

Dr. Powers

INVOICE

48920

DATE

12-10-21



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)
info@SonoPath.com