



## PATIENT

Marvin Keller

## SPECIES

Canine

## BREED

Bbasset Hound

## SEX

Male Neutered

## AGE

12y

## WEIGHT

67 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Hougentogglar

## HOSPITAL NAME

K-Vet AC

## REFERRING VET

Dr. Konegger

## INVOICE

13275

## DATE

3/12/26

## PRESENTING CLINICAL SIGNS

### History:

- Liver, stomach - areas of interest
- Patient has been having diarrhea and a decreased appetite. Radiographs showed hepatomegaly and concerns for cranial abdominal mass.
- Unremarkable Physical exam
- BodyScore9 6 - Overweight
- Temp 102.1
- Pulse 148
- Resp panting
- Muc Memb Pink/Healthy
- CRT <2 sec
- Alert BAR
- Meds: Sucralfate, probiotic, and Metronidazole have helped.

## 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, mineral or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The area of the residual prostate appeared normal and free of pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was 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 7.3 cm in length. The right kidney measured 7.1 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 0.71 cm width at the caudal pole. The right adrenal gland was indistinctly visualized with no obvious pathology and subjectively measuring 0.63 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

The liver presented generalized hepatomegaly and normal vascular volume. Mild hypoechoic parenchyma compared to the spleen with a mild coarse echotexture. Mild increased prominence of the



## PATIENT

Marvin Keller

## SPECIES

Canine

## BREED

Bbasset Hound

## SEX

Male Neutered

## AGE

12y

## WEIGHT

67 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Hougentogler

## HOSPITAL NAME

K-Vet AC

## REFERRING VET

Dr. Konegger

## INVOICE

13275

## DATE

3/12/26

portal vascular borders. The capsule of the liver was normal in margination. No masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic bile present and no bile sediment. No evidence of inflammation or gallbladder edema. The common bile duct was not visualized.

### **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 area of the pancreas presented sonographically normal.

### **Free Abdomen**

Mild to variably enlarged non-homogeneous hepatic and cranial mesenteric perihepatic lymph nodes were present. The lymph nodes exhibited width: length ratio slightly greater than 0.5. Example of lymph node measured 2.3 cm x 1.6 cm. Mild perihepatic and perilymphatic hyperechoic omentum. Scant perihepatic effusion was present.

### **ULTRASONOGRAPHIC FINDINGS**

- Enlarged non-congested mild hypoechoic liver
- Normal gallbladder
- Hepatic and perihepatic mesenteric lymphadenopathy
- Scant perihepatic effusion and hyperechoic mesentery
- Sonographically unremarkable gastrointestinal tract/colon
- Normal area of pancreas

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Vacuolar or non-obstructive cholestatic hepatopathy, non-specific hepatitis (viral/bacterial leptospirosis toxin) non-cardiogenic hepatic congestion or hepatic neoplasia primary considerations. Correlation with the hepatic enzyme assessment, leptospirosis titer/PCR and assuming normal clotting status, FNA cytology recommended for further clarification. Aside from hepatomegaly, no intraabdominal mass visualized. A GI panel to include PLI/TLI/Cobalamin/Folate to assess for non-structural gastroenterocolic disease or mild pancreatitis as a contributing factor may be considered. Hepato-gastrointestinal support and empirical coverage for potential nonspecific acute hepatitis with clinical monitoring would be reasonable pending strongly suggested hepatic sampling.



**PATIENT**

Marvin Keller

**SPECIES**

Canine

**BREED**

Bbasset Hound

**SEX**

Male Neutered

**AGE**

12y

**WEIGHT**

67 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Hougentogler

**HOSPITAL NAME**

K-Vet AC

**REFERRING VET**

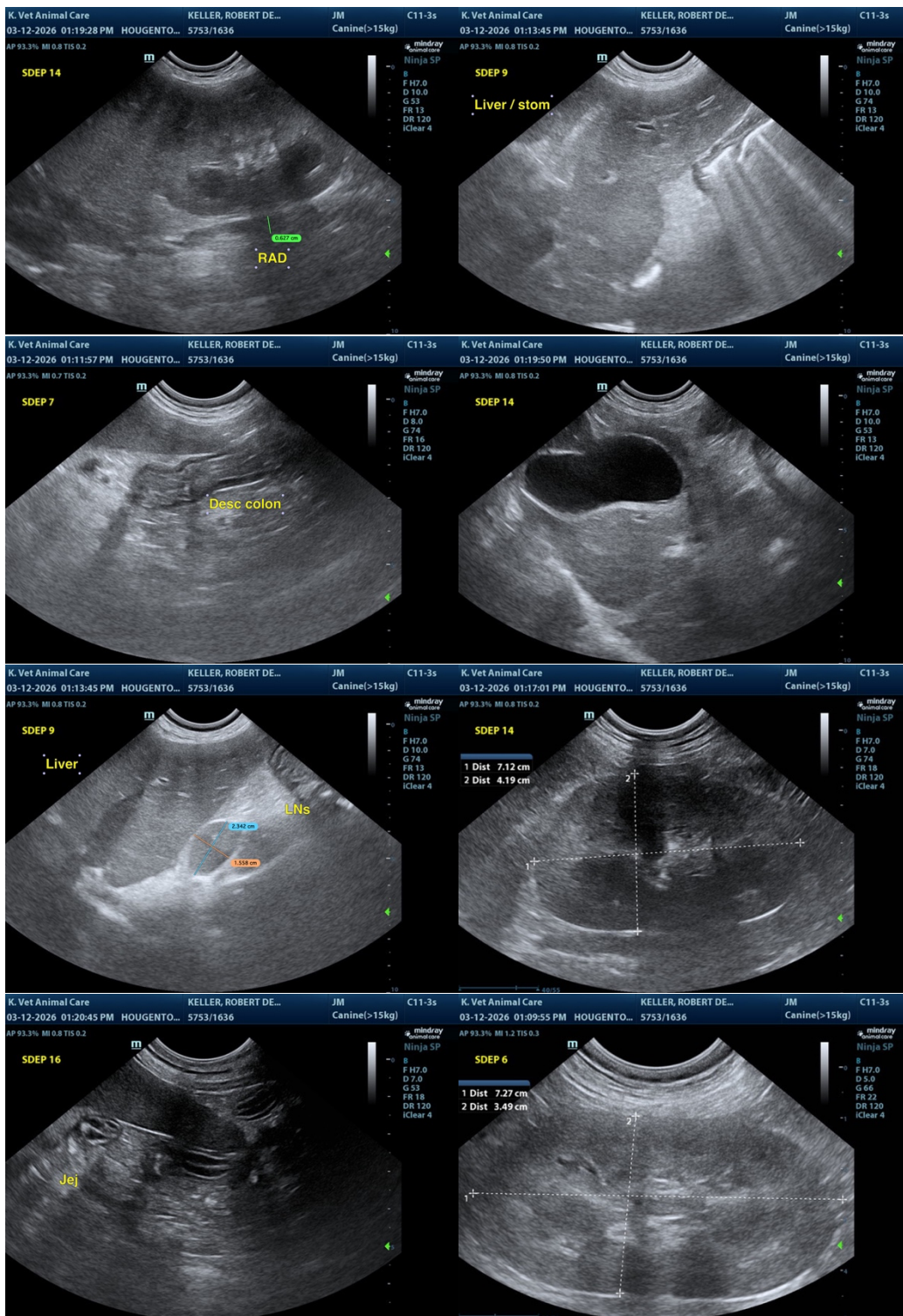
Dr. Konegger

**INVOICE**

13275

**DATE**

3/12/26





## PATIENT

Marvin Keller

## SPECIES

Canine

## BREED

Bbasset Hound

## SEX

Male Neutered

## AGE

12y

## WEIGHT

67 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Hougentogglar

## HOSPITAL NAME

K-Vet AC

## REFERRING VET

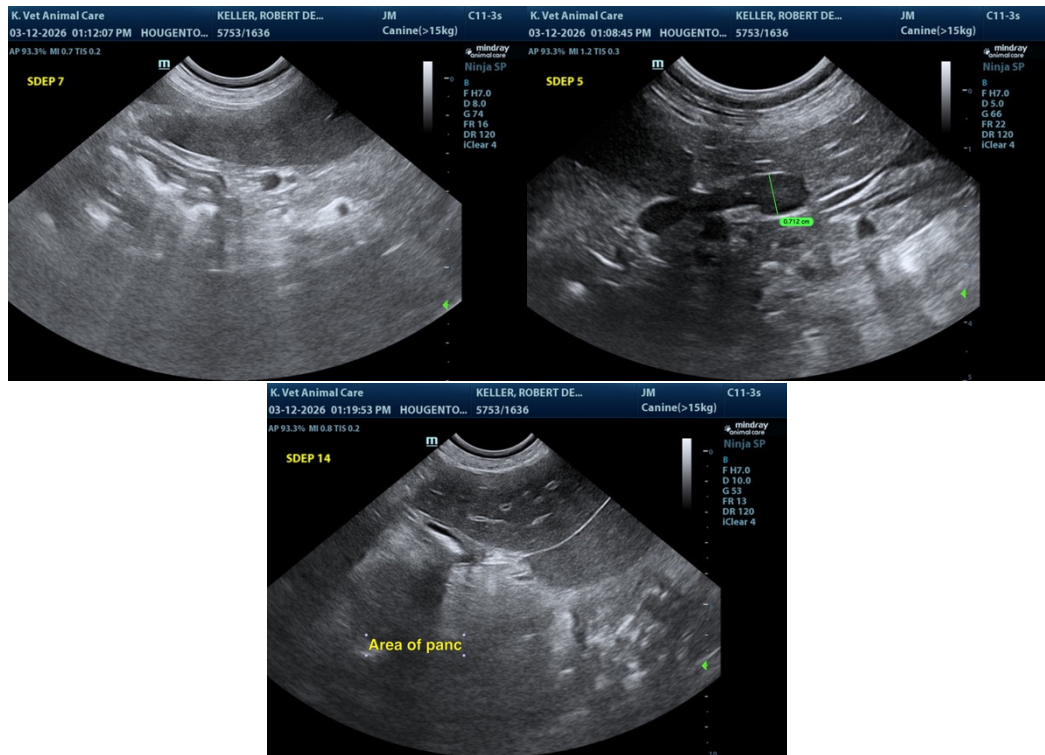
Dr. Konegger

## INVOICE

13275

## DATE

3/12/26



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](mailto:info@sonopath.com)