



PATIENT

Maya Jackson

SPECIES

Canine

BREED

Chihuahua

SEX

F

AGE

5yr

WEIGHT

7.2lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Laux

HOSPITAL NAME

Rondout Valley
Veterinary Associates

REFERRING VET

Kathleen Laux

INVOICE

23797

DATE

02/04/2026

PRESENTING CLINICAL SIGNS

- Patient has a history of elevated ALT and presumed microvascular dysplasia. o have been afraid of anesthesia so have not been spayed and no liver biopsy taken. Presented for a follow up US after having one at Guardian Veterinary Specialists. Concerns for hepatic nodules, enlarged right adrenal gland, sludge in gallbladder, and striations in intestines. Will attach their report.

Abnormal PE/Chem/CBC/UA Results: ALT 203

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was 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. The left kidney measured 3.2 cm in length. The right kidney measured 3.2 cm in length.

The area of the aortic trifurcation was free of pathology.

No evidence of pathology in the area of the uterus or bilateral ovaries.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 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 0.31 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/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. No evidence of previously noted hepatic nodules. The gallbladder was non-distended in size with thin walls and mild primarily gravity dependent to mildly non-dependent non-organized debris. The cystic and common bile ducts were normal.



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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 mechanical/metabolic ileus, obstruction or foreign material. No evidence of previously noted intestinal mucosal speckling.

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 omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Sonographically unremarkable subjective normal volume liver
- Sonographically normal gastrointestinal tract
- Normal bilateral adrenal glands.
- Mild non-organized gallbladder debris (non-mucocele)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No current evidence of previously noted hepatic nodules, right adrenomegaly or intestinal striations. No overt evidence of intrahepatic or extrahepatic macroscopic shunt. Primary hepatic parenchymal disease, i.e., nonspecific inflammatory disease given ALT elevation, hepatotoxicosis, microvascular dysplasia / portal vein hypoplasia, all potentials.

Further assessment may include assuming normal clotting status, hepatic FNA cytology to assess for inflammatory cell type and a bile acid profile. Hepatic core surgical biopsy is likely required for definitive diagnosis. Anesthetic risk is considered mild assuming evidence of normal hepatic function i.e., normal ALB, BUN, CHOL and GLU. Hepatosupportive medications, including Denamarin or similar and ursodiol may prove beneficial.



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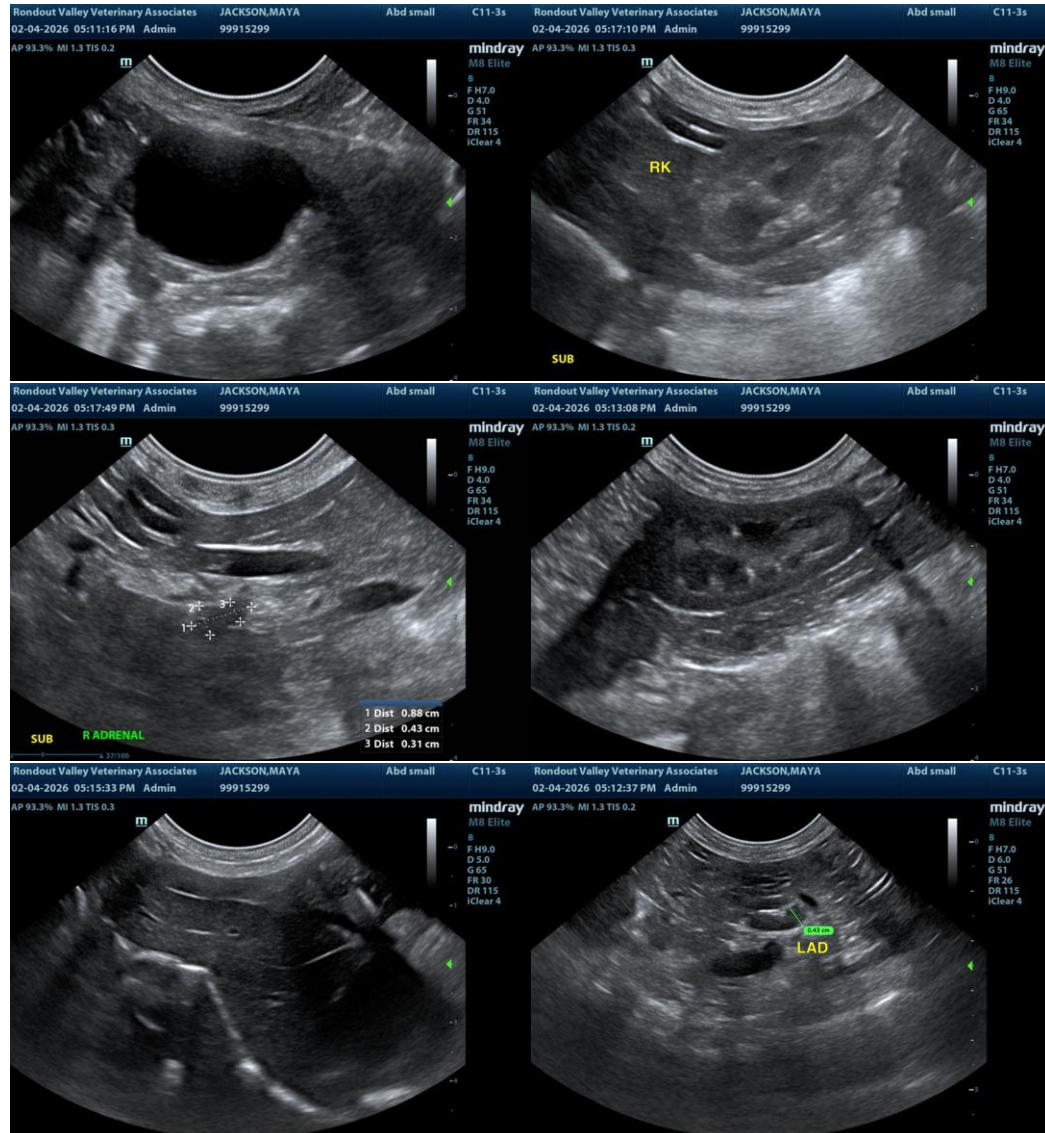
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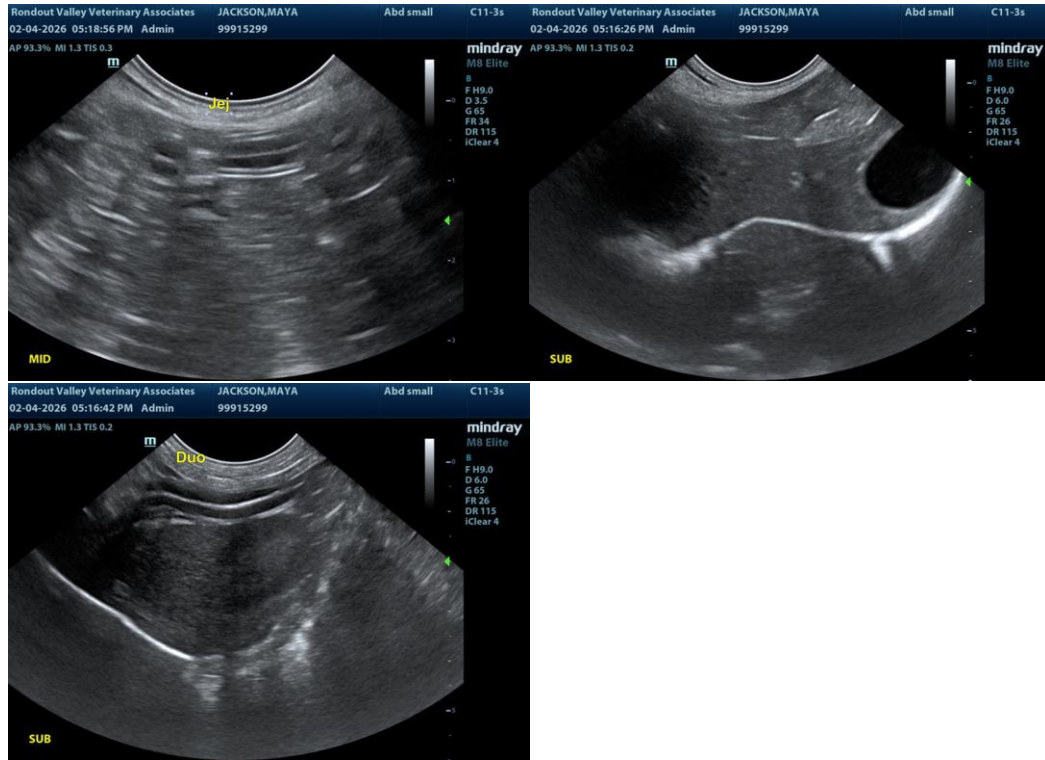
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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