



PATIENT

Winston Konhke

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

7 Years 7 Months

WEIGHT

20.5 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Lucas Budden

HOSPITAL NAME

Frontier Veterinary
Hospital

REFERRING VET

Dr. Lucas Budden

INVOICE

12869

DATE

12/29/25

PRESENTING CLINICAL SIGNS

Clinical signs: ALT and ALP elevations History: History of urolithiasis. Plan to do cystotomy. Ultrasound to assess liver for cause of ALP/ALT elevations prior to anesthesia. Current medications: Trazodone to facilitate ultrasound RC Urinary SO Rimadyl as needed

Abnormal PE/Chem/CBC/UA Results: Physical exam: BCS 7/9, left ear has mild brown debris and erythema indicating ear infection, moderate dental tartar, abdomen comfortable on palpation, owner has observed frequent urination at home due to uroliths Lab work: cbc/chem/pt/ptt 12/21/25 Albumin high 4.9 ALT high to 66 ALP high 1692 Creatinine low 0.2 platelet Count high 466 Remainder of CBC/Chem/PT/PTT normal UA 12/12/25 USG 1.018 pH 5 Trace protein RBC 2-3 Bile acids pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder presented normal in size and tone with generalized mild thickened urinary bladder wall with adequate urine distention. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. Anechoic urine was present in the lumen with mild nondependent particulate sediment along with multifocal areas of dependent lumen mineral to small calculi. The mineral to small calculi extended into the area of the cystourethral junction and visualized within the proximal urethra lumen without evidence of obstruction to urethral outflow. The ureteral papillae were normal. The ureters were not visible which is normal. The urethra was normal in structure and tone to a depth of 3.0 cm.

The area of the residual prostate appeared normal and free of pathology.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex. Pinpoint to focal areas of medullary mineral were visualized bilaterally with no evidence of pyelectasia. The left kidney measured 5.3 cm in length. The right kidney measured 4.9 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 0.54 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 0.53 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



PATIENT

Winston Konhke

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

7 Years 7 Months

WEIGHT

20.5 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Lucas Budden

HOSPITAL NAME

Frontier Veterinary
Hospital

REFERRING VET

Dr. Lucas Budden

INVOICE

12869

DATE

12/29/25

The liver presented mild to possibly moderately 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. 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 moderate congealed nondependent yet nonorganized biliary sludge. Suspect peripheral lumen mucus with no evidence of pericholecystic inflammation. The cystic duct and common bile ducts were normal without evidence of dilation.

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 pancreas was normal in size and contour with isoechoic heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Mild cystitis pattern with multifocal small mineral to lumen calculi extending into the prostatic urethra.
- Bilateral pinpoint to focal renal medullary mineral.
- Hepatopathy.
- Immature to early mature gallbladder mucocele.
- Normal bilateral adrenal glands.
- Mild pancreatic remodeling.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although nonspecific, the liver is most suggestive of benign hepatopathy criteria. Considerations may include vacuolar changes, inflammatory disease, cholestasis, hyperplasia or other. No evidence of intrahepatic or extrahepatic macroscopic shunt. Correlation with pending bile acid profile and consideration for screening hepatic FNA cytology (if normal clotting status) is recommended. No obvious evidence of adrenal pathology as a contributing factor in conjunction with lack of reported clinical signs.



PATIENT

Winston Konhke

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

7 Years 7 Months

WEIGHT

20.5 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Lucas Budden

HOSPITAL NAME

Frontier Veterinary Hospital

REFERRING VET

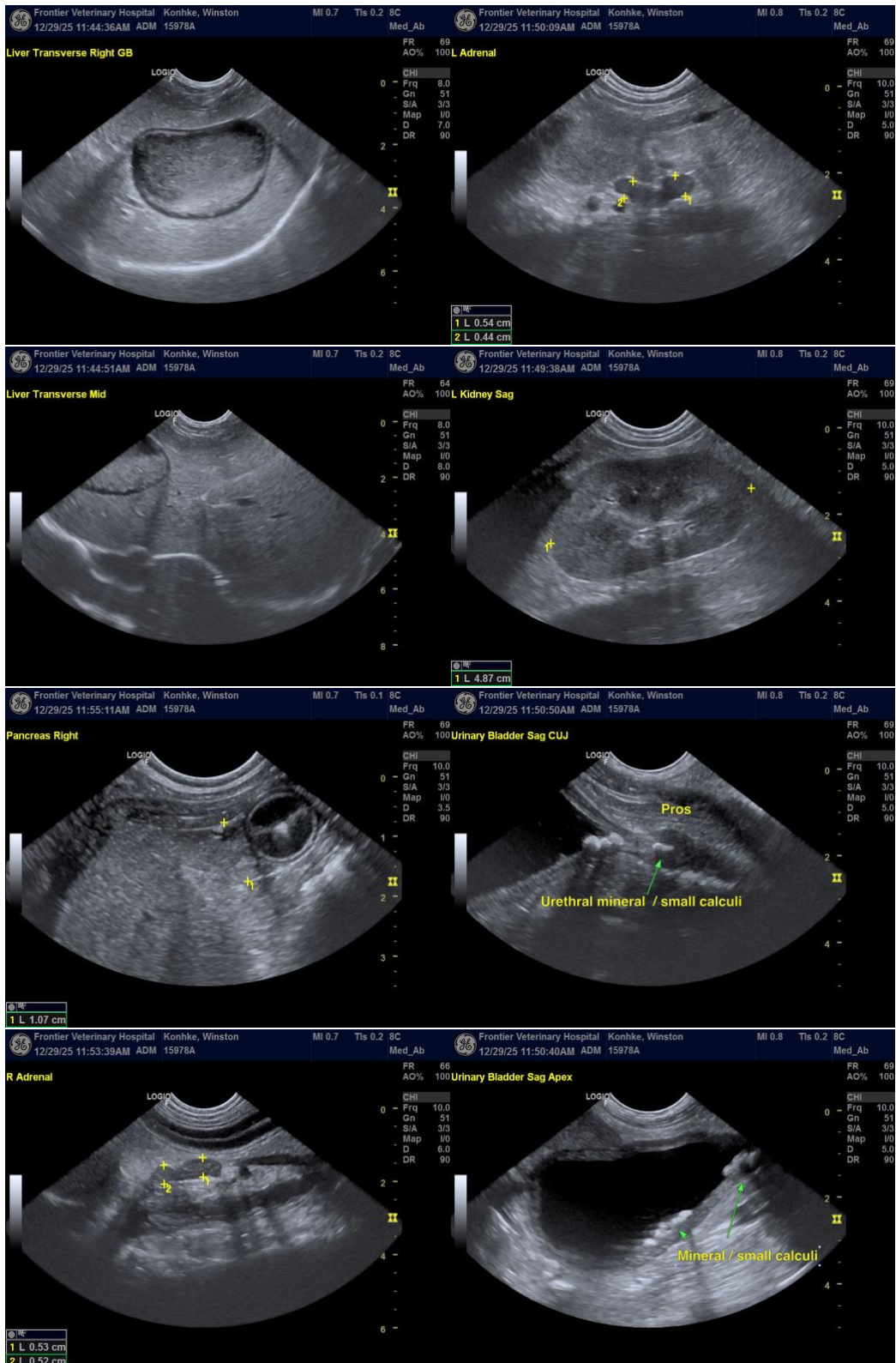
Dr. Lucas Budden

INVOICE

12869

DATE

12/29/25





PATIENT

Winston Konhke

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

7 Years 7 Months

WEIGHT

20.5 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Dr. Lucas Budden

HOSPITAL NAME

Frontier Veterinary
Hospital

REFERRING VET

Dr. Lucas Budden

INVOICE

12869

DATE

12/29/25

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