



**PATIENT PRESENTING CLINICAL SIGNS**

Lilly Cultice Anorexia/ Vomiting

Abnormal PE/Chem/CBC/UA Results: Lipase 5400

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED** The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

Mixed

**SEX** 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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral small cortical cysts were present with pinpoint medullary mineral. The left kidney measured 4.2 cm in length. The right kidney measured 4.4 cm in length

FS

**AGE**

12yr

The area of the aortic trifurcation was free of pathology.

**WEIGHT Adrenal Glands**

14.9 The bilateral adrenal glands exhibited borderline prominent size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.6 cm width in the cranial pole and 0.76 cm width in the caudal pole. The right adrenal gland measured 0.71 cm width in the cranial pole and 0.55 cm width in the caudal pole.

**INTERPRETED BY**

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

**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.

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**Liver**

The liver presented enlarged in size. 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. Multiple non-disruptive hyperechoic nodules were present, an example measuring 1.6 cm in diameter. 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 and mild non-dependent echogenic mobile debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

**HOSPITAL NAME**

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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.

**DATE**

12/15/2022



**PATIENT**

Lilly Cultice

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**

Canine

**Pancreas**

The right pancreas exhibited variable prominent size with isoechoic to heterogeneous parenchyma compared to adjacent omentum. Subtle evidence of peripancreatic mild hyperechoic mesentery was present. No signs of active inflammation or neoplasia.

**BREED**

Mixed

**Free Abdomen**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**SEX**

FS

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

12yr

- Vacuolar hepatopathy pattern with benign nodules-suggestive of lipogranulomas or nodular hyperplasia
- Mild gallbladder debris (non-mucocele)
- Heterogeneous variably prominent pancreas-suspect potential chronic to chronic active pancreatitis
- Overtly normal GI tract-potential gastroenteritis or other low-grade inflammatory gastroenteropathy, no evidence of neoplastic criteria
- Bilateral moderate chronic renal changes

**WEIGHT**

14.9

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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DVM, DABVP  
(Canine and Feline)

Mild chronic to chronic active pancreatitis would be suspected if evidence of cranial abdominal discomfort on palpation. Correlation with a spec cPL +/- cobalamin/folate level assessment if evidence of weight loss is recommended. Empirical therapy for gastroenteritis and low-grade pancreatitis is warranted. No evidence of intra-abdominal neoplastic criteria was present. Hepatosupportive medications such as Denamarin and Ursodiol may be considered if evidence of elevated hepatic enzymes or cholestasis.

**IMAGING PERFORMED BY**

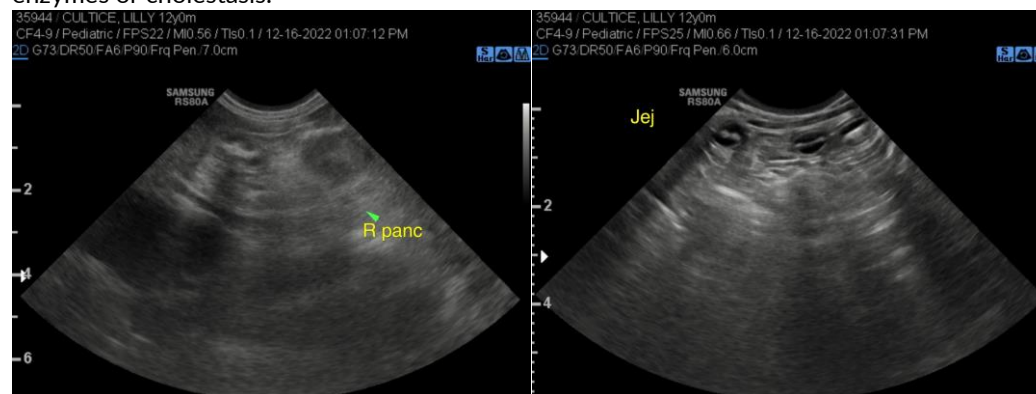
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**WEIGHT**

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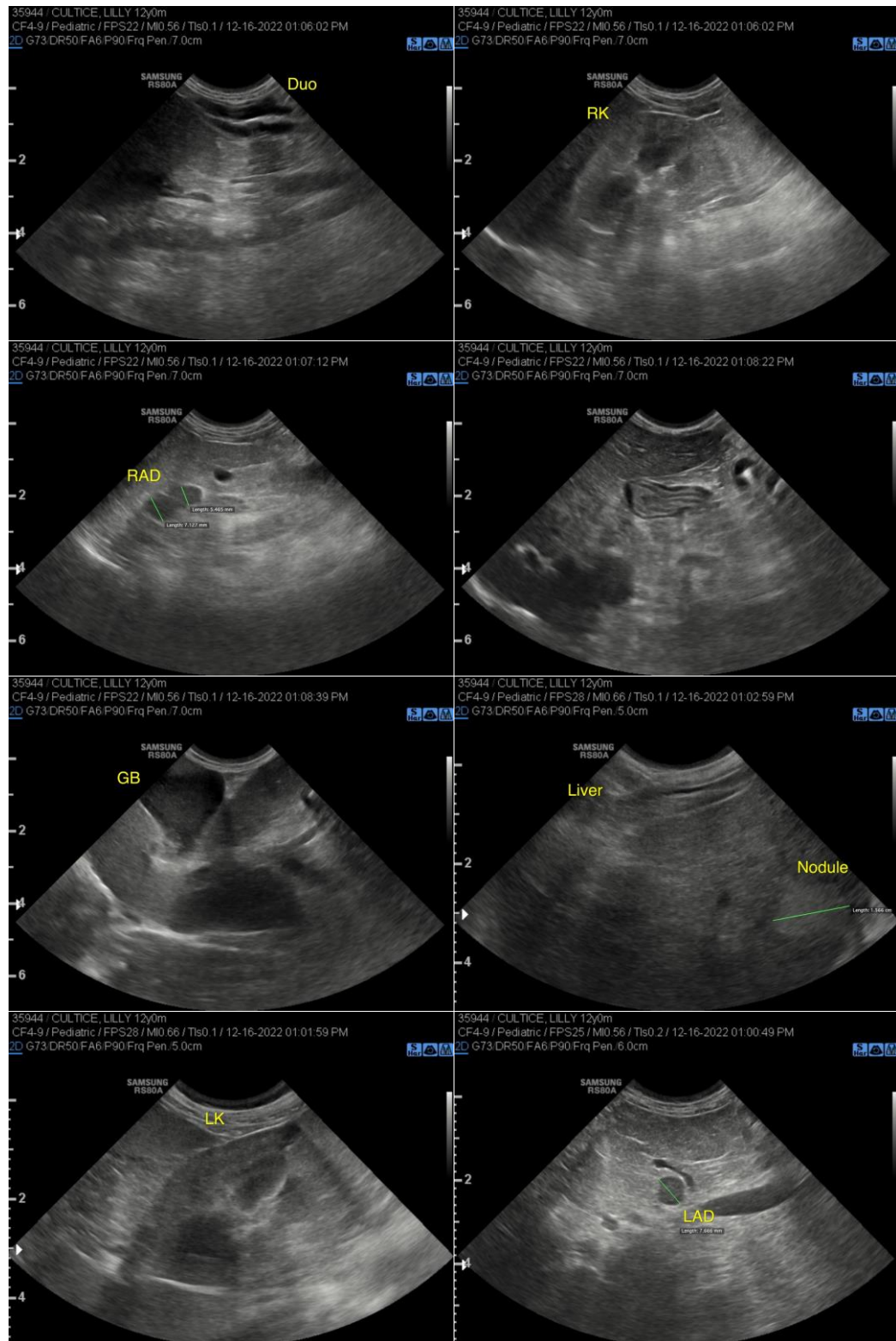
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



**PATIENT**

visible in the image/video clips provided.

Lilly Cultice

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.

**SPECIES**

Canine

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)  
[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)

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Mixed

**SEX**

FS

**AGE**

12yr

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