



**PATIENT**

The submitted study contains 31 images primarily of the liver and spleen.

Bella FEnton

**PRESENTING CLINICAL SIGNS**

**SPECIES**

Canine

- Patient had a previous ultrasound 02/20/25 (invoice 61195) that showed a hepatic nodule. Patient has done well in the last year and two weeks ago ALT and ALKP were almost completely normal. Patient was still on Denamarin but Ursodiol had been stopped by the owner several months ago. Patient became ill over the weekend.
- Abnormal PE/Chem/CBC/UA Results: FNA 03/2025 results were mild hepatocellular atypia most consistent with hyperplasia, mild to moderate mixed inflammation with evidence of chronic hemorrhage, and mild to moderate hepatocellular vacuolar degeneration consistent with lipid accumulation. Today, CBC is pending. Chems show significant increases in ALT and ALKP. Snap cPL is negative. Patient has developed uroliths suspected to be struvite and bacteruria is present.

**BREED**

Miniature Schnauzer

**SEX**

FS

**LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Adrenal Glands**

**AGE**

13yr

The visualized left adrenal gland was overtly normal in size and shape with subtle parenchyma heterogeneity. The left adrenal gland measured 0.59 cm width

**Spleen**

**WEIGHT**

16lb

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.

**INTERPRETED BY**

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

**Liver/Gallbladder**

**IMAGING PERFORMED BY**

Trae Cutchin

The liver presented generalized enlargement with the ventrocaudal liver extending past the level of the gastric axis. Primarily homogenous subjective mildly hypoechoic hepatic parenchyma exhibiting mild to variable coarse echotexture. Mild to increased prominence of portal vascular borders. The capsule of the liver was symmetrically rounded to mildly swollen in margination. Within the ventrocaudal aspect of the mid to right liver, a mild capsule deforming non-homogenous intraparenchymal mass was present measuring ~ 3-4 cm in diameter. The gallbladder was non-distended in size with mild, gravity dependent to non-dependent non-organized hyperechoic debris.

**HOSPITAL NAME**

Friendship Springs  
Veterinary Care

**Free Abdomen**

Mild perihepatic hyperechoic omentum and minor effusion was present.

**REFERRING VET**

Trae Cutchin

**ULTRASONOGRAPHIC FINDINGS**

**Primary**

**INVOICE**

23771

- Hepatopathy with mild expansive intraparenchymal mass
- Non-organized gallbladder debris (non-mucocele)
- Age related splenic changes
- Mild perihepatic hyperechoic omentum and minor effusion

**DATE**

02/02/2026



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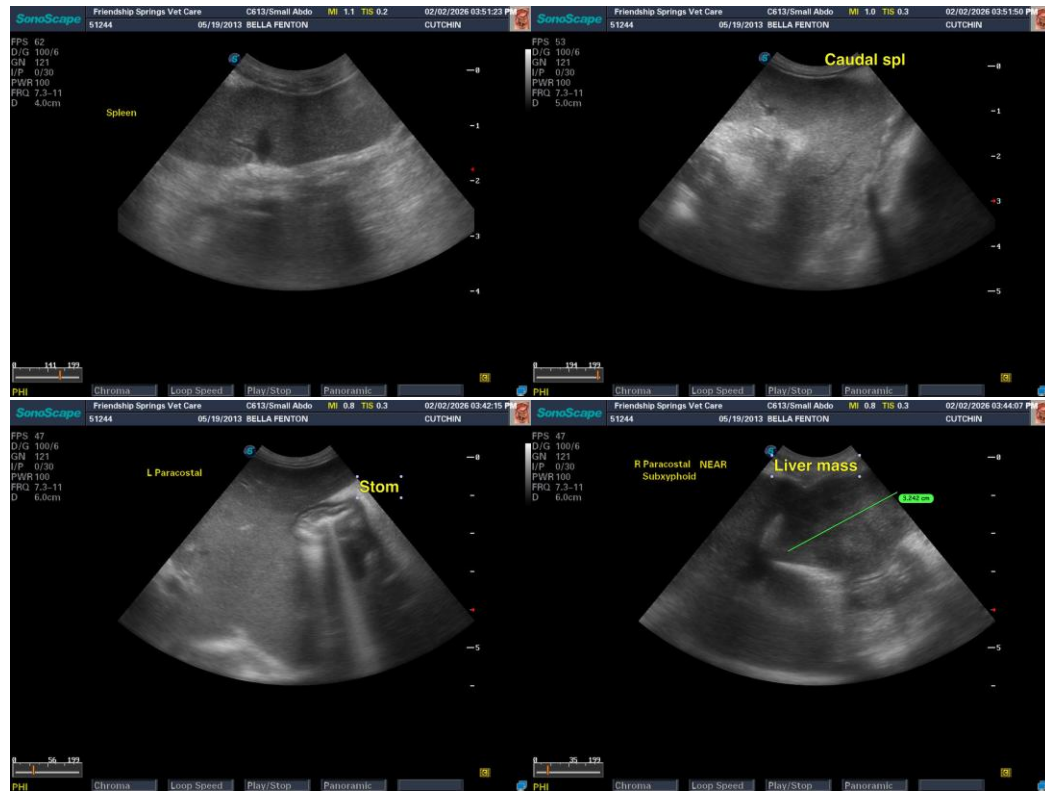
**DATE**

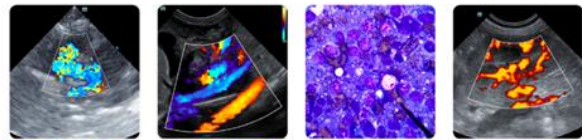
02/02/2026

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The current hepatic mass is most concerning for neoplasia with granuloma, hyperplasia or other benign etiology, potentially combined with diffuse vacuolar or cholestatic hepatopathy, inflammatory/ immune-mediated/ infectious disease, hyperplasia, hepatotoxicosis, all potentials.

Further assessment may include if normal clotting status, hepatic mass and parenchyma FNA cytology. No obvious evidence of splenic neoplastic criteria.





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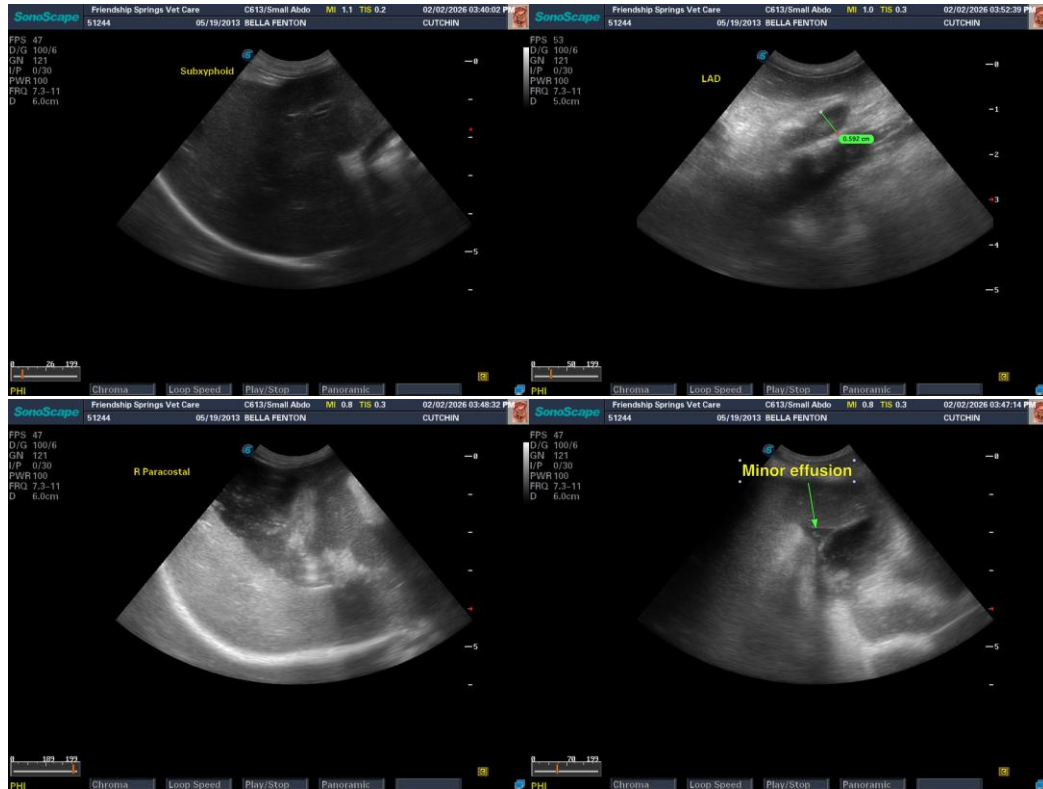
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## DATE

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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.

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