



**PATIENT**

Phoebe Weber

**PRESENTING CLINICAL SIGNS**

History: Sensitive abdomen (tense for ultrasound), history of syncope, seizure?

Medication: Metronidazole, Mirtazapine, L-theonine

**SPECIES**

Canine

HCT 52.9, WBC 7.2 with mild monocytopenia, ALT 260, ALP 351, GGT 50, TBili 2.9, Na/K ratio 40, Urine specific gravity 1.050

**BREED**

Tibet Terr Mix

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**SEX**

FS

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 was noted.

**AGE**

11 years

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

25 Pounds

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 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 4.5 cm in length. The right kidney measured 5.1 cm in length.

**INTERPRETED BY**

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

**Adrenal Glands**

No overt pathology was noted in the area of the left adrenal gland, although not definitively visualized. The right adrenal gland was indistinctly visualized without overt pathology, subjectively measuring 0.53 cm width at the caudal pole.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**Spleen**

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

**HOSPITAL NAME**

Littlestown VH

**REFERRING VET**

Dr. Jennings

**Liver/ Gallbladder**

The potential for mild hepatomegaly is possible, yet no evidence of significant 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 primarily anechoic luminal content. The cystic and common bile ducts were normal. No evidence of post hepatic stasis or obstruction was noted.

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***Gastrointestinal***

Phoebe Weber

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with mild luminal gas. No signs of ileus, obstruction, or foreign material were noted. The gastric body wall width measured 0.40 cm.

**SPECIES**

Canine

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. The duodenum wall width measured 0.43 cm.

**BREED**

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

**SEX**

FS

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.

**AGE**

11 years

***Free Abdomen***

No omental masses, lymphadenopathy or peritoneal effusion were present.

**WEIGHT**

25 Pounds

**ULTRASONOGRAPHIC FINDINGS**

***Primary Findings***

- Hepatopathy with sonographically unremarkable gallbladder / common bile duct-subjectively benign
- Mild age-related renal changes
- Otherwise, sonographically unremarkable abdomen

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**IMAGING**

**PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

Overall largely mild geriatric abdomen without evidence of significant visceral pathology as an obvious cause of the patient's clinical signs.

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Overall, the appearance of the liver, although nonspecific, is most consistent with benign hepatopathy with considerations including metabolic / reactive / vacuolar hepatopathy, given the ALP elevation with potential low-grade inflammatory hepatopathy in light of the ALT elevation. No overt evidence of hepatic neoplastic criteria, which is considered unlikely. If persistent or progressive hepatic enzyme elevations, further assessment may include hepatic FNA, assuming normal clotting status, for screening cytology +/- Leptospiriosis titer/ PCR If clinically indicated.

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Neurology consultation and/or ECG could be considered if recurrent syncopal vs. seizure-like episode.

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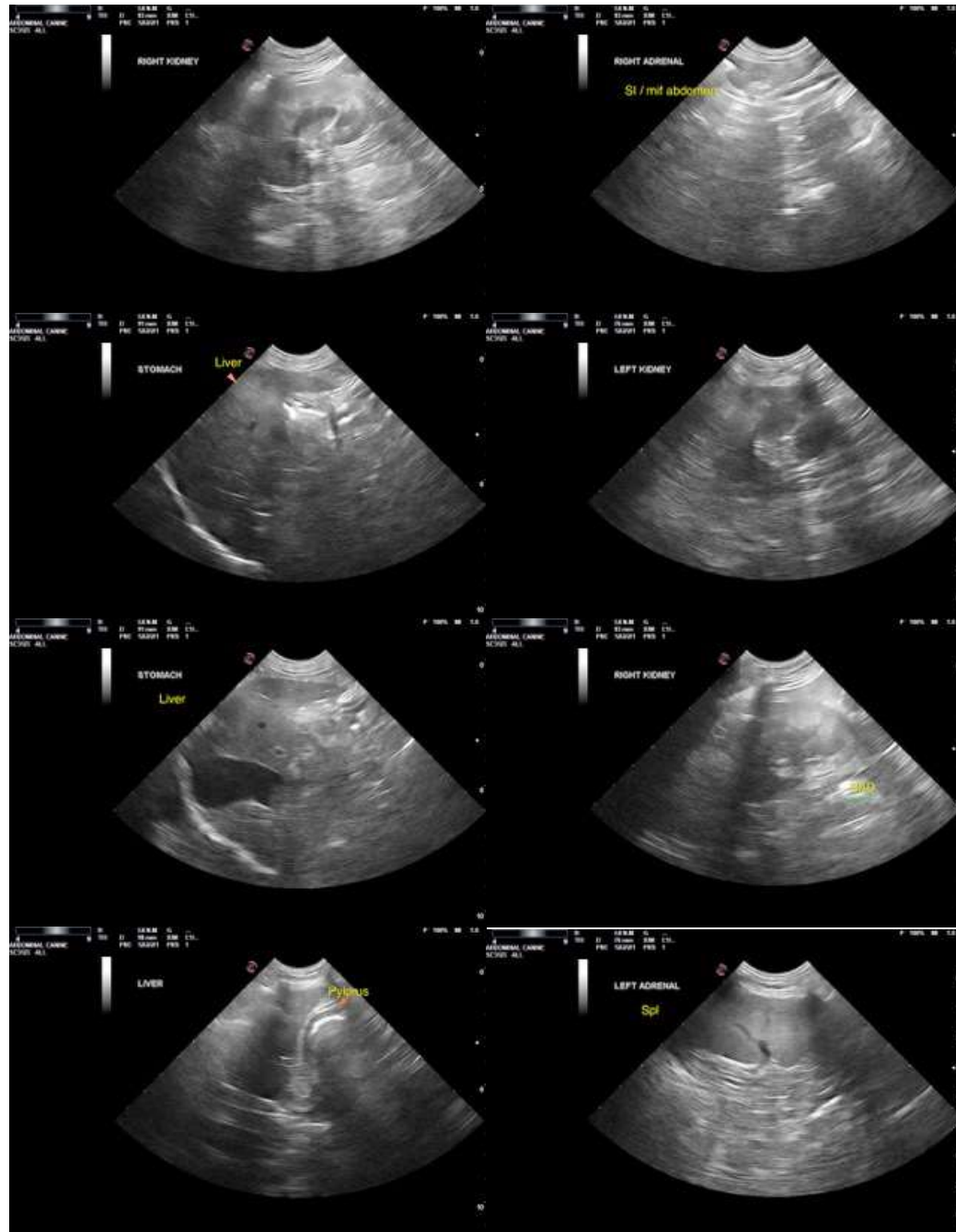
Dr. Jennings

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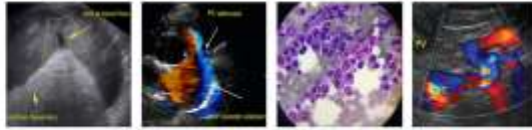
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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**R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)**

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