



PATIENT	PRESENTING CLINICAL SIGNS
Duckie Harner	Clinical Exam Findings: Patient had a mild elevation of ALT 164 on 2/26/26, rec monitoring patient and recheck liver values in 30d - Patient presented on 4/10/26 for increased urination and water intake. Urinalysis was normal, with no signs of a UTI. - On 4/10/26 ALT increased to 1436.
SPECIES	
Canine	Owner called on 4/13/26 and stated that P has started to urinate in the house which is abnormal. ABNORMAL Labwork Values- Total Protein 7.6 g/dL HIGH 5.1 - 6.9, Albumin 3.0 g/dL 2.7 - 3.9
BREED	Globulins 4.6 g/dL HIGH 2.2 - 3.7, Albumin:Globulin Ratio 0.7 Ratio LOW 0.8 - 1.7, ALT 1436 U/L HIGH 17 - 115- ***Verified by repeat analysis. AST 257 U/L HIGH 11 - 46, Alk Phos 221 U/L HIGH 8 - 196, GGT 12 U/L HIGH <9, Bilirubin-Total 0.8
Pitbull	
SEX	Current Medications- None. Radiographic Findings-None obtained
MN	
AGE	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
9 yrs	Urinary System
WEIGHT	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine or 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.
56.4 lbs.	The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture.
INTERPRETED BY	No evidence of pathology in the area of the aortic trifurcation.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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 6.6 cm in length. The right kidney measured 6.4 cm in length.
IMAGING PERFORMED BY	
Sara Hansen	
HOSPITAL NAME	Adrenal Glands
Cordon Road VC	The adrenals were subjectively mildly subnormal in size, given patient body weight, with symmetrical contour and homogeneous parenchyma. The left adrenal gland measured 0.45 cm width at the caudal pole. The right adrenal gland measured 0.47 cm width at the caudal pole.
REFERRING VET	
Dr. Rowland	Spleen
INVOICE	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.
10812	
DATE	
4/15/26	



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Liver/ Gallbladder

The liver was subnormal in size with normal contour. The liver parenchyma was nonuniform and hypoechoic to the spleen with a mild coarse echotexture and subjective mild parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, 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 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 were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting subnormal liver size
- Normal gallbladder
- Subjective mild subnormal bilateral adrenal glands
- Normal kidneys / urinary bladder – no evidence of renal or urinary bladder mineral / calculi

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the liver may include nonspecific chronic hepatitis, hepatotoxicosis, i.e., copper, or other chronic inflammatory disease, given primarily insignificant elevated ALT, nonobstructive cholestasis, or other with hepatic neoplastic criteria considered unlikely. Definitive intrahepatic or extrahepatic macroscopic shunt was not obvious. Further assessment may include, assuming normal clotting status and if accessible, hepatic FNA cytology, leptospirosis titers/PCR, and bile acid profile. Definitive diagnosis would require hepatic biopsies for histopathology and copper evaluation.

Monitoring of albumin, glucose, BUN, and cholesterol levels as markers of hepatic function going forward is advised. Continued hepatosupportive medication with monitoring would be more conservative.



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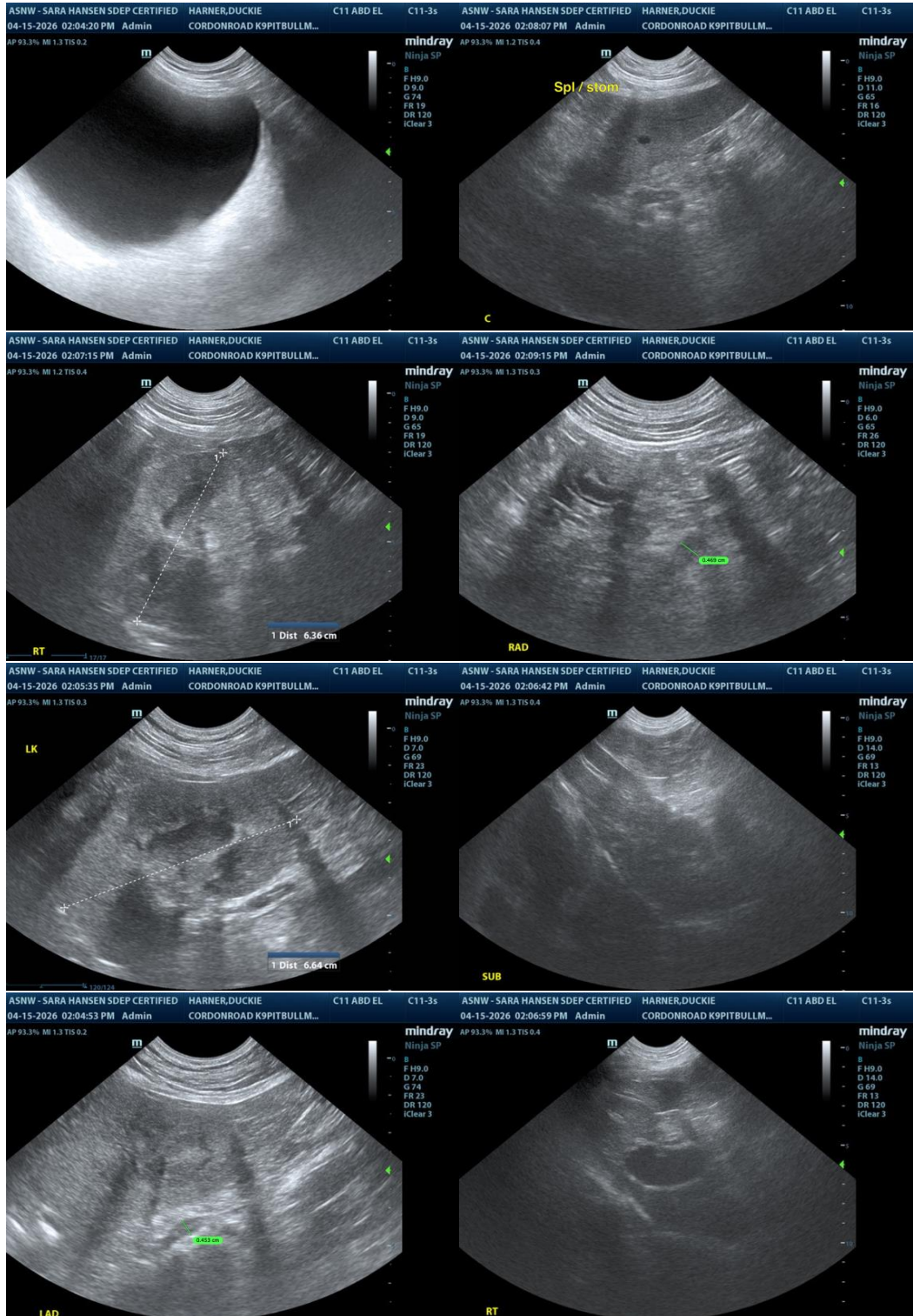
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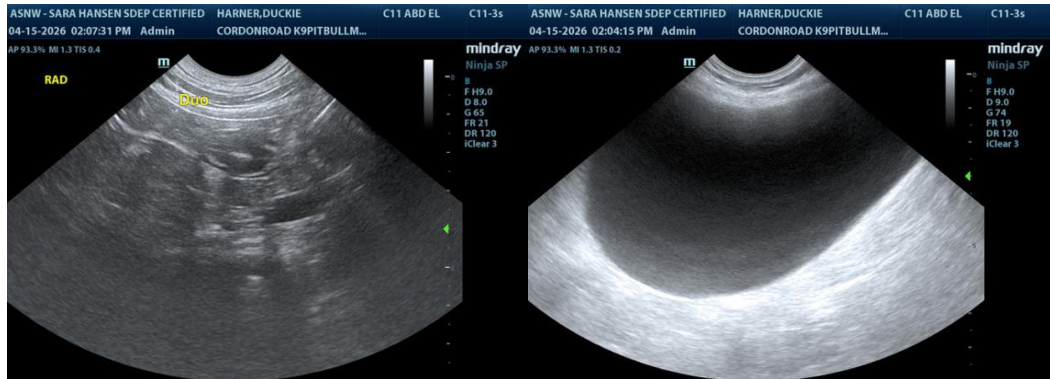
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com