



PATIENT PRESENTING CLINICAL SIGNS

Lizzy Stainton

History: Increased liver values on BW done Dec 7/22 (rec'd senior bloodwork during annual exam). O told to stop treats and only feed kibble - recheck BW in 4 weeks. -BW rechecked Jan 3/23 with elevated liver and calcium values. Rec'd feeding only dry food and no other treats (poss. getting bone marrow) - recheck BW in 60d. -O wanting to have BW rechecked sooner than recommended - done Jan 26/23 with elevated liver and calcium values. Options given to O: recheck in 1 months as previous rec'd, check ionized calcium and parathyroid hormone levels to r/o hypercalcemia of malignancy and hyperparathyroidism +/- abdominal US. O opt'd for recheck in 1 month. -Bloodwork and UA recheck Feb 27/23 with elevated liver values and urine protein levels. US rec'd with UA + UPCR recheck in 90d which O agreed but declined referral.

SPECIES

Canine

BREED

Springer Spaniel

SEX

Spayed Female

AGE

9 Years

WEIGHT

25.6 kg

INTERPRETED BY

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

Abnormal PE/Chem/CBC/UA Results: See attached lab results.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm 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. Aortic trifurcation was normal.

No evidence of pathology in the area of the uterine remnant.

Normal size and margination were 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 5.9 cm in length. The right kidney measured 5.9 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 0.54 cm width at the caudal pole and 0.71 cm width at the cranial pole.

The right adrenal gland was indistinctly visualized owing to isoechoic adrenal echogenicity compared to adjacent tissue without overt pathology, subjectively measuring 1.0 cm at the caudal pole in width.

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

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. 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.

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3/1/23

HOSPITAL NAME
Crystal Hill
Main Street AH

REFERRING VET

Dr. Morris



PATIENT

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The gallbladder was non-distended in size with anechoic content and minor echogenic nonorganized gallbladder debris without evidence of inflammatory criteria. The cystic and common bile ducts were normal.

SPECIES

Canine

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.

BREED

Springer Spaniel

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

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.

AGE

9 Years

Free Abdomen

No omental masses, lymphadenopathy or peritoneal effusion was present.

WEIGHT

25.6 kg

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy- subjectively benign
- Minor gallbladder debris (non-mucocele)
- Normal spleen
- Mild age-related kidneys

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING

PERFORMED BY

Crystal Hill

Overall, no sonographic evidence of significant visceral pathology, including no overt evidence of intraabdominal neoplastic criteria. Although nonspecific, the liver may suggest vacuolar hepatic changes and nonobstructive hepatic cholestasis given the ALP elevation. Assuming normal clotting status, screening hepatic FNA cytology is warranted. If persistent or recurrent, further assessment of the hypercalcemia may include, rectal exam and three view chest radiographs (if not done), as well as hypercalcemia panel. Hepatosupportive medications, including Denamarin +/- Ursodiol may prove beneficial. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

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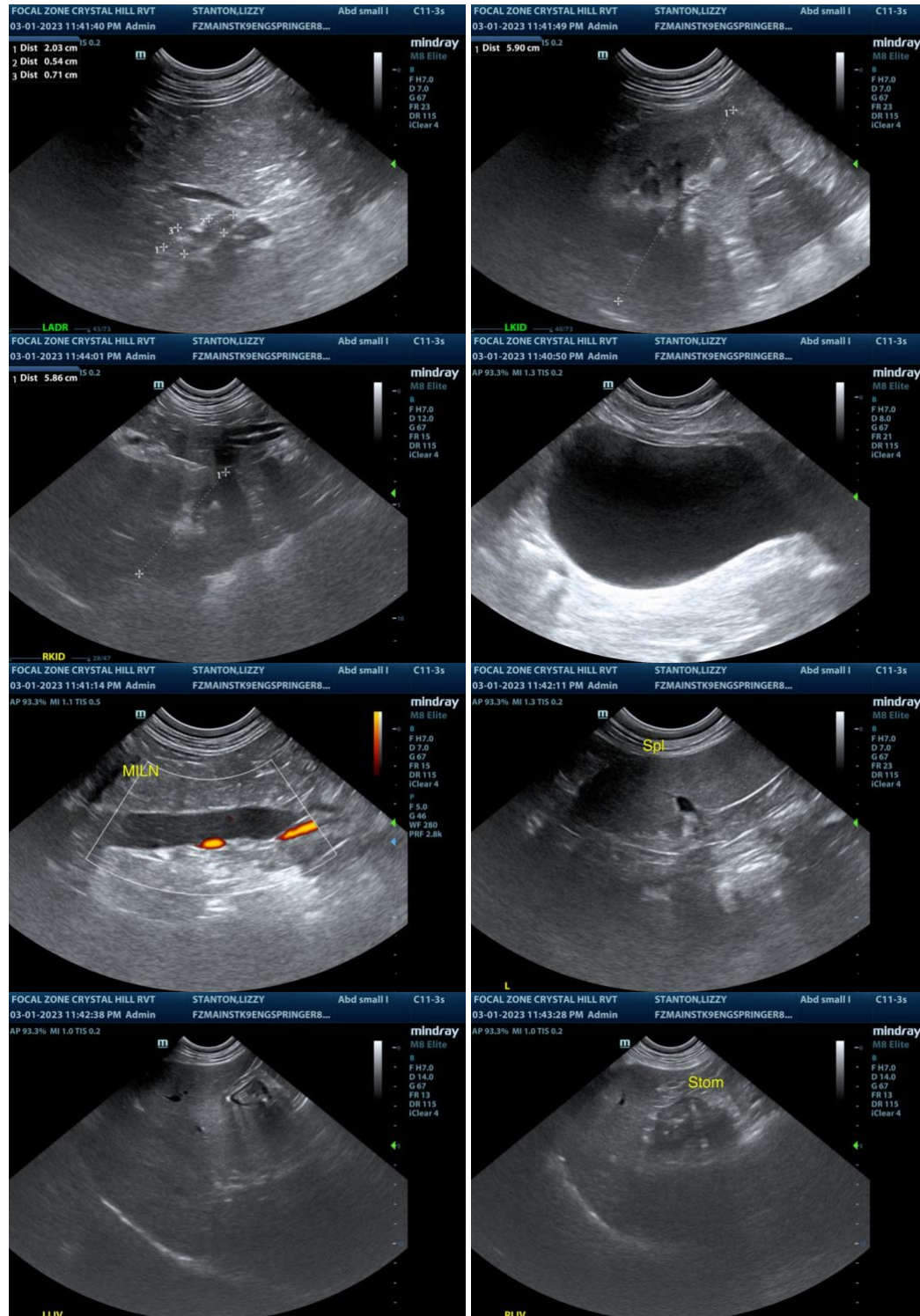
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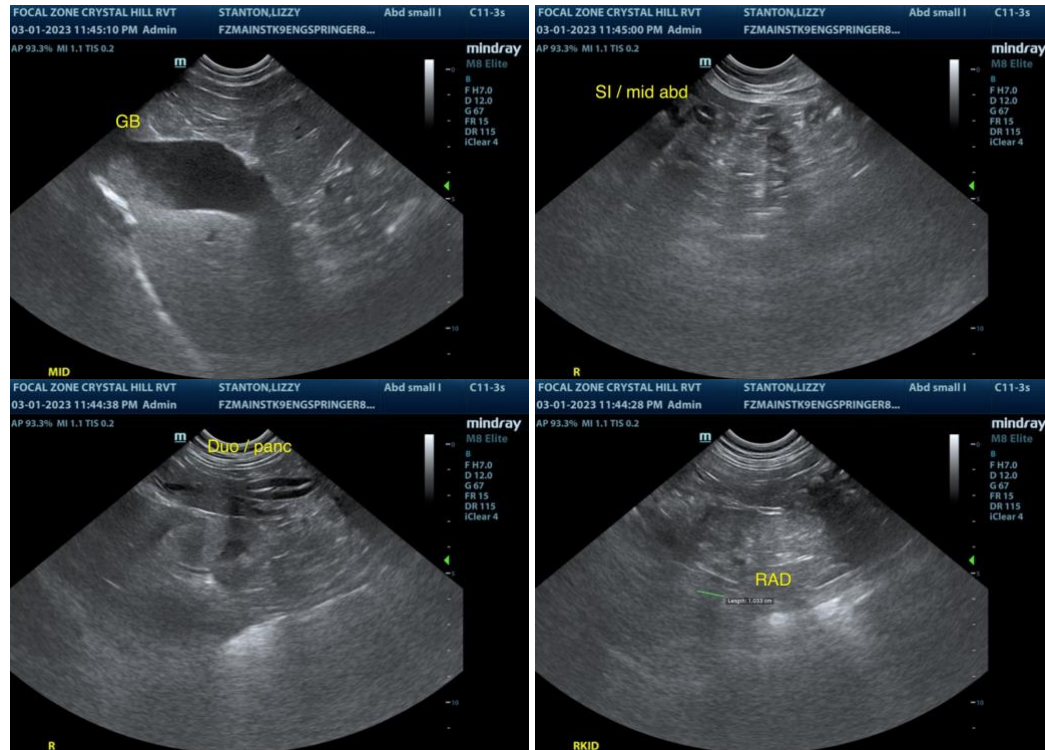
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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