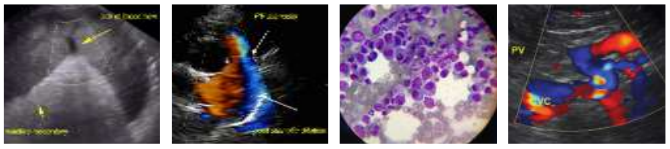
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

CoCo Bene

SPECIES

Canine

BREED

Chihuahua

SEX

FS

AGE

6 years

WEIGHT

9.6 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Hannah Fearing

HOSPITAL NAME

Lanier AH

REFERRING VET

Dr. Hannah Fearing

INVOICE

13259

DATE

2/8/22

PRESENTING CLINICAL SIGNS

asymptomatic but hx of elevated liver enzymes and recent newly elevated creatinine
Abnormal PE/Chem/CBC/UA Results: 1/31/22: ALT 475, AST 104, ALKP 13, creatinine 2.6, BUN 19 12/2/21: ALT 431, AST 119, ALKP <10, creatinine 1.5, BUN 30 10/1/21: ALT 357, AST 83, ALKP <10, creatinine 1.1, BUN 34 8/5/21: ALT 249, ALKP 22, creatinine 1, BUN 27

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction 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 was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. Mild, primarily uniform increased cortex echogenicity primarily in the area of the corticomedullary border was present. Normal medullary volume was noted without evidence of pyelectasia. The left kidney measured 3.6 cm in length. The right kidney measured 4.0 cm in length.

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 and 0.44 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 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 exhibited subjective mild enlargement. 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. A solitary well-demarcated uniform to mildly hyperechoic nodule was noted in the medial parenchyma measuring 1.0 cm in diameter. 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 minor gallbladder debris. The cystic and common bile ducts were normal.

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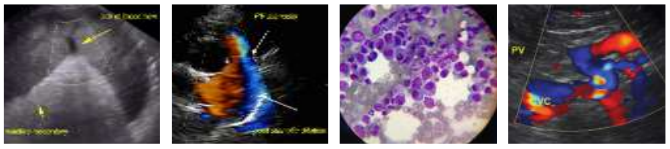

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Gastrointestinal

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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Hepatopathy with solitary likely benign nodule - nodule suggestive of probable focal nodular to regenerative hyperplasia or small lipogranuloma
- Overtly normal bilateral kidneys exhibiting mild nonspecific Increased cortex echogenicity

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although not definitive, mild nonspecific inflammatory hepatopathy, given the ALT/AST combination is suspected. Nonspecific, likely low-grade hepatitis (viral, bacterial, Leptospirosis, etc.,), is possible. Neoplastic criteria Is considered unlikely. Further assessment may include, assuming normal clotting status and using a 25-gauge needle, ultrasound guided FNA of the hepatic parenchyma +/- nodule if accessible for screening cytology primarily to assess for evidence of Inflammatory cells. Leptospirosis titers / PCR may be considered if clinically indicated, given concurrent mild yet progressive creatinine elevations.

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

Empirically, hepatosupportive medications Including Denamarin and Ursodiol may prove beneficial. Sonographic recheck of the liver is recommended if persistent / progressive hepatic enzyme elevations.

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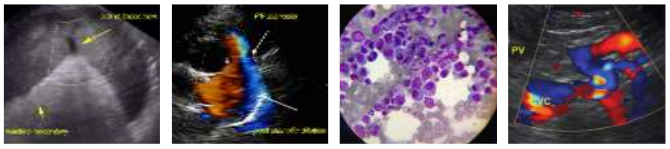

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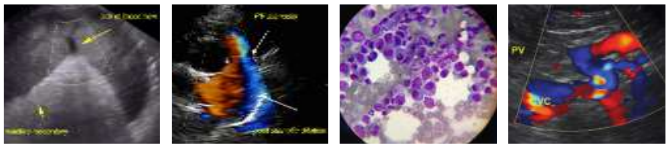

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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