



**PATIENT PRESENTING CLINICAL SIGNS**

Jingles Petrisko Elevated liver enzymes, large non healing skin wound on back.  
 Medication: Denamarin

**SPECIES** Abnormal PE/Chem/CBC/UA Results: ALP 931 ALT 132 GGT 26 TBIL 0.1 CHOL 427 PLT 643

Canine

**ULTRASONOGRAPHIC RECHECK EXAMINATION OF THE ABDOMEN**

**BREED** *Urinary System*

Boston Terrier

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.

**SEX**

FS

**AGE**

2015

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. Static pinpoint to focal bilateral renal mineral was present. The left kidney measured 4.9 cm in length. The right kidney measured 5.2 cm in length.

The area of the aortic trifurcation was free of pathology.

**WEIGHT**

26.5

*Adrenal Glands*

The bilateral adrenal glands were mildly prominent in size with symmetrical capsule contour and subtle non-homogenous parenchyma. No adrenal tumors. The left adrenal gland measured 0.63 cm width at the caudal pole and 2.3 cm length. The right adrenal gland measured 0.94 cm width at the caudal pole and 2.0 cm length.

**INTERPRETED BY**

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

*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.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

*Liver/Gallbladder*

**HOSPITAL NAME**

White Haven AH

The liver presented 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 moderate non-dependent mildly congealed non-organized debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

**REFERRING VET**

Dengler

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*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.

**DATE**

03/17/2023

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.



**PATIENT**

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

Jingles Petrisko

**Pancreas**

**SPECIES**

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.

Canine

**Free Abdomen**

**BREED**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

Boston Terrier

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

- Static hepatopathy. Mildly progressive non-dependent to congealed gallbladder debris-suggestive of early non-inflamed mucocele.
- Static mild bilateral renal mineralization.
- Non-specific prominent adrenal glands.

FS

**AGE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

2015

The hepatic presentation continues to suggest benign hepatopathy. Concern for emerging non-inflamed gallbladder mucocele which at times may be associated with hypothyroidism is indicated. Ideally Ursodiol therapy is suggested in conjunction with Denamarin.

**WEIGHT**

The mildly prominent bilateral adrenals are of unclear significance given lack of reported clinical signs suggestive of Cushing's syndrome. A full adrenal workup could be considered if clinical signs arise.

26.5

**INTERPRETED BY**

Sonographic monitoring of the gallbladder is likely indicated especially if progressive hepatic enzyme elevations and/or cholestasis.

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(Canine and Feline)

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ARDMS/RVT

**HOSPITAL NAME**

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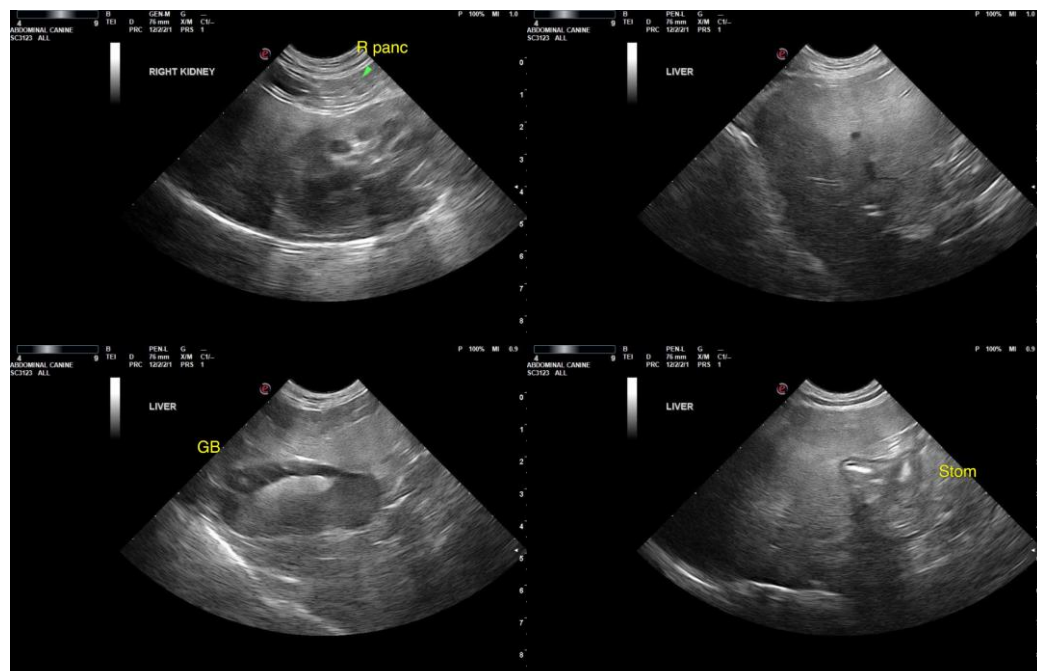
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**PATIENT**

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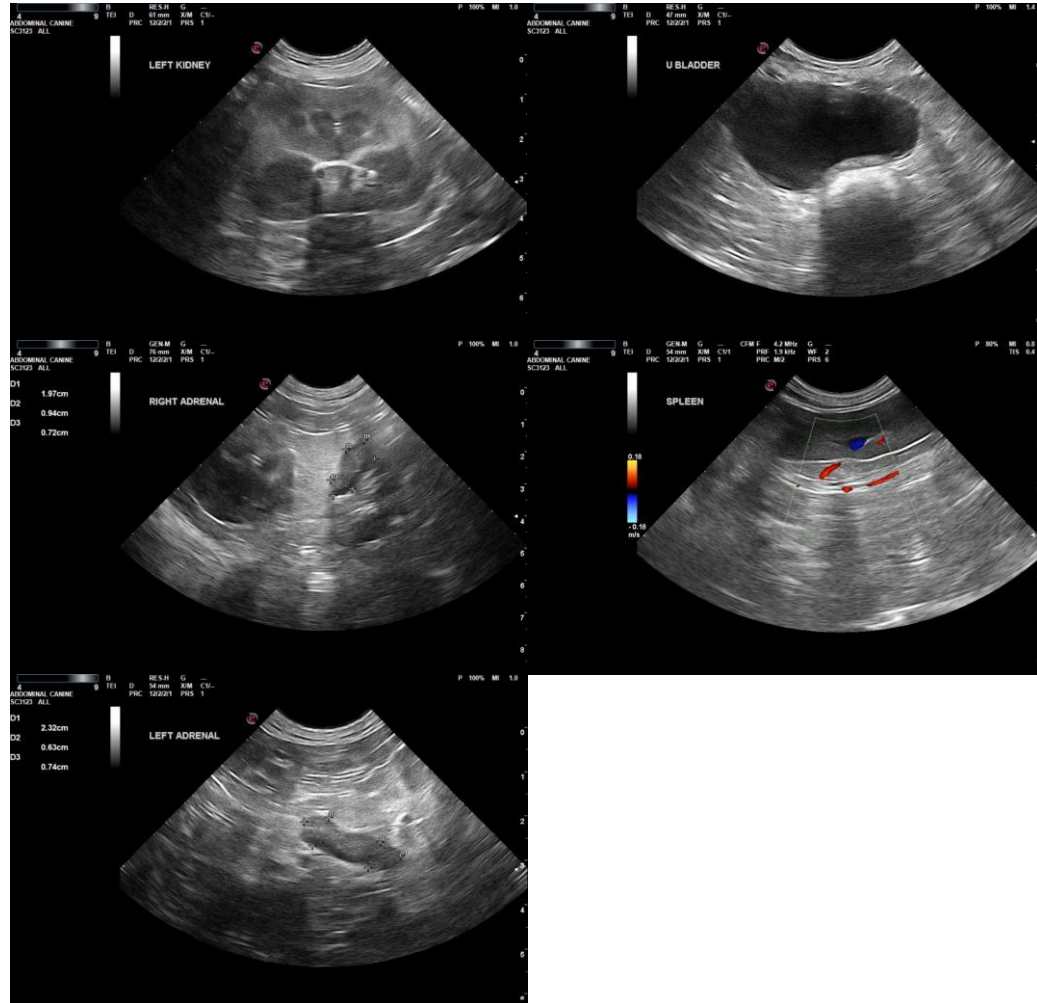
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)  
[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)