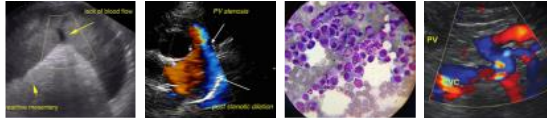




PATIENT	PRESENTING CLINICAL SIGNS
Maggie Mae Abruzzini	Elevated ALT, ALKP and GGT on pre op dental blood work Current Medications Hip supplement from healthy pet Eye supplement from healthy pet Liver Life- 20 drops bid 5 wks, 15 drops bid for 5 wks, 10 drops bid for 5 wks and then 5 drops bid for 5 wks Cytoflora- 20 drops sid in am for 3 months Biotics detox- Ground supplement Primary Question/Differential to Be Answered in This Exam Looking for abnormalities in the liver, before anesthesia
SPECIES	
Canine	
BREED	Abnormal PE/Chem/CBC/UA Results: ALT>1000u/l ALKP- 1872 u/l GGT- 15u/l
Mini Schnauzer	
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
FS	Urinary System
AGE	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
11yr	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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.5 cm in length. The right kidney measured 4.8 cm in length.
WEIGHT	
16.1lb	
INTERPRETED BY	The area of the aortic trifurcation was free of pathology.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Adrenal Glands
IMAGING PERFORMED BY	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.53 cm width at the caudal pole and 1.9 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.40 cm width at the caudal pole and 2.2 cm length.
Jenna Walsh CVT	Spleen
HOSPITAL NAME	The spleen exhibited normal size with areas of minor medial capsule asymmetry which may suggest focal areas of fibrosis. Intermittent non-disruptive hyperechoic medial parenchymal nodules were present adjacent to the hilus consistent with benign splenic myelolipomas. No masses present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
Pawsitive Wellness Veterinary Care	Liver/Gallbladder
REFERRING VET	The liver presented mild to moderately 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 primarily anechoic luminal content. The cystic and common bile ducts were normal.
Dr. Hardy	
INVOICE	
13149ag	
DATE	Gastrointestinal
03/13/2023	



PATIENT	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.
Maggie Mae Abruzzini	
SPECIES	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.
Canine	Normal visible colon wall layers were present with apparent formed feces in lumen.
BREED	Pancreas
Mini Schnauzer	The left pancreatic limb exhibited subtle prominent size with capsule asymmetry and heterogenous subtly cystic to nodular parenchyma. No evidence of peripheral inflammation.
SEX	Free Abdomen
FS	No omental masses, overt lymphadenopathy or peritoneal effusion was present.
AGE	ULTRASONOGRAPHIC FINDINGS
11yr	<ul style="list-style-type: none">• Hepatopathy-sonographically consistent with benign hepatopathy, vacuolar hepatopathy, cholestasis, inflammatory hepatopathy, hyperplasia, hematopoiesis or other possible. No evidence of hepatic neoplastic criteria.• Sonographically normal gallbladder.• Benign splenic nodules.• Heterogeneous subtly cystic/nodular pancreas-likely age-related/patient variant, remodeling from previous inflammation or low grade pancreatitis possible• Mild chronic renal changes
WEIGHT	
16.1lb	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Assuming normal clotting status a hepatic FNA for screening cytology could be considered to assess for evidence of inflammatory criteria given the ALT elevation. Hepatic core surgical biopsy is likely required for a definitive diagnosis. Continued hepatosupportive medications may prove beneficial.
IMAGING PERFORMED BY	No overt anesthetic contraindications given evidence of normal hepatic function indicated by normal BUN, GLU, CHOL and ALB levels. A spec cPL could be considered if previous history or current clinical signs suggestive of chronic pancreatitis.
Jenna Walsh CVT	
HOSPITAL NAME	
Pawsitive Wellness Veterinary Care	
REFERRING VET	
Dr. Hardy	
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DATE	
03/13/2023	



PATIENT

Maggie Mae Abruzzini

SPECIES

Canine

BREED

Mini Schnauzer

SEX

FS

AGE

11yr

WEIGHT

16.1lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh CVT

HOSPITAL NAME

Pawsitive Wellness
Veterinary Care

REFERRING VET

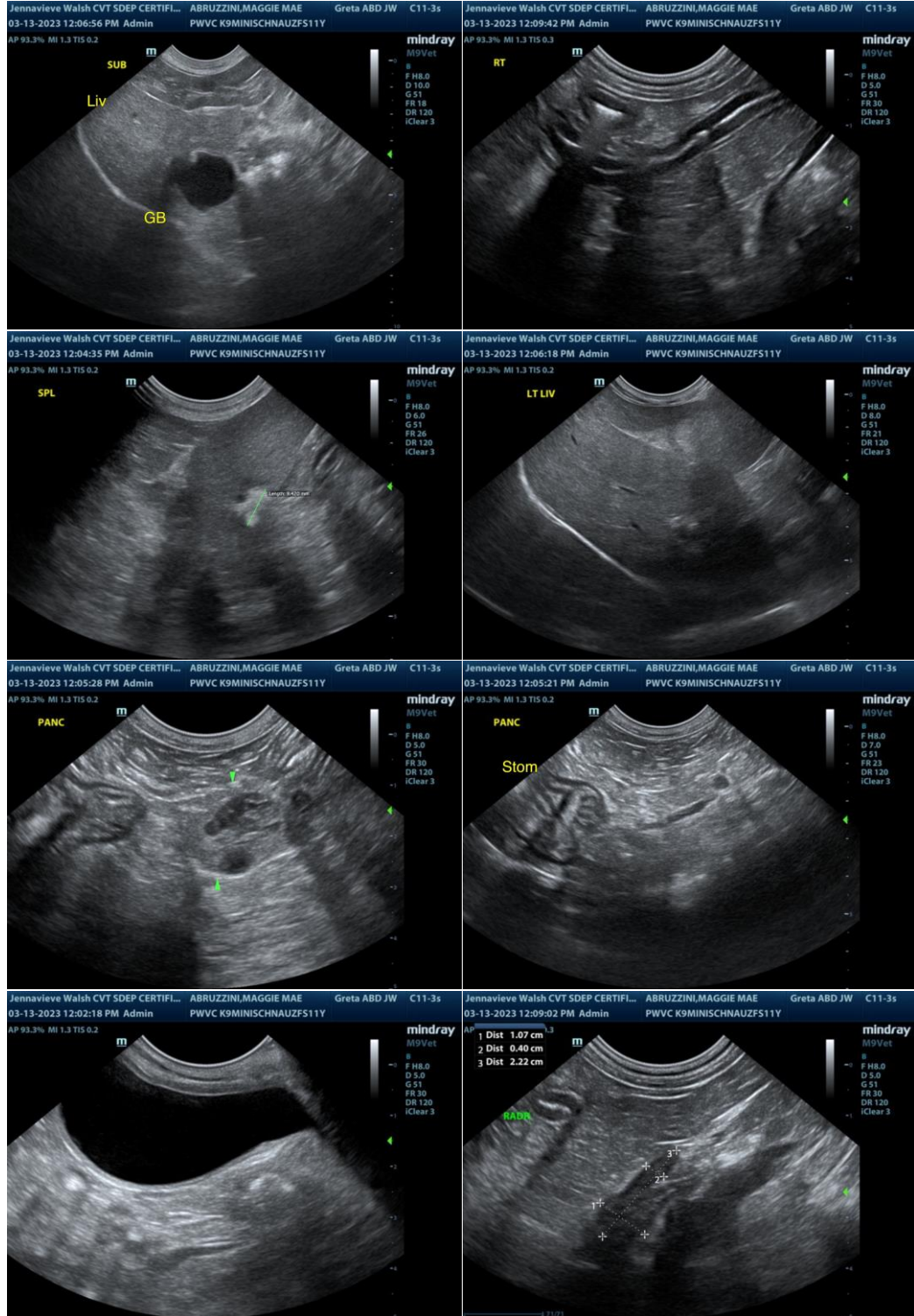
Dr. Hardy

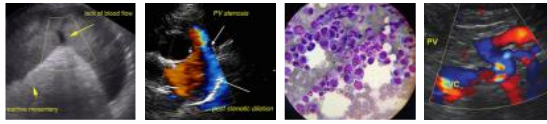
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PATIENT

Maggie Mae Abruzzini

SPECIES

Canine

BREED

Mini Schnauzer

SEX

FS

AGE

11yr

WEIGHT

16.1lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh CVT

HOSPITAL NAME

Pawsitive Wellness
Veterinary Care

REFERRING VET

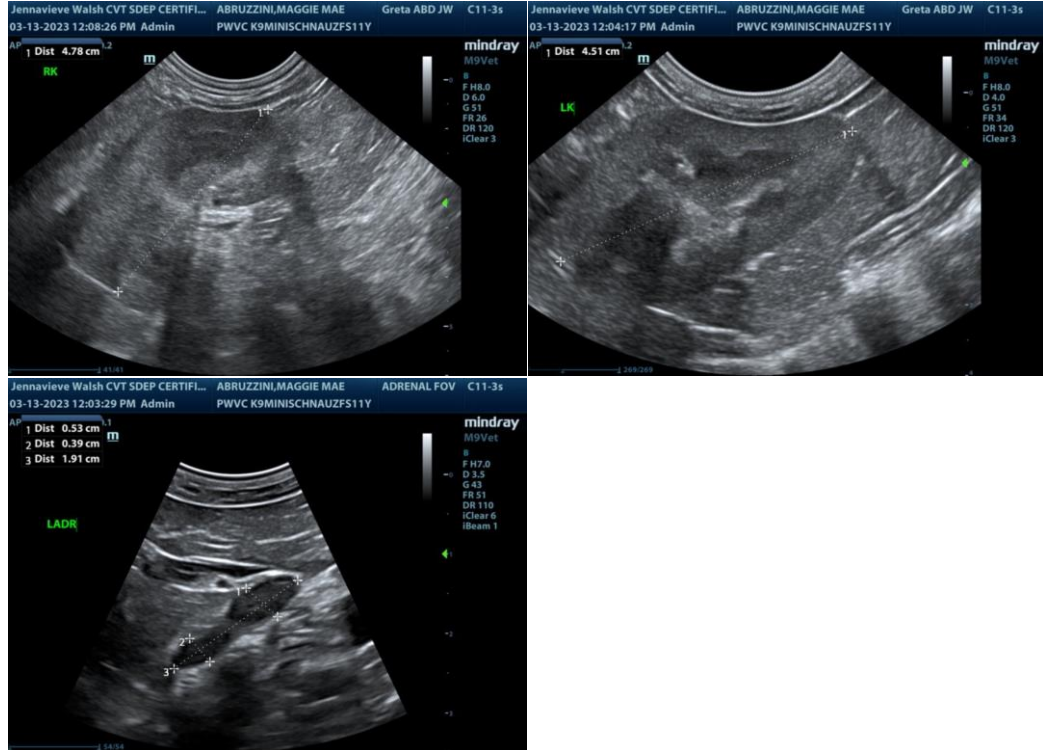
Dr. Hardy

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DATE

03/13/2023



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