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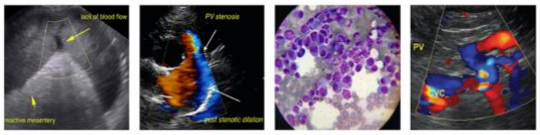

SonoPath
Clinical Sonography & Telecytology
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PATIENT

Spencer Anstett

SPECIES

Canine

BREED

Rottweiler

SEX

Neutered Male

AGE

6 years

WEIGHT

141 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT ARDMS/RVT

HOSPITAL NAME

White Haven VH

REFERRING VET

Dr. Dengler

INVOICE

12842

DATE

12.6.2021

PRESENTING CLINICAL SIGNS

History: Elevated liver enzymes, pre surgical

Labs: ALP 969, Normal ALT 25, BUN 7, Creatinine 0.9, CBC: Eosinophil 3303, Urine specific gravity 1.007 (1.017 morning sample) Sodium to potassium ratio 34

Medication: Denamarin

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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. Aortic trifurcation was normal.

No evidence of pathology associated with the residual prostate. The prostatic urethra was mildly dilated while the postprostatic urethra was sonographically unremarkable to a depth of 5.0 cm. This mild dilation of the prostatic urethra is non-specific and not overtly indicative of underlying urethral pathology. At times, mild prostatic urethral dilation. may be seen in dogs that were neutered later in life, if clinically applicable.

Normal size and margination were 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 with no evidence of pelvic dilation. The left kidney measured 8.4 cm in length. The right kidney measured 7.7 cm in length.

Adrenal Glands

The left adrenal gland was indistinctly visualized owing to patient size and conformation yet without overt pathology, subjectively measuring 3.4 cm length x 0.54 cm caudal pole width.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 3.1 cm in length x 0.93 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

The liver presented mildly 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 primarily anechoic luminal content. The cystic and common bile ducts were normal.

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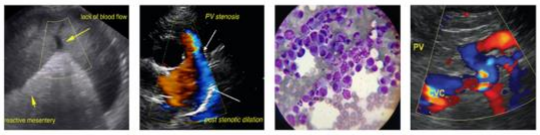

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Gastrointestinal

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

Primary Findings

- Benign hepatopathy, sonographically unremarkable gallbladder

Secondary Findings

- Minor non-specific dilation of the prostatic urethra

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall liver was non-specific yet consistent with benign hepatopathy. Considerations may include idiopathic vacuolar hepatopathy. Given the solely elevated ALP, without evidence of concurrent cholestasis, potential for inflammatory hepatopathy is considered a less likely differential diagnosis without evidence of hepatic neoplastic criteria. Hepatosupportive medications may prove beneficial. Further assessment may include, assuming normal clotting status, hepatic FNA for screening cytology. No anesthetic contraindications given the normal hepatic functionality indicated by normal BUN, glucose, albumin and cholesterol levels.

No overt indication of adrenal dysfunction given the normal subjective appearance of the bilateral adrenal glands and lack of reported clinical signs.

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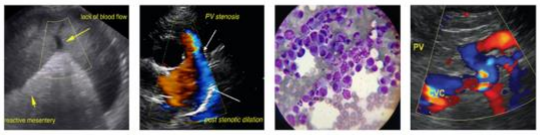

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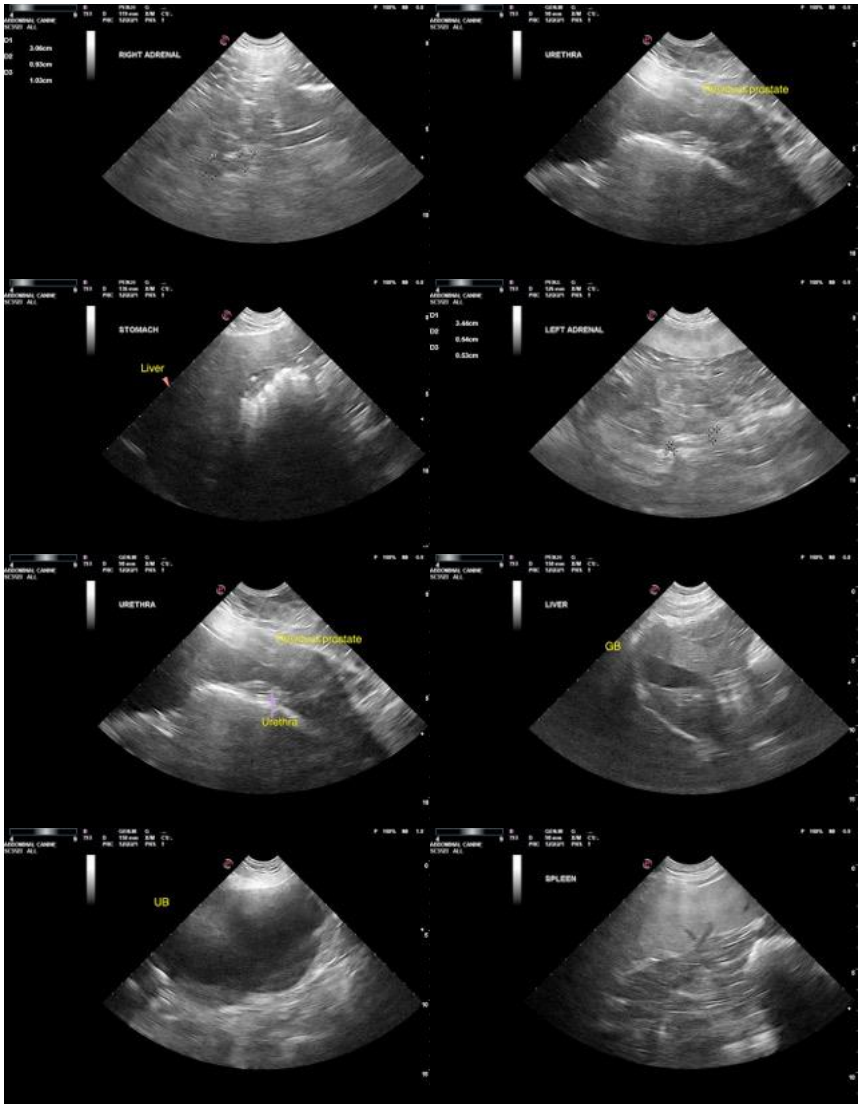

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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