



PATIENT

Riley Antkiewucz

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

Female Spayed

AGE

12 yrs

WEIGHT

12.0 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Emily Kirk

HOSPITAL NAME

Shiloh AH

REFERRING VET

Alesha Diniz

INVOICE

12922

DATE

12/12/25

PRESENTING CLINICAL SIGNS

History: Elevated liver ALP, steadily increasing since Feb 2023, ALT still wnl but been increasing. No specific signs of illness mentioned.

Abnormal PE/Chem/CBC/UA Results: Lab work run 11/13/25 - Platelets 466 (H) 120 - 412 K/ μ L, Chloride 105 (L) 108 - 119 mmol/L, Total Protein 7.7 (H) 5.5 - 7.5 g/dL, ALP 533 (H) 5 - 160 U/L, Cholesterol 418 (H) 131 - 345 mg/dL Urine pH 8.0 H, 1+ protein (H) (UPC 0.2), Crystals 1+ AMMONIUM MG PHOSPHATE (1-5)/HPF (H)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

The area of the aortic trifurcation was free of pathology.

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. The left kidney measured 3.9 cm in length. The right kidney measured 4.2 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 0.41 cm width in the caudal pole. The right adrenal gland measured 0.44 cm width in the caudal pole.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multiple, well-defined, symmetrical, hyperechoic nodules were present throughout the cranial to caudal parenchyma with an example measuring 1.5 cm in diameter. 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 or neoplastic changes were not noted. The hyperechoic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

Liver

The liver presented mild to moderate subjective hepatomegaly. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, congealed, gravity dependent, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.



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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 was evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Benign hepatopathy
- Mild gallbladder debris (non-mucocele)
- Hyperechoic splenic nodules – most consistent with benign criteria, i.e. myelolipomas
- Age-related renal changes
- Normal bilateral adrenal glands

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonographically the liver is suggestive of vacuolar hepatopathy criteria, possible non-obstructive cholestasis in conjunction with ALP elevation. Assuming normal clotting status, hepatic FNA Cytology could be considered to assess for evidence of non-obvious inflammation given normal yet mild increasing ALT level. Hepato-supportive medications including Denamarin and Ursodiol with monitoring given patient is non-clinical would be reasonable.





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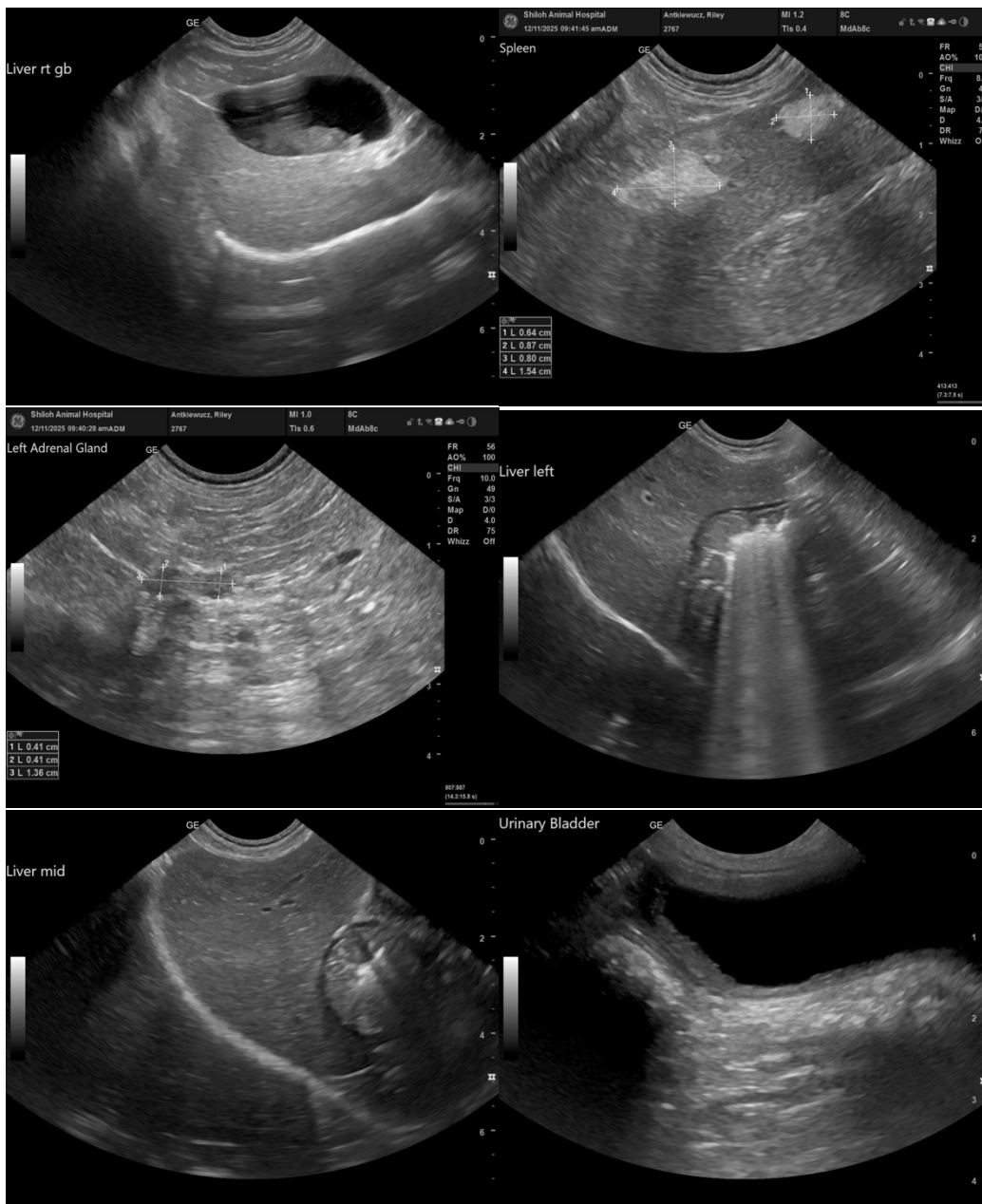
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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