



PATIENT

Memo Neira

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

Male Neutered

AGE

10y 7m

WEIGHT

9.7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Lara Cabugawan

HOSPITAL NAME

Union Vet AH

REFERRING VET

Lara Cabugawan

INVOICE

13234

DATE

2/25/26

PRESENTING CLINICAL SIGNS

History:

- Hx HM grade 2/6, benign hepatopathy, GB sludge, DJD, hepatomegaly, elevated ALP. Drop off for follow up abdominal ultrasound, owner stated doing well, no concerns.
- Medications: Pet is currently on Denamarin and Ursodiol.

Abnormal PE/Chem/CBC/UA Results: PE: LS OU, minimal dental calculus, HM grade 2/6, mild distended abdomen, stiff gait. Blood test pending.

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 was 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 mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.7 cm in length. The right kidney measured 3.9 cm in length.

Adrenal Glands

The bilateral adrenal glands were indistinctly visualized. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland subjectively measured 0.53 cm width at the caudal pole. The right adrenal gland subjectively measured 0.47 cm width at the caudal pole.

Spleen

The spleen was normal in size and contour. The spleen exhibited primarily finely textured and primarily homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Solitary, subtle, well-defined, symmetrical, hyperechoic perihilar nodule was present measuring 0.63 cm in diameter. 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 or neoplastic changes were not noted. The hyperechoic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

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. 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 mild, non-organized, echogenic,



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nonmineralized biliary sludge. 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 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

- Static benign hepatopathy
- Static mild, non-organized gallbladder debris (non-mucocele)
- Static chronic renal changes
- Subjective age-related adrenals
- Benign splenic nodule – most consistent with benign myelolipoma

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver continues to indicate benign hepatopathy criteria and is suggestive of vacuolar or non-obstructive cholestatic hepatopathy in conjunction with previously noted ALP elevation. Correlation with pending lab testing is recommended. If evidence of hepatic inflammation and assuming normal clotting status, hepatic FNA cytology could be considered for further clarification. Continued hepatosupportive medications warranted. Adrenal disease considered less likely given no current clinical signs, yet adrenal screening may be considered if clinical signs are not reported or arise.



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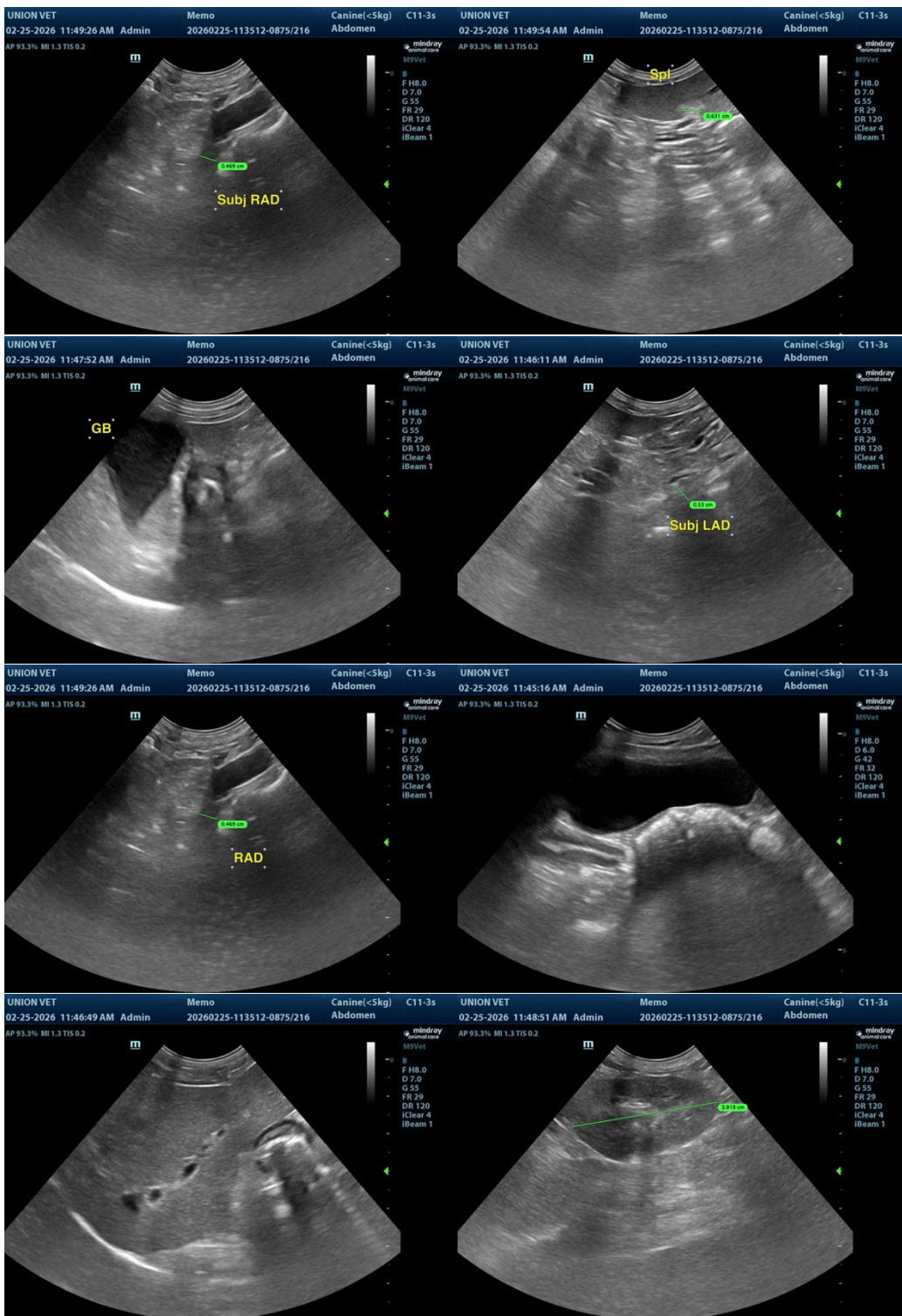
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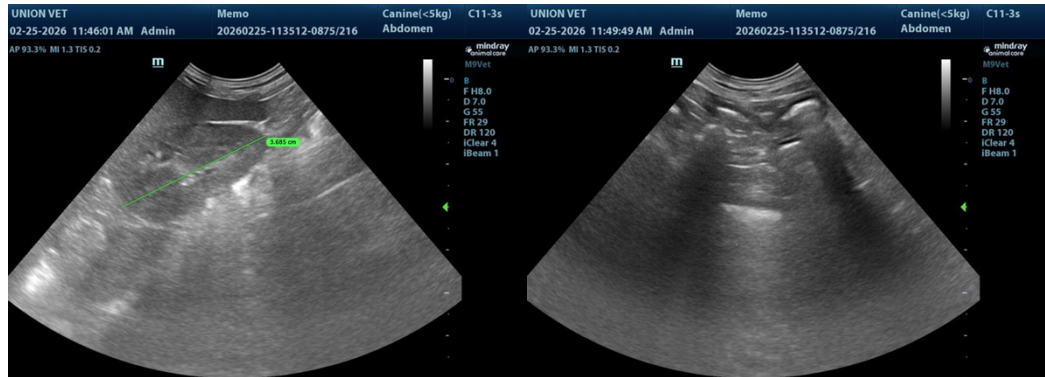
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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