

**PATIENT**

Rogue Seiler

SPECIES

Canine

BREED

English Pointer

SEX

MN

AGE

10yr

WEIGHT

56lb

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING
PERFORMED BY**

M. Kermendy CVT

HOSPITAL NAMEWauwatosa Veterinary
Clinic**REFERRING VET**

Dr Elaine Binor, DVM

**INVOICE
24358****DATE**

03/30/2026

PRESENTING CLINICAL SIGNS

History of elevated liver enzymes. Doing well at home but wanted to check liver status since enzymes have remained persistently elevated for the last several months. Checking to rule out structural hepatic disease, pancreatitis, geriatric hepatic changes or other disease process. Lepto PCR pending.

Abnormal PE/Chem/CBC/UA Results: ALT = 288 (10-125) Alk Phos = 1144 (23-212) GGT = 17 (0-11) Amylase = 416 (500-1500)

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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.9 cm in length. The right kidney measured 6.9 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

A small, non-capsule deforming non-homogenous mildly hypoechoic non-mineralized nodule was present in the caudal left adrenal gland measuring 0.76 cm x 0.53 cm. The left adrenal gland was mildly enlarged at the caudal pole. The left adrenal gland measured 0.84 cm width at the caudal pole. The right adrenal gland was indistinctly visualized, no overt pathology in the area of the right adrenal gland subjectively measuring 0.62 cm in width.

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

The liver presented borderline 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. A solitary caudal intraparenchymal thinly walled cyst containing anechoic fluid was present measuring 1.8 cm in diameter. 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 mild non-organized debris. The cystic and common bile ducts were normal.



PATIENT

Rogue Seiler

SPECIES

Canine

BREED

English Pointer

SEX

MN

AGE

10yr

WEIGHT

56lb

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 mechanical/metabolic ileus, obstruction or foreign material.

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

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.

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Chronic hepatopathy with intraparenchymal cyst
- Mild gallbladder debris (non-mucocele)
- Mild chronic renal changes
- Caudal left adrenal nodule with mild caudal left adrenomegaly-suspect adenoma

INTERPRETED BY

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

IMAGING PERFORMED BY

M. Kermendy CVT

HOSPITAL NAME

Wauwatosa Veterinary
Clinic

REFERRING VET

Dr Elaine Binor, DVM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the liver was nonspecific but most consistent with chronic benign hepatopathy. Considerations for the liver may include benign vacuolar hepatopathy, inflammatory/infectious/immune mediated disease, hyperplasia, hematopoiesis, toxic hepatopathy (i.e., copper), cholestatic hepatopathy or other with neoplasia thought less likely. Ultrasound guided FNA of the liver using a 25-gauge needle and assuming normal coagulation parameters would be warranted for screening cytology. Hepatosupportive medications such as Denamarin or Vitamin E as well as Ursodiol due to its antioxidant and immunomodulatory effects within the liver would be warranted, although these medications may not result in decreased hepatic enzyme levels. Correlation with leptospirosis titers / PCR is recommended. Core or surgical biopsy is likely required for definitive diagnosis.

Adrenal workup is warranted if clinical signs consistent with Cushing syndrome in conjunction with left adrenal nodule. Minor potential for emerging left adrenal tumor not definitively excluded. Sonographic monitoring of the left adrenal nodule and liver for evidence of progression with monitoring of systemic BP is recommended.

INVOICE

24358

DATE

03/30/2026



PATIENT

Rogue Seiler

SPECIES

Canine

BREED

English Pointer

SEX

MN

AGE

10yr

WEIGHT

56lb

INTERPRETED BY

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

IMAGING PERFORMED BY

M. Kermendy CVT

HOSPITAL NAME

Wauwatosa Veterinary
Clinic

REFERRING VET

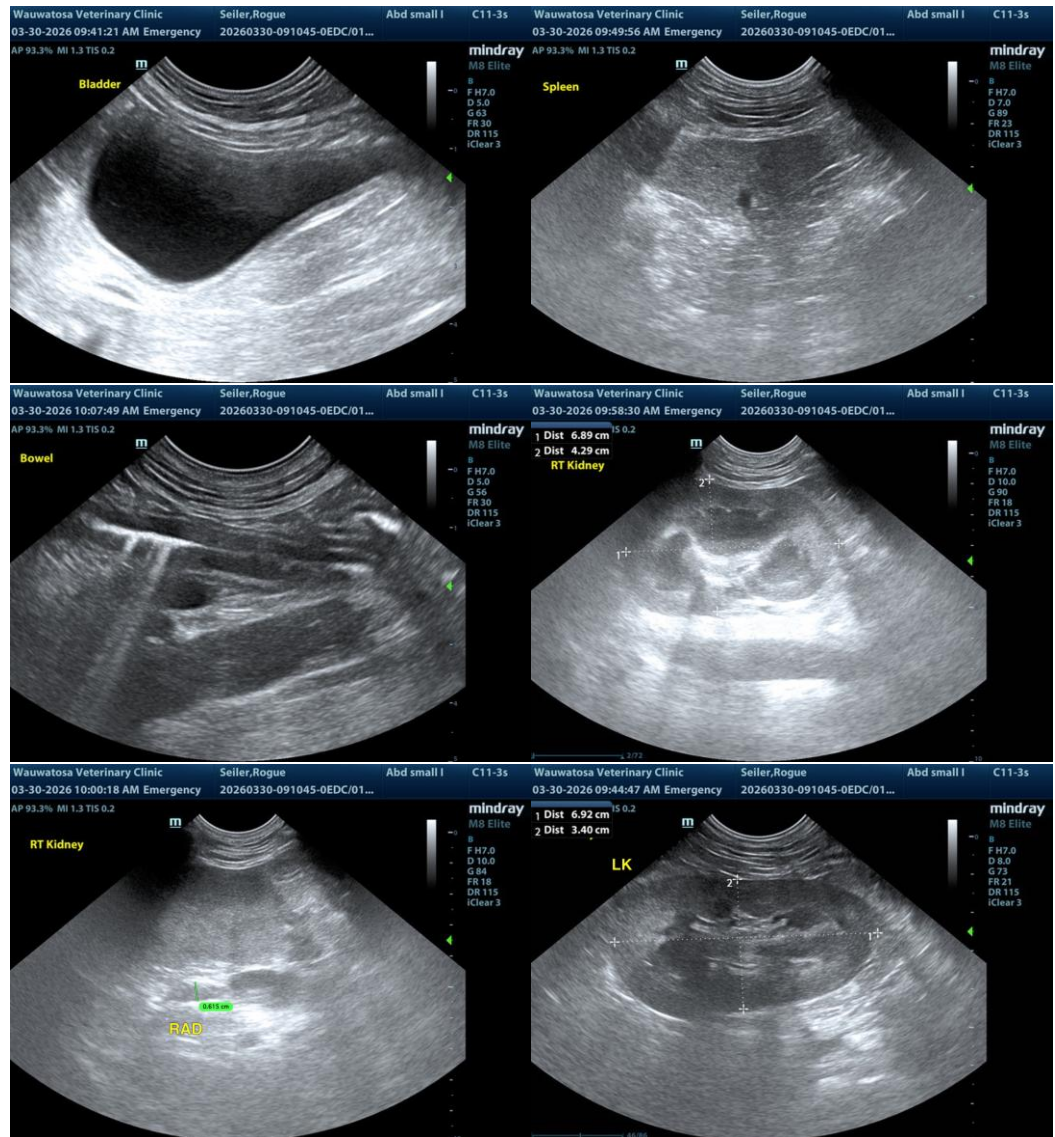
Dr Elaine Binor, DVM

INVOICE

24358

DATE

03/30/2026





PATIENT

Rogue Seiler

SPECIES

Canine

BREED

English Pointer

SEX

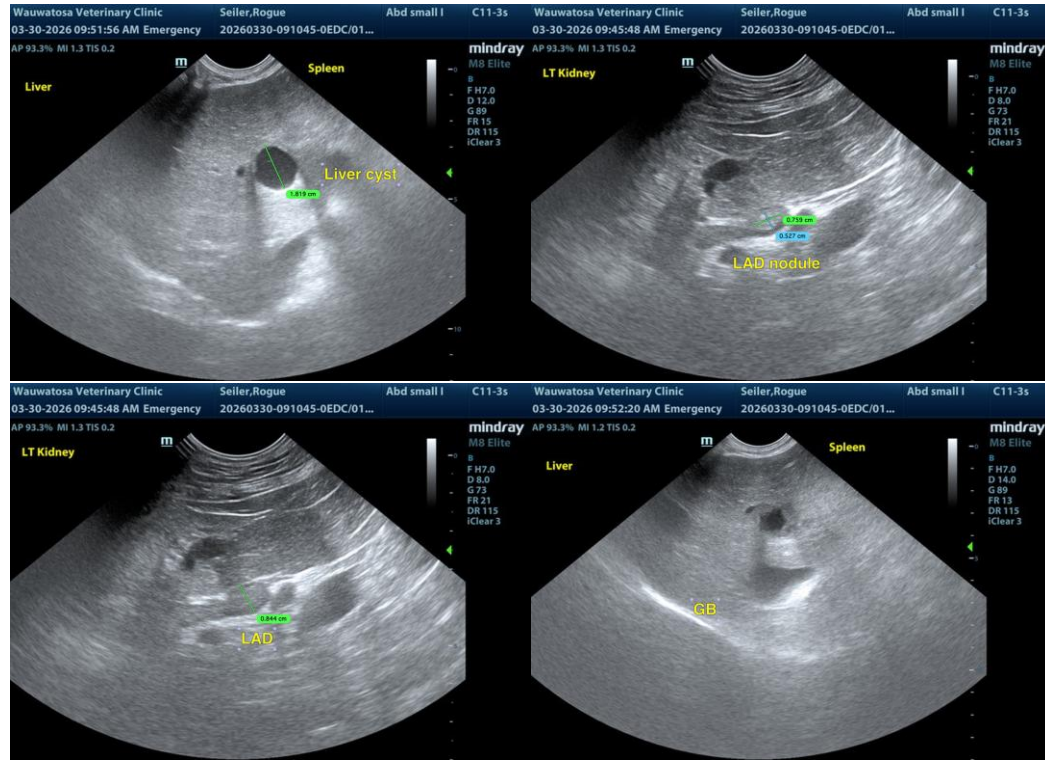
MN

AGE

10yr

WEIGHT

56lb



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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

M. Kermendy CVT

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com

HOSPITAL NAME

Wauwatosa Veterinary
Clinic

REFERRING VET

Dr Elaine Binor, DVM

INVOICE

24358

DATE

03/30/2026