



## PATIENT

Ladybug Myers

## SPECIES

Canine

## BREED

Bloodhound

## SEX

FS

## AGE

1yr

## WEIGHT

85

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Sarah Green

## HOSPITAL NAME

Healing Spirit Animal  
Wellness

## REFERRING VET

Sarah Green

## INVOICE

24203

## DATE

03/15/2026

## PRESENTING CLINICAL SIGNS

- Presented due to acute onset pu/pd, vomiting and anorexia
- History of severe atopic dermatitis treated with Apoquel and cytopoint PRN
- Lepto vaccine administered 3/9/26

Abnormal PE/Chem/CBC/UA Results: CBC showed mild neutrophilic leukocytosis, ALT=707 (10-118) U/L. Chemistry otherwise unremarkable. UA: usg=1.014, UP:C<0.2, quiet sediment Free fluid visualized on abdominal ultrasound submitted for cytology. Interpretation noted "Weakly hemorrhagic neutrophilic predominant to mixed mild inflammation with evidence of chronic (hemorrhage/diapedesis) with mild mesothelial reactivity"

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

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 evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

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 7.0 cm in length. The right kidney measured 7.3 cm in length.

The area of the aortic trifurcation was free of pathology.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.47 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.56 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

Generalized hepatopathy. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Increased portal vein prominence was evident. The capsule of the liver was normal in margination. Normal vascular volume. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in



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appearance. The gallbladder was non-distended in size with thin walls and mild congealed non-organized debris. No evidence of gallbladder/peripheral gallbladder inflammation or wall edema was present. The cystic and common bile ducts were normal.

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### **Gastrointestinal**

The stomach presented mild thickened wall. Intact wall layering was maintained and distinct. The gastric lumen was empty with mild gas.

## BREED

Bloodhound

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 mechanical/metabolic ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

## SEX

FS

### **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

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### **Free Abdomen**

Mild volume perihepatic and caudal abdomen effusion.

No visualized significant or swollen mesenteric lymphadenopathy.

## WEIGHT

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Mild perihepatic increased omental echogenicity.

## ULTRASONOGRAPHIC FINDINGS

### **Primary**

- Acute hepatopathy
- Non-edematous gallbladder with mild non-organized bile debris (non-mucocele)
- Sonographically normal bilateral kidneys/ adrenal glands
- Mild gastritis, sonographically normal empty small intestine
- Mild volume perihepatic/ caudal abdomen effusion

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the liver may include non-specific acute hepatitis, (viral, bacterial, leptospirosis, toxin) with non-cardiogenic congestion or occult neoplasia, all potentials. Further assessment of the liver may include assuming normal clotting status, FNA cytology, and leptospirosis titers / PCR. No evidence of intrahepatic or extrahepatic vascular anomaly. Bile acid profile given PPD may be considered.

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Hospitalization with empirical therapy for non-specific acute hepatitis and concurrent gastrointestinal support and monitoring pending additional diagnostics is recommended.

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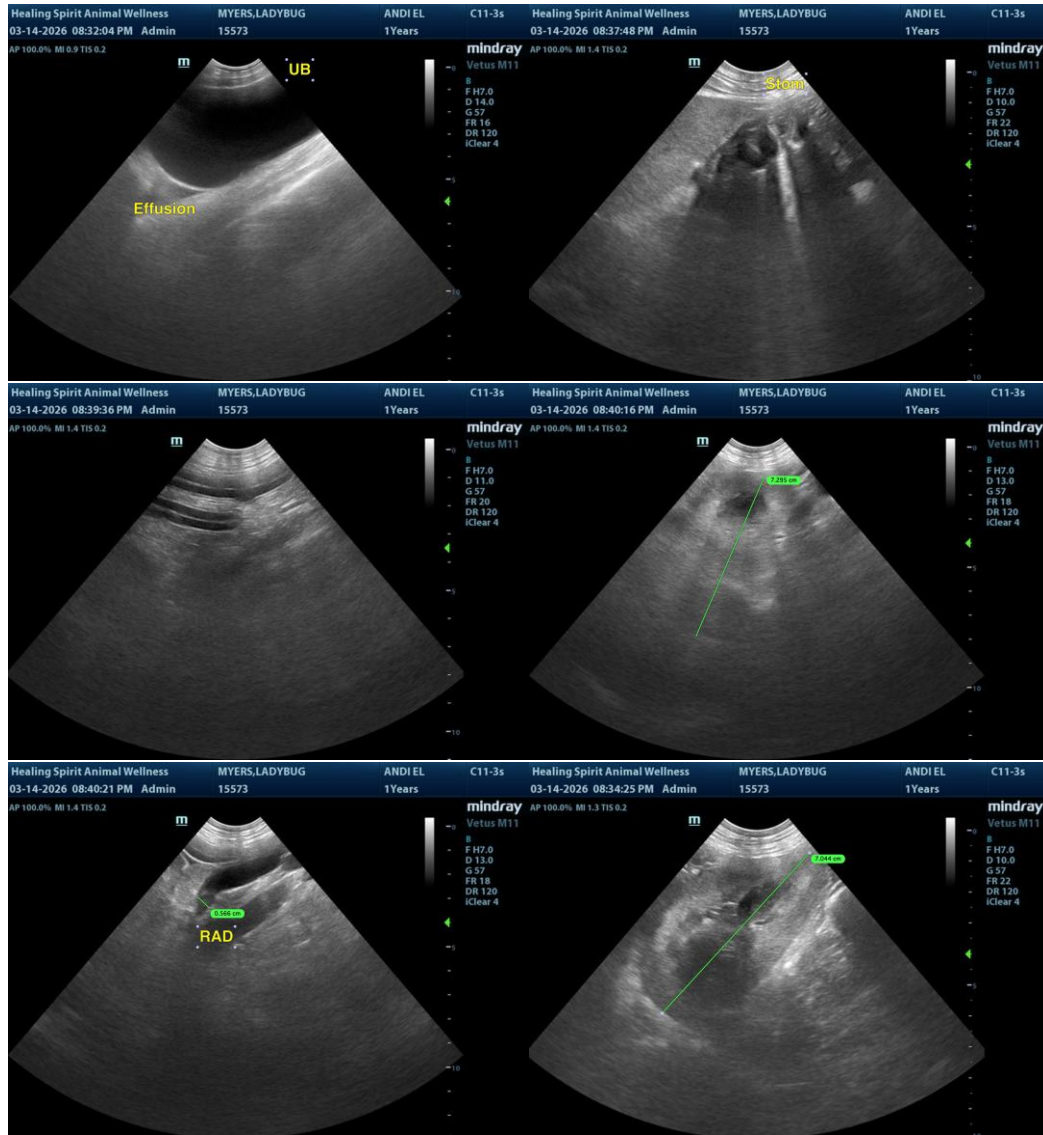
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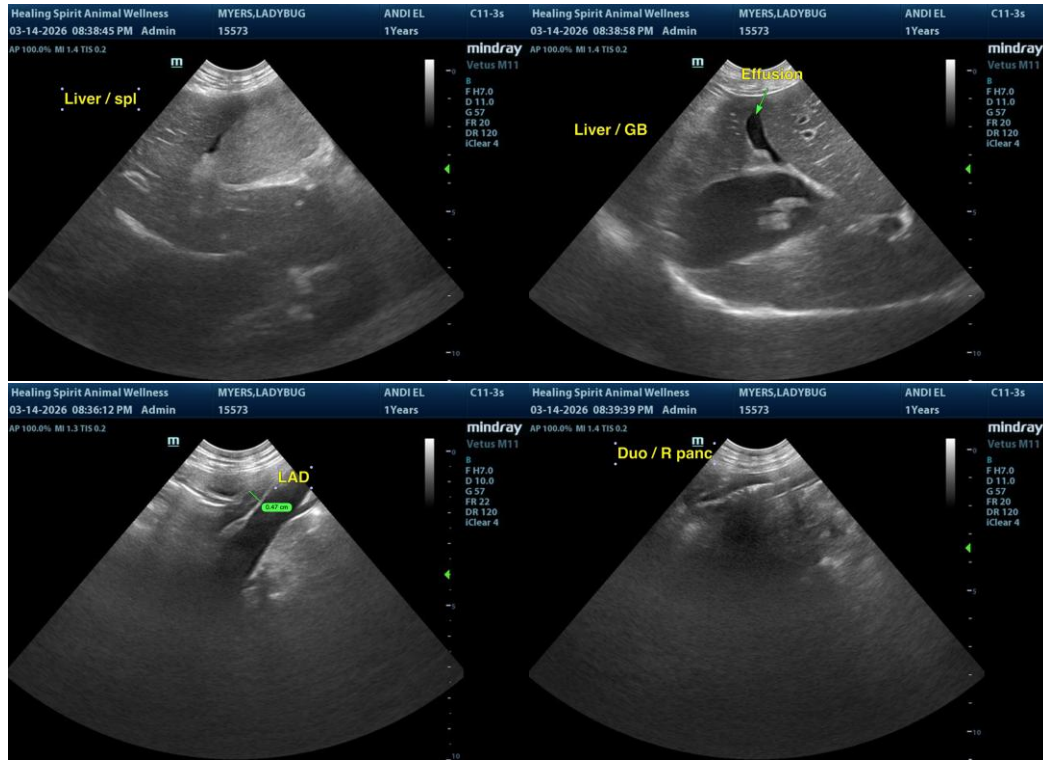
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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