**PATIENT**

Louie Bruns

SPECIES

Canine

BREED

Boxer

SEX

MN

AGE

8yr

WEIGHT

114lb

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING PERFORMED BY**

Rachel Runnells

HOSPITAL NAME

SVS Imaging KC

REFERRING VET

Dr. Cavanaugh

INVOICE

13006ag

DATE

02/17/2023

PRESENTING CLINICAL SIGNS

Elevated liver values.

Abnormal PE/Chem/CBC/UA Results: ALKP 371 on 10/27/22. Was 680 on 2/13/2023. Had grade 2 mast cell tumor removed left femoral on 10/27/2022.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

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. A solitary left kidney cortical cyst was present measuring 1.3 cm in diameter. The left kidney measured 8.2 cm in length. The right kidney measured 8.1 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.77 cm width at the caudal pole and 2.7 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.60 cm width at the caudal pole and 2.6 cm length.

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/Gallbladder

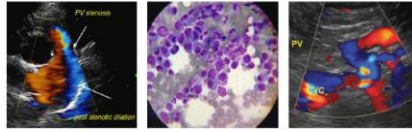
The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. 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.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably shadowing ingesta 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.



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Pancreas

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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.

SPECIES

Free Abdomen

Canine

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

BREED

ULTRASONOGRAPHIC FINDINGS

Boxer

- Benign hepatopathy-suggestive of benign vacuolar hepatopathy pattern
- Normal gallbladder
- Normal spleen

SEX

Secondary

MN

- Gastric ingesta-suspect recent meal ingestion

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

8yr

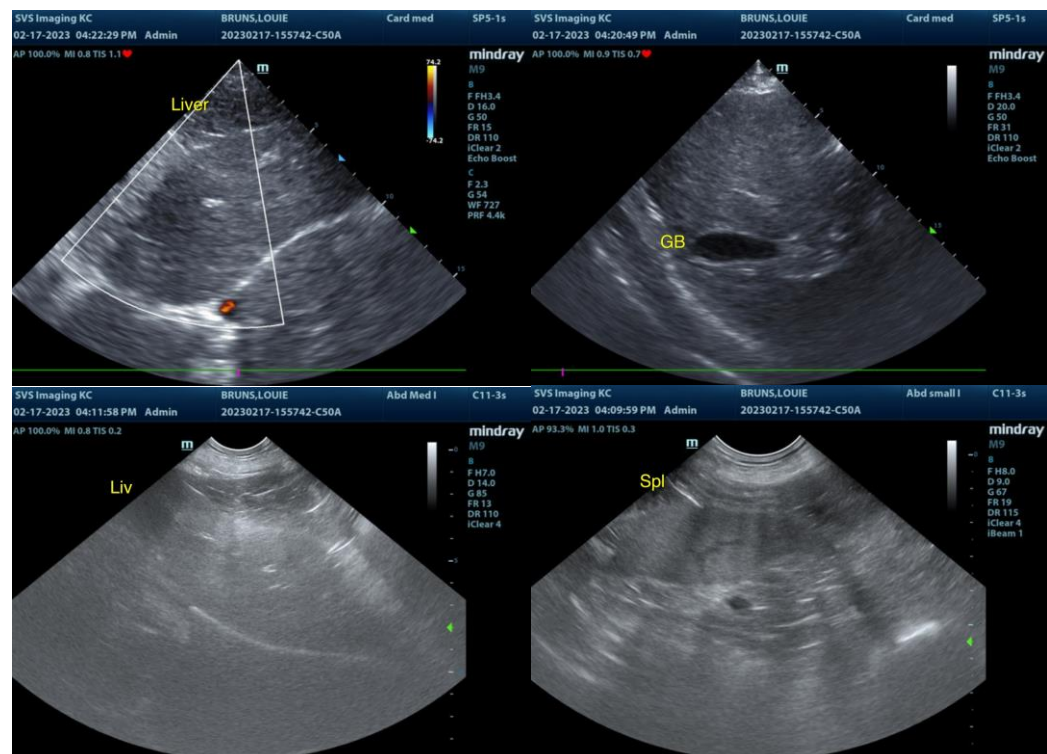
The overall liver was non-specific yet consistent with benign criteria and most suggestive of vacuolar hepatic changes given the ALP elevation. Potential for mild non-obstructive hepatic cholestasis or less likely, inflammatory criteria possible. Assuming normal clotting status a hepatic FNA for screening cytology could be considered for further assessment. No evidence of intra-abdominal primary or metastatic neoplastic disease. Hepatosupportive medications such as Denamarin +/- Ursodiol as well as a novel protein or hydrolyzed diet trial if evidence of hepatic antigenic stimulation on screening cytology may prove beneficial.

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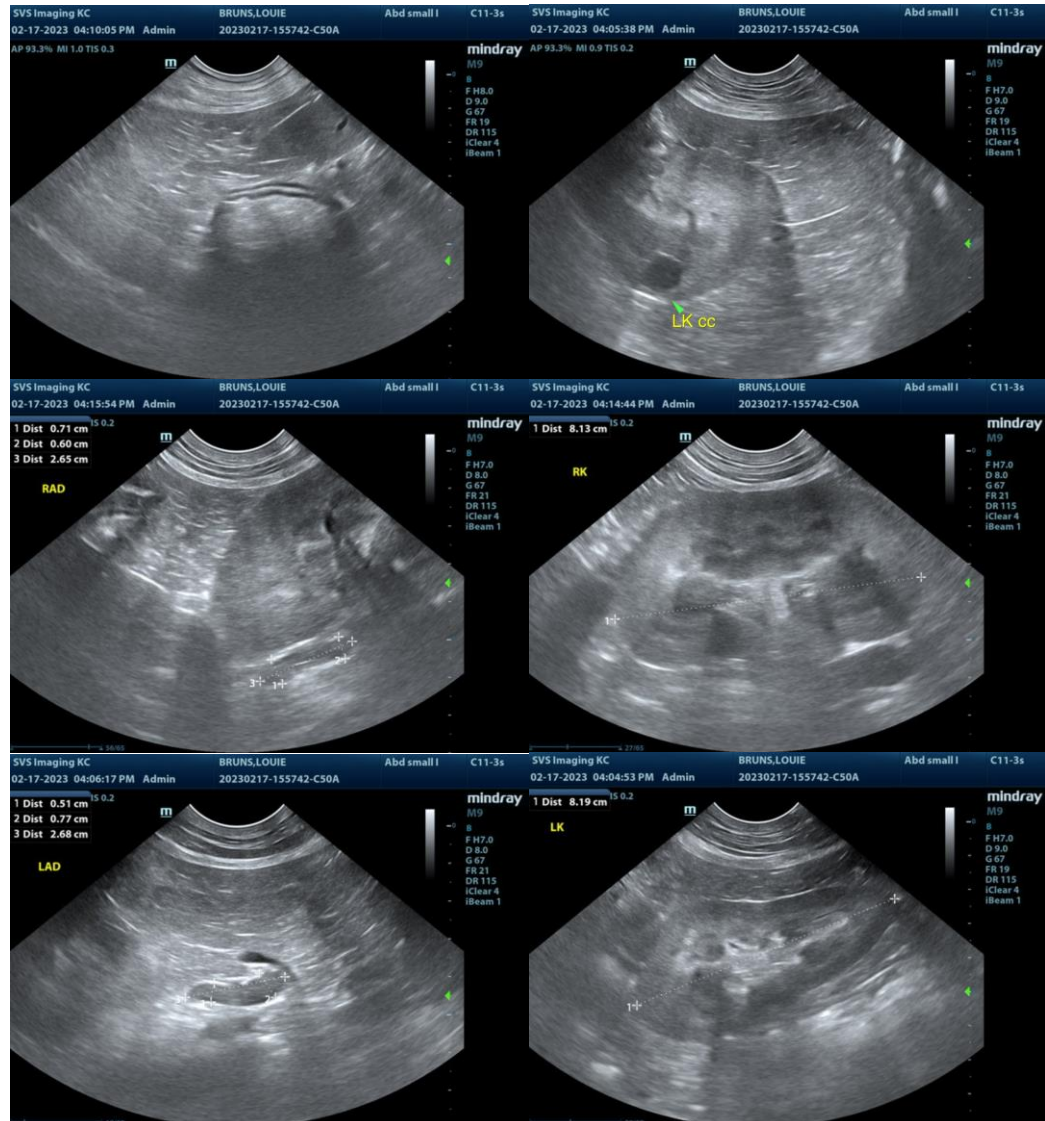
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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