



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Hershey Spehar	Acting uncomfortable. Back pain. Tense belly on palpation, especially caudal abdomen. Elevated liver enzymes.
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.
Dachshund	
<b>SEX</b>	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 4.7 cm in length. The right kidney measured 4.6 cm in length.
MN	
<b>AGE</b>	The area of the aortic trifurcation was free of pathology.
7yr	<b>Adrenal Glands</b>
<b>WEIGHT</b>	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 0.64 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 0.59 cm width at the caudal pole and 0.53 cm width at the cranial pole.
5.6kg	
<b>INTERPRETED BY</b>	<b>Spleen</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
<b>IMAGING PERFORMED BY</b>	<b>Liver/Gallbladder</b>
Dave Stasiuk	The liver presented mildly 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 and mild non-organized hyperechoic debris. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Alpine 24/7	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.
<b>REFERRING VET</b>	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.
Alpine 24/7	Normal visible colon wall layers were present with apparent formed feces in lumen.
<b>INVOICE</b>	<b>Pancreas</b>
131756ag	
<b>DATE</b>	
03/14/2023	



**PATIENT**

Hershey Spehar

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.

**SPECIES**

Canine

**Free Abdomen**

Several to multiple enlarged mid/caudal abdominal mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 1.2 cm x 0.72 cm.

**BREED**

Dachshund

No omental masses or peritoneal effusion.

**SEX**

MN

- Non-specific hepatopathy.
- Gallbladder debris-not consistent with mucocele criteria.
- Sonographically normal pancreas/GI tract.
- Mid/caudal abdominal mild mesenteric lymphadenopathy, regional perilymphatic hyperechoic omentum-possible non-specific mesenteric lymphadenitis.

**AGE**

7yr

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Given lack of reported GI signs in this patient the mesenteric lymphadenitis is of unclear clinical significance. Emerging neoplastic lymphatic criteria is considered less likely.

**WEIGHT**

5.6kg

Assuming normal clotting status a mesenteric lymph node and hepatic FNA for screening cytology could be considered. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial.

**INTERPRETED BY**

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

A thorough musculoskeletal and neurological examination is suggested if not done to assess for possible non-abdominal pain. Sonographic reassessment of the mesenteric lymph nodes is suggested if evidence of inflammation is present on CBC or if persistent clinical signs.

**IMAGING PERFORMED BY**

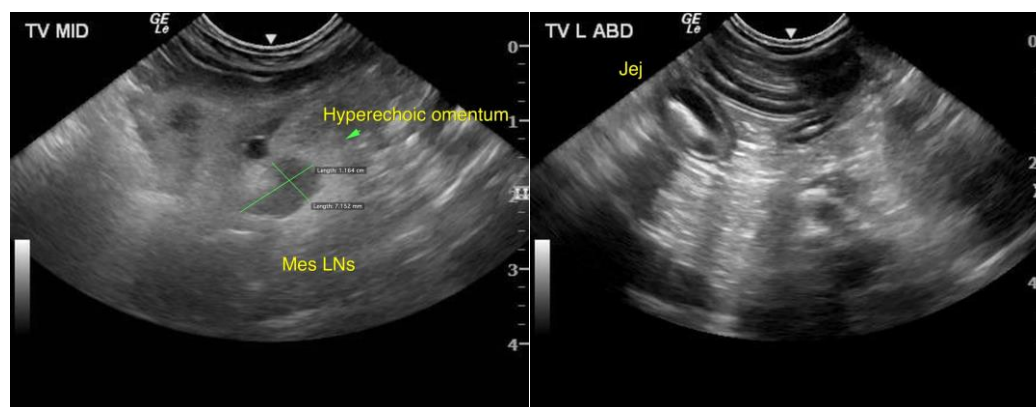
Dave Stasiuk

**HOSPITAL NAME**

Alpine 24/7

**REFERRING VET**

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**PATIENT**

Hershey Spehar

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

MN

**AGE**

7yr

**WEIGHT**

5.6kg

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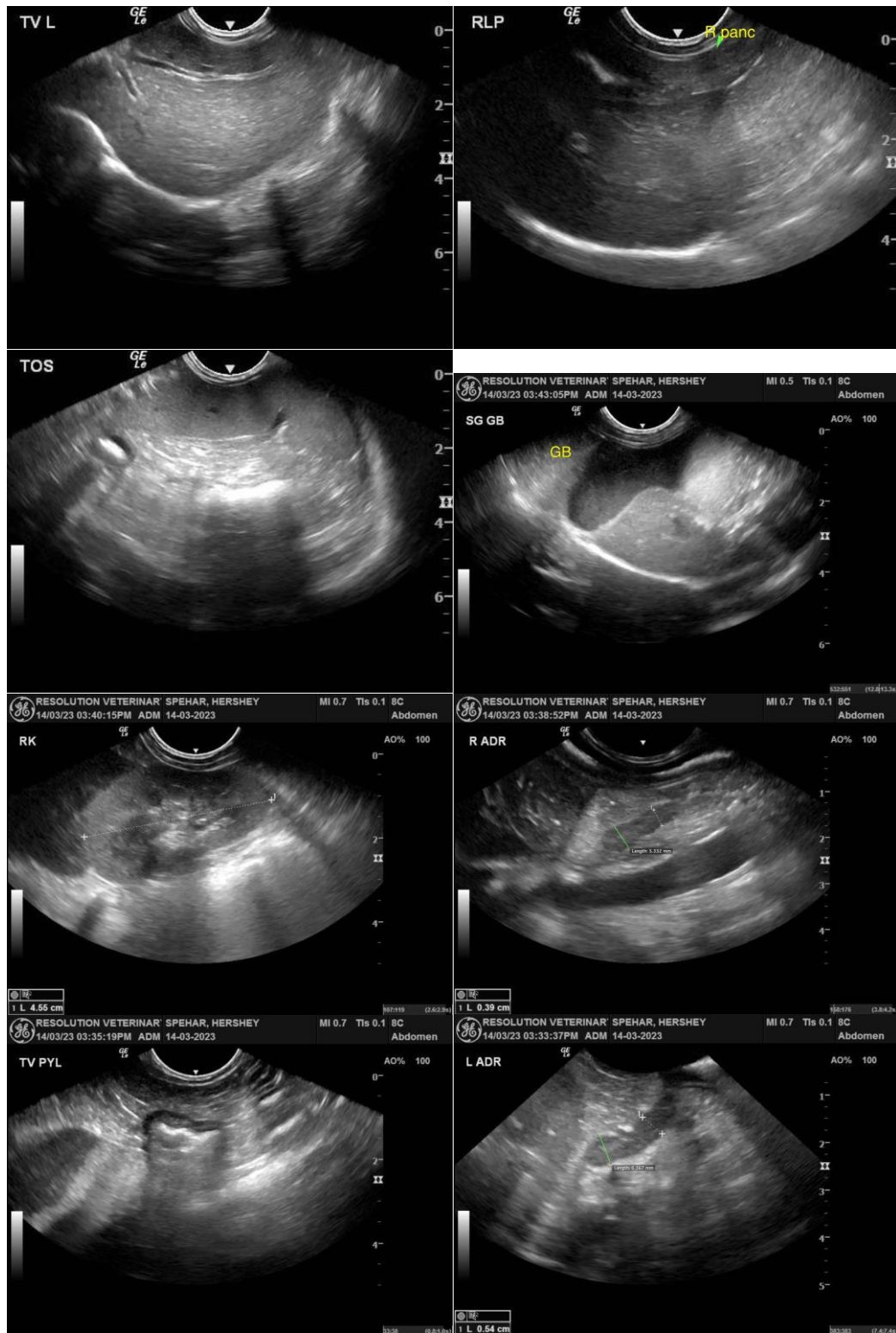
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**PATIENT**

Hershey Spehar

**SPECIES**

Canine

**BREED**

Dachshund



**SEX**

MN

**AGE**

7yr

**WEIGHT**

5.6kg

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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.

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